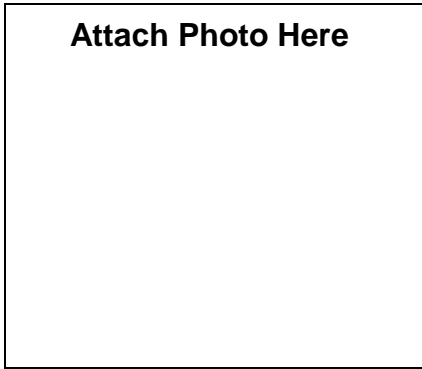




Student's Name: _____

PCSB ID #: _____



APPLICATION FOR ADMISSION 2010-2011 SCHOOL YEAR

Chain of Lakes Collegiate High School Polk State College – Winter Haven

Thank you for your interest in the Chain of Lakes Collegiate High School (herein referred to as PSC COL or COL) on the PSC Winter Haven campus. This packet contains the application forms for Chain of Lakes Collegiate HS only.

Please read each form carefully and complete all information as appropriate. Be sure that all required signatures are completed. If you have questions or need additional information, please consult our website at www.colpsc.com or call 863-298-6800.

Application deadline for lottery admission is March 5, 2010

Applications will be accepted until class fills. Applicants with lottery numbers have preference status.

Application Checklist

The items listed below comprise the full COL Collegiate High School Application. All items are required for eligibility for admission to the school, regardless of the student's program. In order to receive consideration in the application process, **all components listed must be completed and received by the established deadlines.** (The deadline to be considered for Lottery Admission is March 5, 2010).

Submit the following forms, *complete with appropriate signatures*, to the COL Office –Winter Haven Campus:

- Application/Data Entry Form For PSC Chain of Lakes Collegiate High School
- Students Social Security Number Verification Form
- Report of Previous Expulsions, Arrests, Juvenile Justice Actions
- Participation Agreement
- College Placement Test (CPT) (Scores due March 5 to be considered for lottery admission)
- Official Transcript (if not currently enrolled in a Polk County Public School), including classes in progress

Submitted by: _____

Date: _____

Received by: _____

Date: _____

**POLK STATE COLLEGE
CHAIN OF LAKES COLLEGIATE HIGH SCHOOL**

Chain of Lakes Collegiate High School

Office Location: COL Village Modular #8
Office Phone: 863-298-6800
Office Fax: 863-298-6801
PSC Campus: Winter Haven
Mailing Address: 999 Avenue H NE
Mail Station #24 Winter Haven, FL 33881

Students considering both collegiate high schools must submit separate applications.

Application Steps

1. Attend an information session/application workshop, if possible. Workshop attendance is not required; however, it is strongly encouraged. Application packets will be distributed. An overview of the school mission, programs and services will also be provided. Call office (863-298-6800) or check the website, www.colpsc.com, for dates and times of the sessions.
2. Obtain a PSC Chain of Lakes Collegiate High School application.
 - Pick up an application packet at PSC Chain of Lakes Collegiate High School office.
 - Request an application be mailed to you by calling the High School office.
 - Download an application from the website www.colpsc.com
3. Obtain an official transcript if the student is not currently enrolled in a Polk County Public School.
4. Submit the completed application to COL Collegiate High School office.
5. Take the College Placement Test and hand carry or fax score report to COL Collegiate High School office (please see above Contact Information).

Each applicant is required to take the College Placement Test, regardless of program choice. Here are the steps to test at PSC:

- Come to the COL office or PSC Student Services and fill out a CPT Pre-Admission Information Form. You will need your Social Security number and a photo ID. The COL office is open Monday – Friday from 7 AM to 3:30 PM.
- Take the CPT on a computer. You may take the test Monday through Saturday on either campus or at the JD Alexander Center in Lake Wales. You can check testing hours and campus testing locations by visiting www.Polk.edu and clicking on Current Students and then TLCC. Or you can call either TLCC (297-1033, 297-1044, or 298-6834). Bring your testing ticket & photo ID to test location. Allow 90 minutes for actual testing. Calculators are not permitted. All testing supplies are furnished for you.
- You will receive a score report when you complete the CPT, if testing at PSC . Deliver your test score report to the Chain of Lakes Collegiate High School office, either in person or by fax. You may also submit a CPT score report from a test administration at your high school.

NOTE: An application is complete only if **ALL** application documents, with all appropriate signatures **and College Placement Test scores** have been received by COL Collegiate High School office. It is the responsibility of the applicant to ensure completion of the application.

