



Student Name \_\_\_\_\_

Home Campus \_\_\_\_\_

## Watson High School Campus Checklist

The following documents **MUST ACCOMPANY** the student's application to Watson High School. Please indicate that the following documents are attached by checking and initialing.

### CHECK

### INITIAL

____ Application for Admission	Counselor/Administrator _____
____ Personal Education Plan ( <i>page 3</i> )	Student _____
____ Student Profile Eligibility Criteria	Counselor _____
____ Campus Recommendation	Counselor _____
____ Transcript	Counselor _____
____ Copy of Current Schedule	Counselor _____
____ STAAR Confidential Student Scores ( <i>Most Recent</i> )	Counselor _____
____ Attendance Report (Current Year)	Counselor _____
____ Discipline Report	Counselor _____

**For WHS office use only:**

Date received: \_\_\_\_\_

Interview Date: \_\_\_\_\_

Notes: \_\_\_\_\_

# Watson High School

## APPLICATION FOR ADMISSION

Date of Application: \_\_\_\_\_

### Student Information:

Name \_\_\_\_\_ Age \_\_\_\_\_ DOB \_\_\_\_\_

Current Grade \_\_\_\_\_ Sex: Male Female SS# \_\_\_\_\_

Home Campus (circle one) Boswell Saginaw Chisholm Trail Eagle Mountain

Home Address \_\_\_\_\_  
Street City Zip

Home Phone (\_\_\_\_\_) \_\_\_\_\_ Cell (\_\_\_\_\_) \_\_\_\_\_

Pregnant: Yes No

Parenting: Yes No

Special Education: Yes No

504: Yes No

ESL: Yes No

### Parental/Guardian Information:

Name \_\_\_\_\_ Relationship \_\_\_\_\_  
Parent/Guardian with whom student resides

Home Phone (\_\_\_\_\_) \_\_\_\_\_ Cell (\_\_\_\_\_) \_\_\_\_\_

Parent E-Mail \_\_\_\_\_

Place of Employment \_\_\_\_\_

Work (\_\_\_\_\_) \_\_\_\_\_

I verify that the above information is correct to the best of my knowledge.

\_\_\_\_\_  
Signature of Student

\_\_\_\_\_  
Signature of Parent/Guardian

**Watson High School**  
**PERSONAL EDUCATION PLAN**  
**To be COMPLETED by the STUDENT**

**Dear Prospective Student:**

**As part of the application process for Watson, we ask that you complete this Personal Education Plan. Consider both questions carefully and answer truthfully, sincerely, and completely. Some of the items may need discussion with your counselor or the Watson administrator before you are able to formulate a complete answer.**

- 1. What is one thing that caused you to either fail courses at your present high school or lose credit for courses you successfully completed?**

---

---

---

- 2. Take this opportunity to explain in your own words why you want to attend Watson High School.**

---

---

---

---

---

---

---

---

---

---

**\*\*\*Please turn in COMPLETED pages 2 & 3 to your HOME CAMPUS counselor\*\*\***

**Watson High School**  
**STUDENT PROFILE**  
**For School counselor/administrator use only**

**Student Name** \_\_\_\_\_

**Freshman Year:** \_\_\_\_\_

**Check all areas that apply:**

**Personal:**

\_\_\_\_ Rehabilitating drug/alcohol user  
\_\_\_\_ Disruptive home/family situation  
\_\_\_\_ History of abuse in family  
\_\_\_\_ Health issues

\_\_\_\_ Pregnant  
\_\_\_\_ Parenting  
\_\_\_\_ Married  
\_\_\_\_ Divorced

**Economic:**

\_\_\_\_ Eligible for Free/Reduced meal plan  
\_\_\_\_ Self-Supporting

\_\_\_\_ Homeless

Other economic hardships \_\_\_\_\_

**Social:**

\_\_\_\_ Adjudicated  
\_\_\_\_ Self-Esteem  
\_\_\_\_ Non-participant in school activities/organizations

\_\_\_\_ Antisocial Behavior  
\_\_\_\_ Unmotivated

**Behavior:**

\_\_\_\_ Referred for truancy  
\_\_\_\_ Placement in Discipline A.E.P.  
\_\_\_\_ On-Campus Suspension  
\_\_\_\_ Currently on probation, parole, deferred prosecution,  
or other conditional release

\_\_\_\_ Suspension  
\_\_\_\_ Detention  
\_\_\_\_ Expelled

If yes, name of probation officer \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_

**Alternative Educational Strategies that have been utilized:**

\_\_\_\_ Tutorials  
\_\_\_\_ Program  
\_\_\_\_ Capture  
\_\_\_\_ Individualized instruction

\_\_\_\_ Referred to Psychologist  
\_\_\_\_ Referred for Counseling  
\_\_\_\_ Referred for Special Ed.  
\_\_\_\_ Referred to Intervention  
Counselor

\_\_\_\_ other: *please specify* \_\_\_\_\_

**I certify that the information provided is the most current, accurate, and complete information available.**

\_\_\_\_\_  
Administrator

\_\_\_\_\_  
Extension #

\_\_\_\_\_  
Date

\_\_\_\_\_  
Counselor

\_\_\_\_\_  
Extension #

\_\_\_\_\_  
Date

**Watson High School  
STUDENT PROFILE  
CAMPUS RECOMMENDATION**

**FOR SCHOOL COUNSELOR/ADMINISTRATOR USE ONLY**

**Student Name**\_\_\_\_\_ **Date**\_\_\_\_\_

**Referring Person** \_\_\_\_\_

\_\_\_\_\_ **Counselor** \_\_\_\_\_ **Administrator**

**Please include any additional information that would help the staff of Watson High School determine whether or not the program is appropriate for the student.**
