APPLICATION MAILING ADDRESS

Utica Center for Science and Industry 14201 Canal Rd. Sterling Heights, MI 48313

All Applications **MUST BE RECEIVED** by the UCSI Office on or before 4pm on Friday, December 14, 2012. While we recommend electronic submission, hard copies can be mailed or dropped off at the address listed above.

TRANSCRIPTS/HISTORICAL GRADES

Non-UCS applicants must submit a copy of their Historical Grades including the first quarter of their 8th grade year with the application; upon completion of the 1st Semester, updated Historical Grades must be submitted to the UCSI Office. Failure to do so can result in your removal from the application process. UCS transcripts need not be included.

TESTING

All applicants must take the entrance assessments. Sessions are filled first come, first served, and once full, will be closed. If the student selection is closed, the student will be contacted with the alternate testing date. Assessments will be administered at the *Joan C. Sergent Instructional Resource Center, 14201 Canal Road, Sterling Heights, MI 48313*

UCSI assessment dates:

Select an Assessment Date (check one box only) Saturday, January 5, 2013, 8:00 am – 11:30 am Saturday, January 19, 2013, 12:00 pm – 3:30 pm

NOTIFICATION OF RECEIPT

You will receive an email confirmation of your test time selection. Please contact this office if you do not receive this email within 5 days of your submission.

APPLICATION

General Inform	ation
First name	Middle Initial Last Name
Street Address	Apt #
City	Zip Code Student DOB
Home Phone	Cell Phone 1 Cell Phone 2
Email 1	Email 2
Name of Parent/s w	ith whom student resides
If there is another p	arent or guardian with whom we should communicate, please indicate below.
Additional Parent C	Additional Email
Home School Distrie	Current School
Cumulative Middle	e School/Junior High School GPA/Average Letter Grade
Check the cours	e you expect to complete by the conclusion of the 8th grade year:
Algebraic Thinking	Math 8 Geometry Algebra I Algebra II
Although we do the order you pro	not expect students to apply to all the specialty programs, if you do please rank efer.
	UCSI
	UAIS-IB
	UCMST

Students not currently living within the boundaries of Utica Community Schools, must designate UCS as the student's school of choice. School of Choice applications will be available in April 2013 and accepted the first two weeks of May 2013. If you have School of Choice questions please contact UCS Pupil Services at 586-Ï JĨ 曲FG€

Academic and Personal Statement

Students should complete the written portions of this application without assistance within the space provided. Students may type within the space provided.

1. List three activities, hobbies or interests.

Activity 1		Activity 2		Activity 3	
			on you as an indiv	idual and how ha	ave you grown
as a result	of your involver	ment?			

Explanation of	
Activities	

3. List any academic achievements, awards and/or honors, test scores (SAT, PLAN, PSAT, etc.) that you have received and include dates of the awards. Test scores are not required and applicants will not be penalized if there are no scores reported.

Academic/Personal Achievement 1	
Academic/Personal Achievement 2	
Academic/Personal Achievement 3	
Academic/Personal Achievement 4	

4. List any other activities (Scouts, marching band, church groups, LEGO, sports) ## hat you may be active in.

Group/Activity 1	
Group/Activity 2	
Group/Activity 3	

Parent Information

Individual Educational Plan (IEP)/504

Parents of students currently receiving special education services or testing accommodations under Section 504 of the Individuals with Disabilities Education Act (IDEA) MUST include a copy of the applicant's plan. Accommodations must be in place at the time of testing.

Does your student have an IEP or 504 plan currently in place?		
If yes, please include the details.		

Parent Permission Statement

I certify that the information provided above is accurate and hereby submit application for my child to be considered for this high school program and give my permission for school officials to report my child's achievement and aptitude test scores when required. I understand that the teacher information and test results will be maintained in confidence by the Screening Committee and that applications will not be returned to parents. I further understand that in submitting this application I recognize that this federally funded program is an ongoing study designed to improve student achievement within our school systems. I also recognize that in submitting this application I understand that my student's academic and socio-economic information will be available to the US Department of Education for completion of this study.

Signature Field	

Your signature confirms that you have read and understand the parent information section and have responded accurately and to the best of your knowledge. Typing your name will be considered an authorized signature.