



Boston Day and Evening Academy (BDEA) Application

BDEA's mission is to re-engage off-track students in their education, and to prepare them for high school graduation, post-secondary success, and meaningful participation in their community. To support this mission, BDEA offers a supportive, safe, and engaging school culture along with unique programming elements:

- ✓ Program options to accommodate students' personal schedules:
 - Day program: 9-2:30 PM
 - Evening program: 10-3:30 PM
 - Early release Wednesdays and Fridays for Enrichment classes
- ✓ Competency-based teaching and assessment lets you earn credit for what you know
- ✓ Small class size
- ✓ An advisory that meets daily to support social and academic growth
- ✓ Unique learning opportunities:
 - Project month, offering "hands-on" learning
 - Student Portfolios, offering an opportunity to reflect on learning, and to set goals
 - Multiple opportunities throughout the year to use your Voice, including a monthly Youth Slam at Haley House Bakery and Café in Dudley Square
 - Student Leadership Team, offering perspectives on social justice and an opportunity to work with high school students outside of Boston to examine bias and stereotyping
 - Enrichment classes that expose students to career options and focus on 21st century skills important for post graduate success (e.g. Music Production, Culinary Skills, Art, Career Readiness, etc.)
 - Four graduation ceremonies every year, giving you the opportunity to receive your diploma when you have fulfilled all graduation requirements.

STEP 1: COMPLETE APPLICATION , return to:	<p>Mail to: Boston Day and Evening Academy 20 Kearsarge Avenue Roxbury, MA 02119 Attention: Admissions Manager</p> <p><i>Applications are accepted through February 28th for the year ending in June. After February 28th, all applications are considered for the next school year beginning in September.</i></p> <p>✓ TRANSCRIPTS <i>must</i> be attached to the application before submitting.</p>
STEP 2: LOTTERY	<p>✓ Each trimester, BDEA will conduct two lotteries in order to fill the available number of seats in each program. Students whose names are drawn will be notified by the school and will schedule an information session with the Admissions Manager. It is recommended, <i>though not required</i>, that you bring a parent or guardian to the information session.</p> <p>→ Those students whose names are not drawn are eligible for inclusion in the remaining lotteries for that school year.</p>
STEP 3: NEXT STEP	<p>✓ Enroll in Boston Public Schools: If you have any questions about your current enrollment status in BPS, please check with the Re-Engagement Center at 617-635-2273 or your neighborhood BPS Welcome Center. To find your local Welcome Center, please call 617-635-9000.</p>
STEP 4: ORIENTATION	<p>✓ Once you have accepted a seat at BDEA and are officially enrolled in BPS, you will participate in a four day Orientation. At orientation, you will learn more about BDEA's school culture and its unique competency-based system of teaching and learning, and complete diagnostic and placement tests in Math and Humanities. <i>This testing is for course credit and placement purposes only.</i></p> <p>✓ Once you complete orientation, you will begin your first Trimester, called Seminar.</p>

BDEA's mission is to serve Boston students up to age 23 who are two years or more behind grade level. By law, siblings of enrolled students and those who are attending Boston Public Schools are given preference. Students are admitted to BDEA by lottery.

Boston Day and Evening Academy does not discriminate on the basis of religion, race, color, national origin, creed, ethnicity, gender, gender expression, sexual orientation, mental or physical disability, age, ancestry, athletic performance, special needs, proficiency in the English language or a foreign language, or prior academic achievement. BDEA does not tolerate any form of discrimination, intimidation, threat, coercion, and/or harassment that insults the dignity of others by interfering with their freedom to learn and work. Information requested on this application is not intended, and will not be used, to discriminate. BDEA will not disclose any information provided on this application except to the Department of Elementary and Secondary Education, as required by state law.

Part 1 (Required): Student Applicant Information – Neatly print using BLUE or BLACK ink!

DATE: ___/___/___

Student Name: _____
 First Middle Last

Address: _____ Apt. #: _____

City: _____ Zip: _____ Date of Birth: ___/___/___

Student Cell Phone: () _____ - _____ BPS ID#: _____

Email: _____

PARENT(S) OR GUARDIAN(S) WITH WHOM YOU LIVE:

Name: _____ Relationship: _____ Phone: () ___ - _____

Name: _____ Relationship: _____ Phone: () ___ - _____

Will you or your parent(s)/guardian(s) need translation at meetings? Yes No

If yes, in what language? _____

CHECK any of THE FOLLOWING BOXES THAT APPLY TO YOU:

I am currently in grade: 8 9 10 11 12

I currently attend a Boston Public School (Name of school): _____

I have a legal or biological sibling attending BDEA (Name of sibling): _____

I currently attend METCO or a charter, private or parochial school (Name of school): _____

Note: Students checking this box must submit proof of Boston residency with this application.

I am not currently enrolled in school. Previous school(s) attended:

School Name: _____ Dates of Attendance: ___/___ to ___/___

School Name: _____ Dates of Attendance: ___/___ to ___/___

IN WHICH BDEA PROGRAM DO YOU PREFER TO BE ENROLLED?

Day (9-2:30 PM) or Evening (10-3:30 PM)

✓ Please explain why you chose this program, and how the hours are important to your success.

Part 2: Student Applicant – PERSONAL INFORMATION, ACADEMIC, and INTERESTS

NOTE: Answering this section is optional and will not influence admission, but your comments help us to learn about you.

I identify myself as:

- African American Asian Hispanic Multi-Race, Non-Hispanic Native American
- Native Hawaiian, Pacific Islander White Other: _____

Gender: _____

What languages do you speak?: _____

What language do you speak at home? _____

Have you previously attended BDEA? *(Answering this question does not in any way affect the application process.)*

- Yes No If “yes”, when? ___ / ___ to ___ / ___

ACADEMICS AND PERSONAL QUALITIES

Four words that describe me are:

- 1. _____ 2. _____ 3. _____ 4. _____

Four activities that I enjoy are:

- 1. _____ 2. _____ 3. _____ 4. _____

In school, I succeed at: _____

In school, I can improve upon: _____

One thing I admire about myself is: _____

One thing I would like to improve about myself is: _____

List three personal qualities you admire in others.

- 1. _____ 2. _____ 3. _____

What else is important for us to know about you that will help us to support you at BDEA?

HOW DID YOU HEAR ABOUT BDEA? Please circle as many options as apply.

- Friend
- Relative
- Social Worker
- Internet/Website
- Re-engagement Center
- Teacher
- Health Worker
- Probation Officer
- School Counselor
- Principal/Asst. Principal

Other: _____

Name of person who helped you apply or told you about BDEA: _____

Part 3: Parent/Guardian Information

NOTE: Answering this section is *optional* and *will not* influence admission, but your comments will help BDEA in getting to know your child. If the applicant is over 18, he or she can answer the questions in this section, and sign the application. If the applicant is under 18, a parent/guardian must sign at the bottom of this section.

1. Please describe your child’s strengths and potential areas of academic growth.

Strengths: _____

Potential areas of growth: _____

2. Has your child ever used special education services to better support his or her learning?

3. Has your child ever used bilingual services to better support his or her learning?

4. Is there anything else you would like us to know about your child that would allow us to support him or her while at BDEA?

I, the undersigned, have read this application and certify that it is correct and complete.

Parent/Guardian Signature (if applicant is under 18): _____ Date: ___/___/___

Applicant’s Signature (if over 18): _____ Date: ___/___/___

If you prefer that we not call your child’s name during our public lottery, you may opt out by checking this box.

_____ Initial