



## 2019-2020 STUDENT APPLICATION

Please fill out this application online at  
<http://www.fenwayhs.org/admissions.html>

### Pilot Schools Admissions Policy

The application process for Pilot Schools is intended to assist students and their families in making an educated school selection and to ensure a good match for the student and family. Parents and students are encouraged to attend one of the Open Houses to learn more about the school. Fenway, in accordance with BPS nondiscrimination policies, does not discriminate in its programs, facilities, or employment or educational opportunities on the basis of race, color, age, criminal record (inquiries only), disability, pregnancy, homelessness, sex/gender, gender identity, religion, national origin, ancestry, sexual orientation, genetics, or military status, and does not tolerate any form of retaliation, or bias-based intimidation, threat, or harassment that demeans individuals' dignity or interferes with their ability to learn or work.

### Open House Dates (in the Fenway High School Commons)

- Wednesday, December 5, 2018 from 9 a.m. – 11 a.m.
- Wednesday, December 19, 2018 from 9 a.m. – 11 a.m.
- Thursday, January 10, 2019 from 9 a.m. – 11 a.m.

### Transfer Applications

Applications for 10<sup>th</sup> or 11<sup>th</sup> grades will be accepted at any time. However, it is unknown how many openings there will be (if any) until late summer. Decisions are made as openings become available.

### Decision Timeline

- **January 25, 2019:** Deadline to apply
- **March, 2019:** Family Information Meetings for prospective students (by invitation only)
- **April, 2019:** Decision letters mailed
- **Summer 2019:** Waitlist Admissions and 10<sup>th</sup> and 11<sup>th</sup> grade openings filled.

## How to Apply

### Submit a Completed Application

Your completed application must be submitted online or postmarked or received by **January 25, 2019**. An application will not be considered unless it is complete.

#### A completed application includes:

- Two-page Application form
- Student Essay
- Copy of current and past year transcripts
- Two letters of Recommendation from:
  1. an academic teacher AND
  2. a personal mentor, school counselor, community leader, OR another teacher

**Postmark Deadline for Applications  
is January 25, 2019**

**Send all materials to:**

Fenway High School  
67 Alleghany Street  
Boston, MA 02120

**Questions?**

Please email [admissions@fenwayhs.org](mailto:admissions@fenwayhs.org) or  
call our school at 617.635.9911

# STUDENT INFORMATION

(PRINT all your responses on this page, one letter per box.)

First Name														
Middle Name														
Last Name														
Address														
City														
State														
Home Phone														
Cell Phone														
Email														

Grade applying for:  9     10     11

I identify my gender as:  female  male  nonbinary  prefer not to say  \_\_\_\_\_

I identify my Race/Ethnicity as (please choose all that apply):  Asian  Black  Latinx/Hispanic  
 Native American  White  Pacific Islander  prefer not to say  \_\_\_\_\_

Date of Birth			/			/					Age:			
Place of Birth														

What languages do you speak (please check all that apply)?  English  Spanish,  Haitian creole,  Cape Verdean creole,  Chinese,  Vietnamese,  Portuguese,  Somali,  Arabic,  French

What language do you speak most often at home?  English  Spanish,  Haitian creole,  Cape Verdean creole,  Chinese,  Vietnamese,  Portuguese,  Somali,  Arabic,  French  \_\_\_\_\_

BPS Student # 

--	--	--	--	--	--

Name of Current School: \_\_\_\_\_ Telephone# \_\_\_\_\_

Name of Teacher Recommendation Provider: \_\_\_\_\_ Email: \_\_\_\_\_

Name of Second Recommendation Provider: \_\_\_\_\_ Email: \_\_\_\_\_

Do you have a sibling currently attending Fenway:  Yes  No

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Grade:  9  10  11  12

# PARENT/CAREGIVER INFORMATION

## Mother or Guardian

First Name																				
Middle Name																				
Last Name																				
Address																				
City																				
State																				
Zip Code:																				
Home Phone																				
Cell Phone																				
Email																				

## Father or Guardian (Please use "same" where applicable)

First Name																				
Middle Name																				
Last Name																				
Address																				
City																				
State																				
Zip Code:																				
Home Phone																				
Cell Phone																				
Email																				

## Emergency Contact Information

Emergency Name																				
Emergency Phone																				

\_\_\_\_\_  
**Student Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Signature of Parent/Caregiver**

\_\_\_\_\_  
**Date**





# RECOMMENDATION FORM (PART I)

**Instructions for the Student Applicant:**

1. Please fill in your name and telephone number in the space below.
2. Give one form to an academic teacher (in a subject such as Math, Science, English, Foreign Language, History or Social Studies) and one form to a counselor / advisor at your school or other person who knows you well, such as a mentor or pastor, or another teacher.
3. After the person has filled it out, he or she should seal it in an envelope, put his or her signature across the seal, and give it to you to mail. You may ask the person to mail it directly. However, students are strongly encouraged to return all materials together in their application package. An application is not complete without letters of recommendations.

