



3065 Jackson St.  
San Francisco, CA 94115

## 2019 Student Application

**Application Deadline**  
**Friday, March 1, 2019 at 5:00pm**



# Summerbridge San Francisco

## *at a glance*

*Founded at University High School in 1978, Summerbridge is a pioneer in preparing ambitious middle school students from under-resourced circumstances to enter and thrive in college preparatory high schools.*

In 1989, Summerbridge San Francisco received a grant to expand the program nationally and in 1990 Summerbridge New Orleans was founded. Today, there are 24 Summerbridge/Breakthrough programs around the country and even one program in Hong Kong, all under the auspices of The Breakthrough Collaborative.

## **Summerbridge, a program of San Francisco University High School, serves the city of San Francisco by:**

- preparing ambitious middle school students from under-resourced circumstances to enter and thrive in well-matched high schools, for the purpose of securing admission to, succeeding in, and graduating from a four-year college
- providing intensive summer teaching internships for high school and college students who are passionate about the power of education, and creating meaningful volunteer experiences throughout the academic year for members of the UHS and San Francisco communities
- transforming lives through the unique and powerful relationship between the Summerbridge and UHS communities and their families

## **SUMMERBRIDGE AT A GLANCE (2017-2018):**

Summerbridge served 93 middle school students from San Francisco.

- 100% of the Summerbridge Class of 2018 are attending college preparatory high schools
- On average our students come from low to moderate income level households
- 98% of our students self-identify as a race other than white
- 63% of student community is first generation college bound
- 80% of our students have gone on to four-year colleges

## **SUMMERBRIDGE CONSISTS OF FOUR COMPLEMENTARY PROGRAMS:**

### **The Summer Program:**

- An enriching, six-week, tuition-free academic program at the San Francisco University High School
- Each day includes a combination of academic and co-curricular classes and electives designed to enhance students' non-cognitive skills.

### **The After-School Enrichment Program:**

- Students attend class once a week for 90 minutes of intense instruction in both Math and English/Language Arts throughout the school year.
- Homework support from University High School students is available twice per week.

### **The High School Placement Support Program:**

- Summerbridge offers Secondary School Aptitude Test (SSAT) prep classes and practice testing.
- The program provides support to students and their families throughout the high school application and enrollment process.

### **The Teaching Fellow Program:**

- High school seniors and college students are mentored and teach summer classes.
- Instructional Coaches are career teachers that mentor and support both the teaching fellows and Summerbridge students. They ensure high quality teaching from our teaching fellows resulting in solid learning opportunities for our students.

## Sanctuary Policy and Procedures

The San Francisco University High School Board approves the following sanctuary policy and procedures, and determines that such policy and procedures are consistent with the mission of the school:

### POLICY

- Immigration and Customs Enforcement (ICE) officers will not be permitted to come onto campus without a legally sufficient court order or warrant.
- UHS employees, campus security, and reception personnel are not to be considered extensions of law enforcement agencies, and they will be instructed not to permit themselves, to the best of their ability, to assist in the enforcement of immigration law at UHS beyond what is legally required.
- UHS does not and will not collect or retain information on the immigration or citizenship status of UHS or Summerbridge students or their families. Any information UHS does have on the immigration or citizenship status of UHS or Summerbridge students or their families, or concerning employees of UHS or its vendors, will not be shared with law enforcement officials, unless a lawful court order, subpoena, or warrant requires UHS to produce such information.
- UHS will provide information, education, and resources to access confidential legal support to employees and UHS and Summerbridge students and families who have immigration law questions and issues.
- UHS will ensure, to the extent reasonably and legally possible, the privacy of its students (UHS and Summerbridge) and employees, as well as the employees of food service, maintenance, and security services under contract to UHS.

### PROCEDURES

- No one other than the head of school, the chief financial officer, or their designated staff members have authority to grant law enforcement officials (including ICE officers) access to UHS's property.
- If ICE officers (or any other law enforcement personnel) attempt to gain entry to the UHS campus, UHS staff will not consent to entry and will ask that they wait outside until staff have communicated with the head of school, the chief financial officer, or a designated member of their staff.
- UHS will train and instruct reception desk staff, maintenance crew, and security personnel to refuse to voluntarily grant law enforcement officers access to school property until they can be met by the head of school, the chief financial officer, or a designated member of their staff.
- If an ICE officer or other law enforcement representative asserts that a search warrant or other legal document grants them the right to access the UHS campus without UHS consent, the only persons who can review that documentation and authorize access to campus are the head of school, the chief financial officer, or a designated member of their staff, who will consult with legal counsel as they deem appropriate.

