



**SHAWNEE MISSION NORTH
INTERNATIONAL BACCALAUREATE PROGRAM**
To be completed during junior year enrollment

The International Baccalaureate Program provides highly motivated college-bound students an opportunity to pursue a rigorous liberal-arts curriculum that is recognized by the best colleges and universities throughout the world.

Graduation Year _____ Gender _____ Birth date _____

Last Name _____ First Name _____ MI _____

Shawnee Mission ID # _____ Current School _____

First Country of Citizenship _____

Second Country of Citizenship _____

First Language _____

Your native language

Second Language _____ *A language used for communication not academically studied*

Residential Address _____

Home Phone _____

Parent Name (s) _____

Parent Phone _____ Student Phone _____

Parent E-mail _____ Student E-mail _____

*Shawnee Mission North
International Baccalaureate Program
7401 Johnson Drive, Shawnee Mission, KS 66202
913-993-7138 jondurham@smsd.org
<http://signature.smsd.org/ib/north/Pages/default.aspx>*

Although there are no specific admission requirements, it is important to evaluate all candidates to determine their potential for success in the IB Program and the SMN administration and / or IB coordinator will review my past academic and behavior records. There is a program fee as determined yearly by the IBO. It will be approximately \$168 for registration and \$116 for each course.

Parent Signature _____ Date _____

Student Signature _____ Date _____

Approximate Current GPA _____

Please complete the following table with your past and currently enrolled courses

	FRESHMAN YEAR	SOPHOMORE YEAR	Other high school Credits 8 th /summer
English			
International Language			
Social Studies			
Sciences			
Mathematics			
Arts & Electives			

Have you completed :

1 Unit PE? _____ 1/2 Unit Computer Apps? _____ 1/2 Unit Health? _____ 1 Unit Fine Arts

Briefly describe why you are interested in participating in the IB Program.



Shawnee Mission North International Baccalaureate Agreement of Understandings

As a student of the International Baccalaureate Programme at SMN, I understand the following program components and agree to adhere to them:

- I know that attendance is an important component my success in any IB course.
- I agree to engage in reading and academic dialogue about concepts, issues, and life philosophies that may differ from my own. The IB requires an intercultural understanding of, and respect for, varying global perspectives.
- I agree to complete all required assessment components for my testing group(s).
- I agree to participate fully in all required IB activities, inside and outside of the classroom.
- I accept that a significant amount of work will be independent of my classes and that IB is considered an honors program.
- I will always be able to sign my name to the following statement:
 On my honor, I promise that I have neither given nor received help on this assignment/assessment/examination, nor will I pass on information to others. I am not submitting the work of others as my own, nor have I used a computer translator. I will take appropriate action in the following ways to initiate investigation of a perceived violation: confront my peer, tell my teacher and/or inform IB coordinator so we can all guard against malpractice within the program. (Initial here _____)
- I know that I may be removed from the program or denied the ability to sit for a specific exam if I commit an act of academic dishonesty (see above). Failure to sit for all six exams (diploma candidate) will result in loss of the opportunity to earn the IB diploma.
- I understand the importance of meeting the deadlines established by all my IB teachers and the IB coordinator.
- I understand that a IB registration and exam fee(s) are my responsibility. Failure to comply may result in removal from IB courses and/or the diploma program.

Student name (print)

Student signature

Date

As the parent/guardian(s) of an IB student, I (we) understand that my (our) son/daughter accepts enrollment in the IB Programme recognizing there will be requirements (academic and otherwise) which are inherent to the program. Further, I give permission for the use of my student's picture and/or name in promotion of the program and for participation in all officially recognized activities in the classroom and beyond. I have read the student section listed above.

Parent/guardian signature

Date

Parent/guardian signature

Date

Course Name	Select	Course Name	Select
Language A: Literature HL (English)		Chemistry SL	
Spanish SL		Film HL	
French SL		Music SL	
Math SL			
Psychology HL			
Psychology SL			
History of the Americas-HL			

Registration Fee (pay Junior year)		\$168
Number of Exams To Be Taken _____	<p>Each exam costs \$116.00 # of exams _____ x 116</p> <p>= _____</p> <p>(Diploma students' fees covered by diploma scholarship)</p>	\$ _____
<p>Total Due: (Make checks out to Shawnee Mission North High School and return this form with payment by August 15 or make a payment plan with the bookkeeper by August 15.)</p>		\$ _____

SUBMIT COMPLETED PACKET TO COUNSELOR BY APRIL 28. PAYMENT MUST BE MADE BY AUGUST 15.