(PLEASE PRINT)

Student Applicant: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Grade Applying for: \_\_\_\_\_ If ELL, Current ELD level: \_\_\_\_\_ Projected ELD level for 2018/19: \_\_\_\_\_

**Please rate the student in the following categories:**

	Needs improvement	Below average	Average	Above average	Excellent
Attendance					
Participation					
Work ethic					
Leadership skills					

**Instructions for the Person Writing a Recommendation:**

Thank you for agreeing to evaluate this student for application to Fenway High School. Your thoughtful comments are very important to us. They will enable us to make an informed decision in the interest of this student and our program. Please read the attached brief school descriptions before you complete this form.

Please return this evaluation to the student in a sealed envelope, with your signature across the seal, in time for him or her to send it by the deadline: February 1, 2019.

(PLEASE PRINT)

Name: \_\_\_\_\_

Place of Work: \_\_\_\_\_

Position: \_\_\_\_\_

(PART 2 CONTINUED ON THE BACK)

## RECOMMENDATION FORM (PART 2)

---

### **School Mission:**

Fenway High School's mission is to create a socially committed and morally responsible community of learners, which values its students as individuals. Its goal is to encourage academic excellence and Habits of Mind, self-esteem and leadership development among all the school's students.

### **School Expectations:**

In reviewing applications for admission, Fenway High seeks evidence of the following qualities: commitment and self-discipline to advance academically, behaviorally, and emotionally; and the ability to contribute to building a successful, supportive and inclusive school community. Our curriculum is designed to build students' skills and knowledge through tackling problems and projects the way successful adults – scientists, business people, social workers, doctors, etc. – approach them. All classes require students to work individually as well as in cooperative groups and to pursue projects that test their ability to apply knowledge.

Please comment on the student's academic potential, ability to work independently, and consideration of others. Please comment on student's character and personality (peer relationships, maturity and sense of humor) and any strengths, challenges, or weaknesses that we should be aware of.

---

### **How long have you known this applicant and in what capacity?**

---

---

---

### **Please share with us why you recommend this student.**

---

---

---

---

---

---

---

---

---

---

(PLEASE ADD PAGES AS NEEDED)

# RECOMMENDATION FORM (PART I)

**Instructions for the Student Applicant:**

1. Please fill in your name and telephone number in the space below.
2. Give one form to an academic teacher (in a subject such as Math, Science, English, Foreign Language, History or Social Studies) and one form to a counselor / advisor at your school or other person who knows you well, such as a mentor or pastor, or another teacher.
3. After the person has filled it out, he or she should seal it in an envelope, put his or her signature across the seal, and give it to you to mail. You may ask the person to mail it directly. However, students are strongly encouraged to return all materials together in their application package. An application is not complete without letters of recommendations.

(PLEASE PRINT)

Student Applicant: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Grade Applying for: \_\_\_\_\_ If ELL, Current ELD level: \_\_\_\_\_ Projected ELD level for 2018/19: \_\_\_\_\_

**Please rate the student in the following categories:**

	Needs improvement	Below average	Average	Above average	Excellent
Attendance					
Participation					
Work ethic					
Leadership skills					

**Instructions for the Person Writing a Recommendation:**

Thank you for agreeing to evaluate this student for application to Fenway High School. Your thoughtful comments are very important to us. They will enable us to make an informed decision in the interest of this student and our program. Please read the attached brief school descriptions before you complete this form.

Please return this evaluation to the student in a sealed envelope, with your signature across the seal, in time for him or her to send it by the deadline: February 1, 2019.

(PLEASE PRINT)

Name: \_\_\_\_\_

Place of Work: \_\_\_\_\_

Position: \_\_\_\_\_

(PART 2 CONTINUED ON THE BACK)



## RECOMMENDATION FORM (PART 2)

---

### **School Mission:**

Fenway High School's mission is to create a socially committed and morally responsible community of learners, which values its students as individuals. Its goal is to encourage academic excellence and Habits of Mind, self-esteem and leadership development among all the school's students.

### **School Expectations:**

In reviewing applications for admission, Fenway High seeks evidence of the following qualities: commitment and self-discipline to advance academically, behaviorally, and emotionally; and the ability to contribute to building a successful, supportive and inclusive school community. Our curriculum is designed to build students' skills and knowledge through tackling problems and projects the way successful adults – scientists, business people, social workers, doctors, etc. – approach them. All classes require students to work individually as well as in cooperative groups and to pursue projects that test their ability to apply knowledge.

Please comment on the student's academic potential, ability to work independently, and consideration of others. Please comment on student's character and personality (peer relationships, maturity and sense of humor) and any strengths, challenges, or weaknesses that we should be aware of.

---

### **How long have you known this applicant and in what capacity?**

---

---

---

### **Please share with us why you recommend this student.**

---

---

---

---

---

---

---

---

---

---

(PLEASE ADD PAGES AS NEEDED)