The following signage shall be posted at all entrances to the various buildings comprising the UHS campus:

*San Francisco University High School welcomes students, families, and employees of any race, color, religion, gender, sexual orientation, gender identity, national or ethnic origin, or citizenship status. All campus visitors must check in with reception at 3065 Jackson Street.*

RESOLVED FURTHER, that the foregoing policy and procedures may be modified without further action by the board of trustees, based upon advice of counsel, or upon initiative of the head of school, after consultation with counsel.

February 28, 2017

## ONLY COMPLETE APPLICATIONS WILL BE ACCEPTED

### APPLICATION CHECKLIST:

#### Student:

- ☐ Student Information (include recent photo)
- ☐ Student School Information
- ☐ Personal Information
- ☐ Student Essay
- ☐ Commitment and Confidentiality Statement

#### Parent/Guardian:

- ☐ Online Inquiry Form ([www.summerbridgesf.org](http://www.summerbridgesf.org))
- ☐ Parent/Guardian information
- ☐ Family Information
- ☐ Provide copy of household(s) 2017 Federal Tax Return(s)
- ☐ Complete Cash Flow Forms (complete for all applicable households)
- ☐ Parent/Guardian Short Answers
- ☐ Commitment and Confidentiality Statement
- ☐ Fall Semester 6<sup>th</sup> Grade Report Card and Most Recent Standardized Test Scores
- ☐ Math Teacher Recommendation
- ☐ English/ELA Teacher Recommendation

### Applicant Dates to Remember:

Admission Open House – Option #1

Admissions Open House – Option #2

**Application Due**

Applicant & Parent/Guardian Interviews

**Final Decision Notifications**

Summerbridge New Families' Saturday

Saturday, January 12, 2019, 1:00 pm – 3:00 pm

Tuesday, January 29, 2019, 6:00 pm – 8:00 pm

**Friday, March 1, 2019, 5:00 pm**

Saturday March 23, 2019, 8:00am – 3:00pm

**Friday, April 5, 2019**

Saturday, April 27, 2019, 1:30pm – 3:00pm

USPS Mail or Hand Deliver Completed Application To:

Attn: Summerbridge Admissions Team

San Francisco University High School

3065 Jackson St.

San Francisco, CA 94115

[summerbridge@sfuhs.org](mailto:summerbridge@sfuhs.org)

(415) 447-3127

*"Summerbridge taught me how to be more confident and how to succeed in eighth grade. " -  
Summerbridge Graduate*

**STUDENT INFORMATION**  
**Use black or blue ink pen, not pencil.**

First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: CA Zip: \_\_\_\_\_  
Home Phone: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ Place of Birth: \_\_\_\_\_  
(mm/dd/yyyy) (City, State, Country)  
5<sup>th</sup> grade school: \_\_\_\_\_ 6<sup>th</sup> grade school: \_\_\_\_\_

Gender Identity (Choose all that apply):

- ☐ Man/Male
- ☐ Woman/Female
- ☐ Transgender
- ☐ Other \_\_\_\_\_  
Please share how you identify
- ☐ Prefer not to say

Gender Pronoun (Check all that apply):

- ☐ He/Him
- ☐ She/Her
- ☐ They/Them
- ☐ Other \_\_\_\_\_  
Please share how you are to be addressed

Race (Check all that apply):

- ☐ East Asian Heritage, Southeast Asian Heritage, South Asian Heritage, Pacific Islander Heritage, East/Southeast/South Asian, Asian American, Heritage from the Indian Sub-Continent
- ☐ Black, African Heritage, Afro-Caribbean Heritage, African American
- ☐ Greater Middle Eastern Heritage, Arab Heritage, West Asian Heritage, Middle Eastern or Arab or West Asian American
- ☐ Latino/a Heritage, Hispanic Heritage, Latino/a or Hispanic American
- ☐ Multiracial Heritage, Multiracial American
- ☐ First Nations Heritage, Indigenous and Aboriginal People, Native American
- ☐ White, European Heritage, European American
- ☐ Transracially Adopted
- ☐ Other \_\_\_\_\_  
Please specify

What is your ethnic background?

