

# Oxnard Middle College High School

4000 South Rose Ave, Oxnard, CA 93033

Phone: 805 278 5521

## Application Packet

**OMCHS will be accepting applications starting on November 1, 2022. Application deadline is February 24, 2023. Completed applications can be submitted to OMCHS' office located at JCC1 at Oxnard College or on line on or before February 24, 2023. The office is open from 8:00 AM to 4:00 PM, Monday – Friday. Please park on the visitors parking space located on the G parking lot. Applications can also be emailed to [Lisette.sandoval@oxnardunion.org](mailto:Lisette.sandoval@oxnardunion.org) or [Lizette.berumen@oxnardunion.org](mailto:Lizette.berumen@oxnardunion.org)**

**Use the following checklist to ensure that your application is complete. Applications must include all items listed below.**

Students living within the boundaries of OUHSD must provide:

1. Completed OMCHS' application
2. Handwritten Essay (Use attached form)
3. Teacher recommendation form required, two recommended, must include one from a current teacher in a core area. **Must use the forms included.**
4. Attendance report for the 2021-2022 school year and for the current year 2022-2023 up to the present
5. Transcripts for the 2021-2022 school year and up to date for the current school year 2022-2023. If applicant is a high school student must include high school transcript.
6. All applicants must have a current cumulative GPA of 3.0 or higher for the last two school years.

**Note: Students living outside the OUHSD boundaries must also submit an approved inter-district transfer.**

### Application Review:

1. Incomplete applications will not be considered
2. Qualified applicants will be invited to an interview as part the application process
3. No applicant is guaranteed acceptance.
4. Students accepted to OMCHS and their parent or guardian will be required to attend all required meetings during the month of March.

Please contact Lizette Berumen at 805 394 4726 or Lisette Sandoval at 805 394 8369 if you have any questions.

***For office use only***

Received by:

Date:

Complete: YES NO

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## Aplicación Estudiantil

**OMCHS estará aceptando solicitudes para admisión de estudiantes a partir del 1 de noviembre del 2022. La aplicación se puede entregar el antes del 24 de febrero del 2023. Las solicitudes completas pueden entregarse a la Oficina de OMCHS localizada en JCC1 en el Colegio de Oxnard o por correo electrónico. Favor de estacionarse en el área para visitantes en el estacionamiento G. La oficina está abierta de 8:00 a.m. a 4:00 p.m. de lunes a viernes. Las aplicaciones pueden ser enviadas por correo electrónico a [Lisette.sandoval@oxnardunion.org](mailto:Lisette.sandoval@oxnardunion.org) o [Lizette.berumen@oxnardunion.org](mailto:Lizette.berumen@oxnardunion.org)**

### Instrucciones:

Los estudiantes que viven dentro del área de OUHSD necesitan entregar los siguientes documentos:

1. Solicitud completa
2. Ensayo manuscrito (usar el formulario adjunto)
4. Forma de recomendación requerida, de preferencia dos formas de recomendación, con una de un maestro/a de una clase académica actual, **se deben de utilizar las formas incluidas.**
5. Reporte de asistencia del año escolar 2021-2022 y lo que va del 2022-2023.
6. Boleta de calificaciones del año escolar 2021-2022 y lo que va del año escolar 2022-2023.
7. Todos los aplicantes deben tener un GPA acumulativo de 3.0 o más por los últimos dos años escolares. Si el aplicante es de preparatoria por favor incluir la boleta de la preparatoria.

**Nota: Los estudiantes que viven fuera del área de OUHSD también deben presentar una forma de inter-distrito aprobada.**

### Revisión de la aplicación:

1. Las aplicaciones incompletas no serán consideradas.
3. Los solicitantes calificados serán invitados a una entrevista como parte del proceso de solicitud.
4. No se garantiza admisión a todos los aplicantes.
5. Los estudiantes aceptados en OMCHS y sus padres o tutores deberán asistir a juntas mandatorias durante el mes de marzo.

Si tiene alguna pregunta por favor póngase en contacto con Lizette Berumen al 805 394 4726 o con Lisette Sandoval al 805 394 8369.

