



CJUSD AVID Application



Print Name: _____

Student ID: _____

Current Grade Level: _____

Have you ever been in AVID? _____

Student Response Questions:

1.) *Why do you want to be in AVID?*

2.) *Why do you want to go to college?*

3.) *What can AVID do for you? (What do you really want to get better at? What part of AVID sounds like it can really help you succeed and reach your goals?) What do you think the challenges will be for you in high school and how do you think AVID can help? In high school, you must pass your classes or you will have to retake them. Grades count. Colleges look at your grades and all the other activities that you participate in while in high school.*

4.) *An AVID student makes every effort to meet the following: Please initial after each one stating that you agree.*

I will take honors/AP classes, especially those that will help me get into college _____

I will become more organized and time efficient _____

I will use the resources on and off campus to support my goals _____

I will participate in extra-curricular activities _____

I will uphold the AVID Image by maintaining great citizenship, by being a model student (*generous, responsible, trustworthy, respectful, fair, and caring*) _____

I will enroll in and be successful in a 4-year university _____

I will have good attendance and discipline because I know that school is important to my future success _____

Current GPA _____

Do you want to be placed in the AVID elective class in high school? Yes _____ No _____

Your signature below means that you are aware of and willing to commit to the requirements of the AVID program in high school and that you intend to enroll in AVID and in the courses that will prepare you for admission to a four-year college or university.

Student Printed Name: _____

Student Signature: _____ Date: _____

** Please return to your counselor, who will submit it to the AVID Coordinator for review.*