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1. Did any of your siblings, relatives, or family members graduate from Summerbridge at San Francisco University High School or any other Breakthrough program? If so, what are their names, ages, and what year did they attend?

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2. Participating in Summerbridge requires a three-year commitment, including a six-week summer program, after-school time, and at least 2 hours of homework per day during the summer.

Reflect on each of these commitments. Explain how you will fulfill these expectations.

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## STUDENT SHORT ANSWER QUESTIONS

1. At your current school, how do you find your work to be? (circle one) Too Easy Too Hard About Right

2. Describe something that you learned in school last week or last month. Why was it important to you?

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3. Describe a time when you were able to maintain a positive attitude at school when other students had a negative attitude. What was the situation and how did you handle it?

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4. Finish the quote: "One thing that makes me different from most people I know is that I..." Why?

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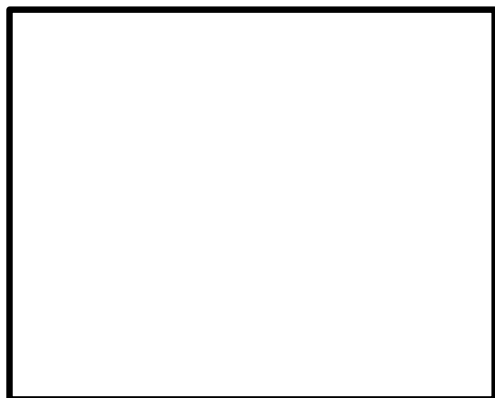
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## STUDENT ESSAY (choose one)

You may type or write your essay. If it is written, please write on a separate piece of lined paper with a black or blue pen. We suggest that you write a rough draft first and proofread for errors. *Your essay must be 3-4 paragraphs.*

- If you could have dinner with any person, who would it be? Why would you choose that person? What would you talk to them about and why?
- Describe your best educational experience. What made it the best? Now, describe your worst educational experience. What made it the worst? If you could change your worst educational experience, how would you change it in order to make it better?
- Please describe a problem in your community (neighborhood, school, or city) and offer some advice on how you would solve the problem.

Attach a photo of yourself here





NAME OF APPLICANT: \_\_\_\_\_

**HOUSEHOLD #1: PARENT/GUARDIAN #1 INFORMATION (Print Neatly)**

Please list the primary parent/guardian to contact with questions about the Summerbridge application as HOUSEHOLD #1 Parent/Guardian #1.

First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_ Last Name: \_\_\_\_\_

Relationship to applicant: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: CA Zip: \_\_\_\_\_

Home Phone: ( ) \_\_\_\_\_ Parent/Guardian Cell: ( ) \_\_\_\_\_

Occupation: \_\_\_\_\_ Employed by: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Parent/Guardian Email: \_\_\_\_\_ @ \_\_\_\_\_

2017 Annual Gross Income \$: \_\_\_\_\_

Highest Level of Education Achieved (check one):

\_\_\_\_\_ Middle School      \_\_\_\_\_ Some High School      \_\_\_\_\_ High School Graduate  
\_\_\_\_\_ Some College      \_\_\_\_\_ Bachelor's Degree      \_\_\_\_\_ Master's Degree or Higher

Gender Identity (Choose all that apply):

- ☐ Man/Male  
☐ Woman/Female  
☐ Transgender  
☐ Other \_\_\_\_\_  
Please share how you identify  
☐ Prefer not to say

Gender Pronoun (Check all that apply):

- ☐ He/Him  
☐ She/Her  
☐ They/Them  
☐ Other \_\_\_\_\_  
Please share how you are to be addressed

Race (Check all that apply):

- ☐ East Asian Heritage, Southeast Asian Heritage, South Asian Heritage, Pacific Islander Heritage, East/Southeast/South Asian, Asian American, Heritage from the Indian Sub-Continent  
☐ Black, African Heritage, Afro-Caribbean Heritage, African American  
☐ Greater Middle Eastern Heritage, Arab Heritage, West Asian Heritage, Middle Eastern or Arab or West Asian American  
☐ Latino/a Heritage, Hispanic Heritage, Latino/a or Hispanic American  
☐ Multiracial Heritage, Multiracial American  
☐ First Nations Heritage, Indigenous and Aboriginal People, Native American  
☐ White, European Heritage, European American  
☐ Transracially Adopted  
☐ Other \_\_\_\_\_  
Please specify

What is your ethnic background?