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Received by:

Date:

Complete: YES NO





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## STUDENT INFORMATION/INFORMACION DEL ESTUDIANTE:

\_\_\_\_\_  
Last Name/Apellido

\_\_\_\_\_  
First Name/Nombre

Birth Date/Fecha de nacimiento: \_\_\_\_\_

Parent/Guardian Full Name/ Nombre del padre o tutor: \_\_\_\_\_ Phone # \_\_\_\_\_  
e-mail address/correo electronico: \_\_\_\_\_

Parent/Guardian Full Name/ Nombre del padre o tutor: \_\_\_\_\_ Phone # \_\_\_\_\_  
e-mail address/correo electronico: \_\_\_\_\_

Mailing Address: Street, City, and Zip/ Dirección (Calle, ciudad y código postal):

\_\_\_\_\_  
\_\_\_\_\_

Describe in complete sentences your talents, hobbies leadership experiences and special interests:

Describe en oraciones completas tus talentos, aficiones, experiencias de liderazgo y otros intereses especiales:

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I understand and agree to the following: Admission will be determined by availability of space, the quality of the applicant's academic record and written essay, the content of the recommendations submitted in support of the candidate, as well as the Review Committee's overall determination following the interview.

Entiendo y acepto lo siguiente: La admisión se determinará por la disponibilidad de espacio, la calidad del expediente académico y el ensayo escrito del solicitante, el contenido de las recomendaciones presentadas, así como la determinación general del Comité de Revisión posterior a la entrevista.

Applicant's Signature/Firma del aplicante: \_\_\_\_\_ Date/Fecha: \_\_\_\_\_

Parent or Guardian Signature/Firma del padre o Tutor: \_\_\_\_\_

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## PARENT/GUARDIAN AGREEMENT

### I UNDERSTAND THAT:

- Oxnard Middle College High School offers an accelerated program that includes college classes.
- My student must complete an application with Oxnard College and attend a mandatory orientation with OC.
- My child will be enrolled in college classes with adults, and that he/she may be exposed to adult material and/or language.
- No transportation is provided by OUHSD for this school.
- My child's continuation at OMCHS is contingent upon maintaining academic and behavioral standards as set forth in the OUHSD Parent/Student Handbook, Oxnard College and the Oxnard Middle College High School Code of Conduct.
- My student must maintain exemplary attendance in both high school and college classes.
- My student must maintain a 3.0 GPA or higher in all classes both college and high school
- I am hereby granting Oxnard Middle College High School permission to obtain and review copies of my child's prior school records under the provision of the Family Education Rights and Privacy Act.
- I understand that parent involvement plays a critical role in the academic success of my student.
- I understand that my student's record for all college classes is the responsibility of my student and that Oxnard College does not have any responsibility in communicating with parents of students in regard to the academic record or attendance of the student.

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

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

## ACUERDO DE PADRES / TUTORES

### ENTIENDO QUE:

- Oxnard Middle College High School ofrece un programa acelerado que incluye clases universitarias.
- Mi hijo/a hará una solicitud para ingresar al colegio de Oxnard y tendrá que asistir a una orientación mandataria.
- Mi hijo/a se inscribirá en clases de la universidad con adultos, y que él / ella puede estar expuesto a material y / o lenguaje para adultos.
- No hay transporte proporcionado por OUHSD para esta escuela.
- La continuación de mi hijo en la escuela depende de mantener un alto nivel académico y de conducta de acuerdo a las normas establecidas en el Manual para padres y estudiantes de OUHSD, el Código de Conducta de Oxnard College y el Código de Conducta de Oxnard Middle College High School.
- Mi estudiante deberá mantener asistencia ejemplar tanto en la preparatoria como en el colegio.
- Mi estudiante debe mantener un GPA de 3.0 o más en todas las clases, tanto de colegio como de la preparatoria.
- Por la presente estoy otorgando permiso a Oxnard Middle College High School para obtener y revisar copias de los registros escolares anteriores de mi hijo bajo la provisión de los Derechos de Educación Familiar y Acto privado.
- Entiendo que la participación de los padres juega un papel crítico en el éxito académico de mi estudiante.
- Entiendo que mi registro de estudiante para todas las clases del colegio es responsabilidad de mi estudiante y que Oxnard College no tiene ninguna responsabilidad en la comunicación con los padres de los estudiantes con respecto a al registro académico o de asistencia del estudiante.