Application/Data Entry Form for PSC COL Collegiate High School (please print)

PCSB Student ID# _____ Social Security # _____

Student Name (Last) _____ (First) _____ (Middle) _____

Birth Date _____ Current Grade _____ Sex _____ Place of Birth(City) _____ (State) _____

Ethnic Origin: () White/non-Hispanic () Black/non-Hispanic () Hispanic
 () Asian/Pacific Islander () American Indian/Alaskan Native () Other (Please List) _____

Student E-Mail _____ @ _____ Phone # _____

Home Address _____
 Street _____ City _____ Zip _____

Mailing Address (if different) _____
 Street/PO Box _____ City _____ Zip _____

Current School _____
 School Name _____ City _____

Has student been enrolled in any special education programs at previous school or schools?
 (Examples: EMH, Gifted, Speech, SLD, etc.) () YES () NO Program: _____

Has student ever been dual enrolled at PSC before? () YES () NO

Has any sibling ever attended COL Collegiate High School? () YES () NO Name: _____

Student lives with: () Both Parents () Father () Mother () Stepfather () Stepmother or
 () Guardian: _____
 Name _____ Address _____ Telephone# _____

FATHER () Natural () Stepfather **MOTHER** () Natural () Stepmother
 Name _____ Name _____
 First Middle Last First Middle Last

Occupation _____ Occupation _____

Employer _____ Employer _____

Business Phone # _____ Business Phone # _____

Cell Phone # _____ Cell Phone # _____

Parent email _____ Parent email _____

Choose the program of study most interested in pursuing and darken the correct square.

- Information Systems – Programming**
- Criminal Justice Academy**
- Allied Health**
- Associate of Arts Degree**

**POLK STATE COLLEGE
CHAIN OF LAKES COLLEGIATE HIGH SCHOOL**

STUDENT SOCIAL SECURITY NUMBER

Schools are required by law to request that each student provide his/her social security number. Failure to provide the number will not be cause for denial of admission or graduation. Please include verification copy with completed application.

Student Name: _____

Social Security Number: _____

VERIFICATION OF ABOVE INFORMATION

The student's social security number must be verified by one of the following methods.

1. The social security number card or copy was presented to a school official.

School OfficialDate

2. Bank statements, insurance records or other similar documents containing the student's social security number presented to a school official.

School OfficialDate

3. The parent/guardian verifies the social security number.

I hereby attest that the social security number I have provided for the above named student is accurate.

Signature of Parent/GuardianDate

DECLINATION

I refuse to provide the social security number for the above named student and understand a separate identification number will be assigned to the student for record keeping purposes.

Signature of Parent/GuardianDate

POLK STATE COLLEGE CHAIN OF LAKES COLLEGIATE HIGH SCHOOL

PARTICIPATION AGREEMENT

The Chain of Lakes College Collegiate High School exists for the purpose of educating students in a rigorous academic environment. We are pleased that you have made this academic choice and encourage your participation to the fullest in this educational experience. To assure understanding of policies and procedures regarding conduct, curriculum, and communication you are asked to read the following and indicate your understanding and acceptance.

My signature below indicates that I acknowledge, understand and accept the following:

1. I understand that as a student at COL Collegiate Charter High School program (Dual Enrollment Collegiate or Pre-collegiate) I will be enrolled for some or all of my classes in college credit courses and that the depth, breadth, rigor and pace of these courses will be at the college level.
2. I understand that COL students in college level courses are subject to the same standards, policies, and responsibilities as other college students unless otherwise restricted by federal, state or local requirements.
3. I understand that curriculum content, evaluation, and selection of appropriate instructional materials are the prerogative of the college instructor and will not differ for dually enrolled COL students from that presented for traditional college students.
4. I understand that PSC is an open campus and that I will be attending classes with non-high school aged students and that I may encounter students of a variety of ages and backgrounds while on the PSC campus.
5. I understand that the PSC COL Collegiate High School Director, Assistant Director or Guidance Counselor is the first point of contact for parents, who wish to discuss academic progress in a course, schedule a conference, or request information about school or classroom activities.
6. I understand that attendance at orientation is required for each new student, and that attendance at an orientation session is required for the parent(s)/guardian of each new student.
7. I agree to treat fellow students, faculty and staff with respect.
8. I understand that, if selected for admission to a Collegiate Charter High School, I must agree to abide by all PSC /COL policies and procedures, including but not limited to the Student Code of Conduct, Student Progression Plan, attendance policies and discipline policies described in the Polk County School Board Code of Conduct, and regulations described in the Polk State College Handbook and the COL Collegiate High School Policy Manual.
9. I understand that completion of high school graduation requirements does not guarantee completion of an AS or AA degree. To receive an AS or AA degree I understand that a student must meet all program requirements identified in the PSC College Catalog at the time of the student's initial admission.
10. I understand that I will be expected to sign and abide by an agreement outlining my responsibility for all instructional materials, textbooks, and equipment issued to me.
11. I agree to attend school regularly (see that my child attends regularly) and understand that I must be present for scheduled classes if I intend to be successful in this rigorous environment.

Print Name of Parent

Parent Signature

Date

Print Name of Student

Student Signature

Date