Primary language(s) spoken at home: \_\_\_\_\_

What language(s) would you prefer to receive communication from Summerbridge? \_\_\_\_\_

NAME OF APPLICANT: \_\_\_\_\_

**HOUSEHOLD #1: PARENT/GUARDIAN #2 INFORMATION (Print Neatly)**

First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_ Last Name: \_\_\_\_\_

Relationship to applicant: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: CA Zip: \_\_\_\_\_

Home Phone: ( ) \_\_\_\_\_ Parent/Guardian Cell: ( ) \_\_\_\_\_

Occupation: \_\_\_\_\_ Employed by: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Parent/Guardian Email: \_\_\_\_\_ @ \_\_\_\_\_

2017 Annual Gross Income \$: \_\_\_\_\_

Highest Level of Education Achieved (check one):

\_\_\_\_\_ Middle School      \_\_\_\_\_ Some High School      \_\_\_\_\_ High School Graduate  
\_\_\_\_\_ Some College      \_\_\_\_\_ Bachelor's Degree      \_\_\_\_\_ Master's Degree or Higher

Gender Identity (Choose all that apply):

- ☐ Man/Male  
☐ Woman/Female  
☐ Transgender  
☐ Other \_\_\_\_\_  
Please share how you identify  
☐ Prefer not to say

Gender Pronoun (Check all that apply):

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☐ She/Her  
☐ They/Them  
☐ Other \_\_\_\_\_  
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☐ First Nations Heritage, Indigenous and Aboriginal People, Native American  
☐ White, European Heritage, European American  
☐ Transracially Adopted  
☐ Other \_\_\_\_\_  
Please specify

What is your ethnic background?

Primary language(s) spoken at home: \_\_\_\_\_

What language(s) would you prefer to receive communication from Summerbridge? \_\_\_\_\_

NAME OF APPLICANT: \_\_\_\_\_

**HOUSEHOLD #2: PARENT/GUARDIAN #1 INFORMATION (Print Neatly)**

First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_ Last Name: \_\_\_\_\_

Relationship to applicant: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: CA Zip: \_\_\_\_\_

Home Phone: ( ) \_\_\_\_\_ Parent/Guardian Cell: ( ) \_\_\_\_\_

Occupation: \_\_\_\_\_ Employed by: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Parent/Guardian Email: \_\_\_\_\_ @ \_\_\_\_\_

2017 Annual Gross Income \$: \_\_\_\_\_

Highest Level of Education Achieved (check one):

- \_\_\_\_\_ Middle School      \_\_\_\_\_ Some High School      \_\_\_\_\_ High School Graduate  
\_\_\_\_\_ Some College      \_\_\_\_\_ Bachelor's Degree      \_\_\_\_\_ Master's Degree or Higher

Gender Identity (Choose all that apply):

- ☐ Man/Male  
☐ Woman/Female  
☐ Transgender  
☐ Other \_\_\_\_\_  
Please share how you identify  
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☐ White, European Heritage, European American  
☐ Transracially Adopted  
☐ Other \_\_\_\_\_  
Please specify

What is your ethnic background?

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Primary language(s) spoken at home: \_\_\_\_\_

What language(s) would you prefer to receive communication from Summerbridge? \_\_\_\_\_

NAME OF APPLICANT: \_\_\_\_\_

**HOUSEHOLD #2: PARENT/GUARDIAN #2 INFORMATION (Print Neatly)**

First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_ Last Name: \_\_\_\_\_

Relationship to applicant: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: CA Zip: \_\_\_\_\_

Home Phone: ( ) \_\_\_\_\_ Parent/Guardian Cell: ( ) \_\_\_\_\_

Occupation: \_\_\_\_\_ Employed by: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Parent/Guardian Email: \_\_\_\_\_ @ \_\_\_\_\_

2017 Annual Gross Income \$: \_\_\_\_\_

Highest Level of Education Achieved (check one):

- \_\_\_\_\_ Middle School      \_\_\_\_\_ Some High School      \_\_\_\_\_ High School Graduate  
\_\_\_\_\_ Some College      \_\_\_\_\_ Bachelor's Degree      \_\_\_\_\_ Master's Degree or Higher

Gender Identity (Choose all that apply):

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☐ Woman/Female  
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☐ Other \_\_\_\_\_  
Please share how you identify  
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Gender Pronoun (Check all that apply):

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Please share how you are to be addressed

Race (Check all that apply):

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☐ Multiracial Heritage, Multiracial American  
☐ First Nations Heritage, Indigenous and Aboriginal People, Native American  
☐ White, European Heritage, European American  
☐ Transracially Adopted  
☐ Other \_\_\_\_\_  
Please specify

What is your ethnic background?

