



Mount Carmel Academy

An HISD Contract-Charter High School
7155 Ashburn • Houston, Texas 77061
Phone: (713) 643-2008 Fax: (713) 645-0078
Website: www.mtcarmelacademy.net
E-Mail: admissions@mtcarmelacademy.net

APPLICATION 2019-2020

**Parent is responsible for submitting all the required documents
Incomplete applications will delay the admission process for your child.**

To the best of my knowledge, I state the following information is accurate and honest. I fully understand that filling out and turning in this form does not guarantee admittance to Mount Carmel Academy for my student. I must complete the entire process before I will find out if my student is accepted. Furthermore, I understand that if I knowingly provide false information, this application will be voided. If my student has already been accepted and it is later found out that serious false statements were made, the enrollment may be revoked.

_____	_____	_____	_____
<i>Parent/Guardian Print Name</i>	<i>Parent/Guardian Signature</i>	<i>relationship</i>	<i>Date</i>
_____	_____	_____	_____
<i>Student Name</i>	<i>Student Signature</i>		<i>Date</i>
<i>Parent's Preferred Language:</i> <input type="checkbox"/> English <input type="checkbox"/> Spanish <input type="checkbox"/> Vietnamese <input type="checkbox"/>			
Other: _____			

Application Checklist:

1. Complete an Application form

*Applicants going into the 9th grade must take a High School Placement Test (HSPT). The test is four hours long, from 8:00 A.M. to 12:00 P.M. (Fee \$25.00.) Your student can take the test without a complete application, however incomplete applications will delay the date of your interview.

2. Turn in the following with your form

- If the student is applying to 10th -12th grade please bring a transcript
- Current report card.
- Previous year's final report card, May 2018
- At least 2 of the 3 Teacher/ Counselor Recommendation Forms attached to this packet. Please have the teacher/counselor turn in forms in a seal envelope with signature across seal. Or they can e-mail them to: admissions@mtcarmelacademy.net
- IOWA/ Stanford/ or ITBS (within the last 12 months)
- STAAR results from last year
- Birth Certificate
- Social Security
- Immunization Record
- Parent ID
- Proof of Address (light, gas, water bill or lease contract only)

3. Once application is complete, we will call you to schedule an interview with the principal.

4. After your student's interview you will receive a letter with our decision. If you don't receive a letter please contact us. **

5. Once you have been accepted, you must fill out HISD paperwork in order to enroll your child.

Student Information:

1. Student Name: _____
Last First Middle Initial
Preferred Name: _____ Date of Birth (mm/dd/yyyy) ____/____/____ Gender: M F
(optional)
Student Cell Phone # _____ Student E-mail _____
2. Address _____
Street Address City State Zip
3. Home Phone () _____ Cell Phone () _____
4. School Currently Attending _____ Current Grade _____
5. Zoned High School _____

Grade Applying for the school year 2019-2020 9th 10th 11th 12th

9th Grade Applicants must choose a date for their placement test. 8:00a.m. -12:00p.m. \$25.00 Fee

- Saturday, Jan. 19, 2019 Saturday, Mar. 2, 2019 Saturday, May 4, 2019
 Saturday, Feb. 2, 2019 Saturday, Apr. 6, 2019 Tuesday, Jun. 4, 2019

Additional Information:

Has student experienced any problems in relation to drugs, alcohol, smoking, law enforcement agencies, school expulsion, etc? If YES, please explain

Has student experienced any discipline/conduct problems, school suspensions, grade retention, been assigned to alternative campus or CEP, etc.

If YES, please explain:

Does student applicant have any pending discipline actions at his/her current school?

If "YES," please explain

Has student applicant ever followed an ARD for learning disabilities? Section 504? YES NO

If "YES" please specify

Student Name: _____ Grade Applying: _____

Has student applicant ever been tested for special academic or behavioral concerns, have special needs, or other academic/behavioral considerations school needs to be aware of?
Indicate below

Other (specify) _____ ADD _____ Dyslexia _____ Hearing Impairment _____ ADHD _____ Speech Impairment _____

If "YES" lease specify _____

A copy of documenting test and/or medical results will be needed, including ARD paperwork in order to complete the official registration process.

Any other concerns the school should be made aware of?

Clubs interest:

_____ Athletic	_____ Cooking	_____ Newman
_____ Board Game	_____ Craft	_____ Student Council
_____ Book	_____ Debate	_____ Video Game
_____ Computer/Study	_____ Fine Arts & Academics	_____ Other Club: _____
_____ Cooking	_____ National Honor Society	

Sports:

_____ Football	_____ Cheerleading	_____ Volleyball	_____ Cross Country
_____ Basketball	_____ Soccer	_____ Baseball	_____ Softball
_____ Track	_____ Dance	_____ Other Sport	_____

Parent Interest Survey (check all that apply) Place parent code where applicable M=mother F=father SM=stepmother SF=stepfather GM=guardian mother GF=guardian father)

_____ Fund Raising	_____ Clerical Work	_____ Concession stands	_____ Drama
_____ Enrichment Classes	_____ Painting/Repair work	_____ Baked Goods	_____ Sports Booster Club
_____ Newman Club	_____ Parent Club	_____ Substitute Teacher	
_____ Buildings & Grounds	_____ Field Trips	_____ Receptionist	
_____ Other Sport:	_____		

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Transcript Release Form

It is the responsibility of the parent(s) or guardian(s) of a prospective student to have the student's academic records sent to Mount Carmel Academy. Please present this form to the principal or guidance counselor of the school the student is presently attending. Please print or type the following information:

To _____
Principal / Counselor

Name of School

Address

School Phone (_____) _____ E-Mail _____

RE: Academic Records of _____ Who is presently in _____ grade.
Name of Applicant

Our /my son/daughter is applying for admission for grade _____ at Mount Carmel Academy.
We/I request and authorize you to release an unofficial transcript of his/her academic records to:

Admissions Office
Mount Carmel Academy
7155 Ashburn St.
Houston, TX 77061

admissions@mtcarmelacademy.net

FAX: 713-645-0078

Note to Applicant's School:

If applicant is applying for the 9th grade, please send the following:

1. Marks for 6th, 7th, and current 8th grades.
2. Any standardized Test Scores for the grades listed above (IOWA, STAAR, Stanford, etc.)
3. Immunization Record.

If applicant is applying for the 10th grade or higher, please send the following:

1. All high school grades / transcript.
2. All standardized test scores.
3. Immunization records.

Signature of Parent(s) or Guardian(s)

Date

Phone number (_____) - _____ - _____

Signature of Parent(s) or Guardian(s)