Primary language(s) spoken at home: \_\_\_\_\_

What language(s) would you prefer to receive communication from Summerbridge? \_\_\_\_\_

## HOUSEHOLD #1 FINANCIAL INFORMATION

We require the following information to help us ensure that we are meeting our goal of preparing ambitious middle school students from under-resourced circumstances to enter and thrive in well-matched high schools, for the purpose of securing admission to, succeeding in, and graduating from a four-year college.

Summerbridge assists families who, without the program, would otherwise not be able to afford the services offered.

NOTE: The information that you provide will be kept **strictly confidential**. Summerbridge is a non-profit organization that relies on grants from foundations to fund the program and these foundations often want to know about the background of our students. We only report statistical data, not the identities or financial information of individual families.

Does your student qualify for Free and/or Reduced-Priced Lunch? (circle one)    Yes            No

**IMPORTANT AND REQUIRED:** Please attach a copy of your 2017 IRS Federal tax returns including all of the supporting documents such as W-2's, 1099's, and appropriate schedules. *(Contact the Summerbridge office immediately with any questions or concerns about these documents.)*

**NOTE: Summerbridge does not require social security numbers. Please remove or conceal any social security numbers listed on your tax documents prior to submitting.**

Student lives with Household #1 Parent/Guardian #1 \_\_\_\_\_% (of the time)

Student lives with Household #1 Parent/Guardian #2 \_\_\_\_\_% (of the time)

Student lives with Household #2 Parent/Guardian #1 \_\_\_\_\_% (of the time)

Student lives with Household #2 Parent/Guardian #2 \_\_\_\_\_ % (of the time)

OPTIONAL - Additional information that might help us further understand your family's financial situation. (Continue on the back if needed)

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HOUSEHOLD #2 FINANCIAL INFORMATION	
NAME	_____
ADDRESS	_____
CITY	_____
STATE	_____
ZIP	_____
PHONE	_____
DATE	_____

We require the following information to help us ensure that we are meeting our goal of preparing ambitious middle school students from under-resourced circumstances to enter and thrive in well-matched high schools, for the purpose of securing admission to, succeeding in, and graduating from a four-year college.

Summerbridge assists families who, without the program, would otherwise not be able to afford the services offered.

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**NOTE: Summerbridge does not require social security numbers. Please remove or conceal any social security numbers listed on your tax documents prior to submitting.**

Student lives with Household #1 Parent/Guardian #1 \_\_\_\_\_% (of the time)  
Student lives with Household #1 Parent/Guardian #2 \_\_\_\_\_% (of the time)

Student lives with Household #2 Parent/Guardian #1 \_\_\_\_\_% (of the time)  
 Student lives with Household #2 Parent/Guardian #2 \_\_\_\_\_% (of the time)

OPTIONAL - Additional information that might help us further understand your family financial situation. (Continue on the back if needed)

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## HOUSEHOLD #1 PARENT/ GUARDIAN SHORT ANSWERS

**Please answer the following questions in the space(s) provided.**

1. Scenario: Your child plays on a sports team and you just realized that practices and a few games are scheduled on the same day as Summerbridge. What would be your approach to resolving this situation? How would you expect Summerbridge to react to your child's extra-curricular schedule?

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2. Why do you wish to see your child enrolled in Summerbridge? What parts of the program are you most excited about and why? What might your child gain from the program?

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3. Please comment on any factors that have had an impact on your child's academic or social progress to date. This may include tutoring, accelerated programs, or social circumstances.

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## TRANSCRIPT, REPORT CARD, AND STANDARDIZED TEST SCORES

### SUMMERBRIDGE SAN FRANCISCO

San Francisco University High School  
3065 Jackson St.  
San Francisco, CA 94115

#### Counselor or Principal Form

*Parent/Guardian: Please complete this form, include your signature below and take it to your child's school office. **Do NOT submit this form to the Summerbridge Office. See instructions below:***

1. **Counselor and/or Principal:** Give this form to School Registrar, Secretary, or person in charge of transcripts.

2. **School Registrar/Secretary:** Provide Summerbridge with a copy of the first semester of the student's 6th grade report card and a copy of their most recent most recent standardized test scores (2017-2018 or 2018-2019).

3. **School Registrar/Secretary:** Email, mail, or fax the required documents to the Summerbridge office using the information listed below.

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My child, \_\_\_\_\_, is applying to **Summerbridge San Francisco**, a tuition-free, academic enrichment, year-round, and college preparatory program.

**School Registrar/Secretary:** In order to complete my student's application for the program, it is required that Summerbridge receives the items listed below by **Friday, March 1, 2019 by 5:00 pm**. **Please provide a copy of the following items and directly mail, fax or email to the Summerbridge office.**

- 1) My child's official transcript / grades for the first semester of 6<sup>th</sup> grade (2018-2019)
- 2) My child's most current standardized test scores from the 2017-2018 school year

Send completed materials to:

Attn: Summerbridge Admissions Team  
San Francisco University High School  
3065 Jackson St.  
San Francisco, CA 94115

**Fax:** (415) 447-5801

Questions? Contact Dara Northcroft at [dara.northcroft@sfuhs.org](mailto:dara.northcroft@sfuhs.org) or (415) 447-3127.

Thank you,

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Parent/Guardian Signature

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Date



## COMMITMENT AND CONFIDENTIALITY STATEMENTS

By signing below, we understand that if selected to advance to the interview round, the applicant and at least one parent or guardian must participate in the Summerbridge interview on **Saturday, March 23, 2019**.

By signing below, we understand that Summerbridge San Francisco at University High School is a three-year, college preparatory, enrichment program. If accepted, we agree not to plan events including, but not limited to, vacations during the dates and times of the summer and school year program.

By signing below, we acknowledge that all school records and information are true to our knowledge pertaining to the application of the above named student. The information included in this application shall be kept completely confidential and shall not be disclosed to non-Summerbridge or University High School staff or its admissions committee. This information shall be kept confidential to all others, including the student and family.

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

\_\_\_\_\_  
Date

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

\_\_\_\_\_  
Date

The interview will take place at University High School (3065 Jackson St. between Lyon and Baker). The available time slots are 8:00am, 10:00am, or 1:00pm. Please indicate your first, second, and third choices of times. You will receive an email after the application deadline confirming your interview time.

Indicate your 1<sup>st</sup>, 2<sup>nd</sup>, and 3<sup>rd</sup>: 8:00am \_\_\_\_\_ 10:00am \_\_\_\_\_ 1:00pm \_\_\_\_\_

Please help us understand your family budget by completing the chart below. Please estimate when necessary and be as accurate as possible. If a line item does not apply to you, please leave it blank.

		<u>PARENT #1</u>	<u>PARENT #2</u>	<u>TOTAL ANNUAL</u>
<b>INCOME</b>				
	Net Wages From Work			
	Disability Income			
	Unemployment Income			
	Other Income (please describe)			
<b>SPENDABLE INCOME</b>		\$	\$	\$

<b>EXPENSES</b>				
<b>HOUSING</b>				
	Rent Payment			
	First Mortgage Payment (if applicable)			
	Second Mortgage Payment (if applicable)			
<b>FOOD</b>				
	Groceries			
	Eating Out			
<b>FAMILY OBLIGATIONS</b>				
	Child Support/Alimony			
	Day Care/Babysitting			
<b>UTILITIES</b>				
	Power, Gas, and Electricity (PG&E)			
	Cable/Internet			
	Telephone (Landline, Cell)			
	Other			
<b>HEALTH AND MEDICAL</b>				
	Health Insurance			
	Dental Insurance			
	Vision Insurance			
	Life Insurance			
	Out-of-Pocket Medical Expenses			
<b>EDUCATION</b>				
	Tuition			
	Lessons/Tutoring			

<b>TRANSPORTATION</b>				
	Car Payments			
	Gasoline			
	Auto Repairs/Maintenance			
	Auto Insurance			
	Other (Tolls, Bus, BART, Taxi, and Rideshare)			
<b>DEBT PAYMENTS (NOT HOUSING-RELATED)</b>				
	Credit Cards			
	Student Loans			
<b>INVESTMENTS AND SAVINGS</b>				
	401(K), 403(B), IRA Payments			
	Investment Purchases/Reinvestments			
	College Fund			
	Savings			
	Emergency Fund			
	Flex Spending Accounts for Health, Day Care			
<b>MISCELLANEOUS</b>				
	Gifts/Donations			
	Miscellaneous Expense			
<b>TOTAL INVESTMENTS AND EXPENSES</b>		\$	\$	\$

<b>SURPLUS/SHORTFALL</b>	<b>(Subtract Investments and Expenses from Spendable Income)</b>	\$	\$	\$
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Please help us understand your family budget by completing the chart below. Please estimate when necessary and be as accurate as possible. If a line item does not apply to you, please leave it blank.

		<u>PARENT #1</u>	<u>PARENT #2</u>	<u>TOTAL ANNUAL</u>
<b>INCOME</b>				
	Net Wages From Work			
	Disability Income			
	Unemployment Income			
	Other Income (please describe)			
<b>SPENDABLE INCOME</b>		\$	\$	\$

<b>EXPENSES</b>				
<b>HOUSING</b>				
	Rent Payment			
	First Mortgage Payment (if applicable)			
	Second Mortgage Payment (if applicable)			
	Telephone (Landline, Cell)			
<b>FOOD</b>				
	Groceries			
	Eating Out			
<b>FAMILY OBLIGATIONS</b>				
	Child Support/Alimony			
	Day Care/Babysitting			
<b>UTILITIES</b>				
	Power, Gas, and Electricity (PG&E)			
	Cable/Internet			
	Other			
<b>HEALTH AND MEDICAL</b>				
	Health Insurance			
	Dental Insurance			
	Vision Insurance			
	Life Insurance			
	Out-of-Pocket Medical Expenses			
<b>EDUCATION</b>				
	Tuition			
	Lessons/Tutoring			

<b>TRANSPORTATION</b>				
	Car Payments			
	Gasoline			
	Auto Repairs/Maintenance			
	Auto Insurance			
	Other (Tolls, Bus, BART, Taxi, and Rideshare)			
<b>DEBT PAYMENTS (NOT HOUSING-RELATED)</b>				
	Credit Cards			
	Student Loans			
<b>INVESTMENTS AND SAVINGS</b>				
	401(K), 403(B), IRA Payments			
	Investment Purchases/Reinvestments			
	College Fund			
	Savings			
	Emergency Fund			
	Flex Spending Accounts for Health, Day Care			
<b>MISCELLANEOUS</b>				
	Gifts/Donations			
	Miscellaneous Expense			
<b>TOTAL INVESTMENTS AND EXPENSES</b>		\$	\$	\$

<b>SURPLUS/SHORTFALL</b>	<b>(Subtract Investments and Expenses from Spendable Income)</b>	\$	\$	\$
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# Summerbridge San Francisco

## New Student Application – Math Teacher Recommendation (Page 1 of 2)

### RECOMMENDATION (MATH TEACHER)

**Parent/Guardian:** Complete the top portion of this form and give it to your child's current teacher.

Name of Applicant: \_\_\_\_\_  
First Middle Last

Today's Date: \_\_\_\_\_ Current Grade Level: \_\_\_\_\_  
Month/Day/Year

I hereby give permission to release the information on this form concerning my child. I understand that I will not have access to this confidential information. *Parent/Guardian signature required*

\_\_\_\_\_  
Parent/Guardian Name

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

\_\_\_\_\_  
Date

**Student's Current Teacher:** The above-named student is applying to Summerbridge, a tuition-free, academic enrichment and advocacy program for motivated 6<sup>th</sup> grade students. The program consists of three consecutive six-week summer sessions, starting the summer before 7<sup>th</sup> grade. To assist us in deciding if our program suits this student's educational needs, we ask you to complete and return this descriptive form. We would appreciate your candid responses; all recommendations are kept confidential.

Please return documents to Attn: Summerbridge Admissions Team, San Francisco University High School, 3065 Jackson St., San Francisco, CA 94115 or fax to (415) 447-5801. If you have questions, please contact Dara Northcroft at [dara.northcroft@sfuhs.org](mailto:dara.northcroft@sfuhs.org) or call (415) 447-3127.

Please return this form in a sealed envelope to your student OR directly to Summerbridge no later than Monday, February 25, 2019. (INSTRUCTIONS: Place a check mark in the appropriate box below. IMPORTANT: Do not place your check mark in between to rankings; it is important that you make one clear ranking per category.)

	BELOW AVERAGE	AVERAGE	ABOVE AVERAGE	EXCELLENT	UNABLE TO COMMENT
Academic potential					
Academic achievement					
Effort/Motivation					
Ability to work in groups					
Ability to work alone					
Ability to relate well to adults					
Follows directions					
Seeks help when needed					
Attention span					
Reaction to criticism					
Leadership potential					
Initiative					
Classroom conduct					
Self confidence					
Math fundamentals					
Problem solving skills					

How long and in what capacity have you known this applicant?

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What are the first three words that come to mind to describe this student?

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Does this applicant have any special needs (e.g. learning differences, pronounced social or emotional challenges, speech or hearing limitations, exceptional physical conditions) that should be accommodated?

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Please describe the family's relationship with faculty and administration.

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Is there any additional information that could be better conveyed in a phone or email conversation?

☐ Yes, I would like a follow-up conversation      ☐ No

Are you familiar with the Summerbridge at University High School program?

☐ Not at All      ☐ Somewhat      ☐ Fairly      ☐ Very Familiar

Specific Recommendation (please keep in mind that our program is very academically rigorous):

☐ Highly recommend    ☐ Recommend    ☐ Recommend with reservations    ☐ Not recommend

Form completed by: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Teacher Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# Summerbridge San Francisco

New Student Application – English/Language Arts Teacher Recommendation (Page 1 of 2)

## RECOMMENDATION (ENGLISH/LANGUAGE ARTS TEACHER)

**Parent/Guardian:** Complete the top portion of this form and give it to your child's current teacher.

Name of Applicant: \_\_\_\_\_  
First Middle Last

Today's Date: \_\_\_\_\_ Current Grade Level: \_\_\_\_\_  
Month/Day/Year

I hereby give permission to release the information on this form concerning my child. I understand that I will not have access to this confidential information. *Parent/Guardian signature required*

\_\_\_\_\_  
Parent/Guardian Name

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

\_\_\_\_\_  
Date

**Student's Current Teacher:** The above-named student is applying to Summerbridge, a tuition-free, academic enrichment and advocacy program for motivated 6<sup>th</sup> grade students. The program consists of three consecutive six-week summer sessions, starting the summer before 7<sup>th</sup> grade. To assist us in deciding if our program suits this student's educational needs, we ask you to complete and return this descriptive form. We would appreciate your candid responses; all recommendations are kept confidential.

Please return documents to Attn: Summerbridge Admissions Team, San Francisco University High School, 3065 Jackson St., San Francisco, CA 94115 or fax to (415) 447-5801. If you have questions, please contact Dara Northcroft at [dara.northcroft@sfuhs.org](mailto:dara.northcroft@sfuhs.org) or call (415) 447-3127.

Please return this form in a sealed envelope to your student OR directly to Summerbridge no later than Monday, February 25, 2019. (INSTRUCTIONS: Place a check mark in the appropriate box below. IMPORTANT: Do not place your check mark in between to rankings; it is important that you make one clear ranking per category.)

	BELOW AVERAGE	AVERAGE	ABOVE AVERAGE	EXCELLENT	UNABLE TO COMMENT
Academic potential					
Academic achievement					
Effort/Motivation					
Ability to work in groups					
Ability to work alone					
Ability to relate well to adults					
Follows directions					
Seeks help when needed					
Attention span					
Reaction to criticism					
Leadership potential					
Initiative					
Classroom conduct					
Self confidence					
Reading comprehension					
Writing					



How long and in what capacity have you known this applicant?

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What are the first three words that come to mind to describe this student?

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Does this applicant have any special needs (e.g. learning differences, pronounced social or emotional challenges, speech or hearing limitations, exceptional physical conditions) that should be accommodated?

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Please describe the family's relationship with faculty and administration.

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Is there any additional information that could be better conveyed in a phone or email conversation?

☐ Yes, I would like a follow-up conversation ☐ No

Are you familiar with the Summerbridge at University High School program?

☐ Not at All ☐ Somewhat ☐ Fairly ☐ Very Familiar

Specific Recommendation (please keep in mind that our program is very academically rigorous):

☐ Highly recommend ☐ Recommend ☐ Recommend with reservations ☐ Not recommend

Form completed by: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Teacher Signature: \_\_\_\_\_ Date: \_\_\_\_\_