Firma del padre / tutor: \_\_\_\_\_

Fecha: \_\_\_\_\_

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## Student Reference/Recommendation Form-Optional

Student: Please write your name and grade level and give this form to a person of your choice.

Estudiante: Favor de completar tu nombre y grado y entregar esta forma a una persona elegida por ti.

**Student's Name:** \_\_\_\_\_ **GradeLevel:** \_\_\_\_\_

The above named student is applying to Oxnard Middle College High School for 2023-2024 school year. If the student is accepted, the student will be required to successfully complete high school and college classes each semester. Your responses are valuable in helping Oxnard Middle College High School staff to identify which students will benefit from and succeed in the program.

**Name and Title of Reference:** \_\_\_\_\_

**How long have you known the applicant?** \_\_\_\_\_

**How well do you know the applicant?**    \_\_\_ Very well            \_\_\_ Fairly well            \_\_\_ Somewhat well

**E-mail Address** \_\_\_\_\_ **Phone**(\_\_\_\_\_) \_\_\_\_\_

**STUDENT'S LANGUAGE CLASSIFICATION (CIRCLE ONE)    EO            RFEP            EL**

1. What is the quality of the applicant's performance in scholastic and extra curricular activities? Does he/she have any unusual competencies, talents, or leadership qualities? Please use examples to illustrate your comments.

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2. Why do you feel this student would be a good candidate for Oxnard Middle College High School?

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**CONTINUE ON BACK PLEASE**

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## Student Reference/Recommendation Form

**RATE THE STUDENT IN THE ATTRIBUTES LISTED BELOW:**

	<b>Excellent</b>	<b>Good</b>	<b>Fair</b>	<b>No Information</b>
1. Academic potential	_____	_____	_____	_____
2. Academic Achievement	_____	_____	_____	_____
3. Effort/Drive	_____	_____	_____	_____
4. Study Habits	_____	_____	_____	_____
5. Attendance	_____	_____	_____	_____
6. Punctuality	_____	_____	_____	_____
7. Ability to work alone	_____	_____	_____	_____
8. Written Expression	_____	_____	_____	_____
9. Ability to express ideas orally	_____	_____	_____	_____
10. Critical Thinking	_____	_____	_____	_____
11. Following Directions	_____	_____	_____	_____
12. Integrity	_____	_____	_____	_____
13. Conduct	_____	_____	_____	_____
14. Respect given to adults	_____	_____	_____	_____
15. Ability to do college work	_____	_____	_____	_____
16. Motivation to go to college	_____	_____	_____	_____
17. Comments:	_____			
	_____			
	_____			
	_____			

**OVERALL RECOMMENDATION-PLEASE CIRCLE ONE:    EXCELLENT    GOOD    FAIR    POOR**

Signature of Reference: \_\_\_\_\_

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

Oxnard Middle College High School selection committee appreciates your time and effort. Should you wish to speak to a Middle College High School staff member, call (805) 385 2540. **PLEASE RETURN THIS FORM TO THE STUDENT IN A SEALED ENVELOPE OR E-MAIL TO [Maricruz.hernandez@oxnardunion.org](mailto:Maricruz.hernandez@oxnardunion.org)**



# Oxnard Middle College High School

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## Student Reference/Recommendation Form-Required Carta de Recomendación-requerida

Student: Please write your name and grade level and give this form to your Teacher.

Estudiante: Favor de completar tu nombre y grado y entregar esta forma al Maestro/a.

**Student's Name:** \_\_\_\_\_ **GradeLevel:** \_\_\_\_\_

The above named student is applying to Oxnard Middle College High School for the 2023-2024 school year. If the student is accepted, the student will be required to successfully complete high school and college classes each semester. Your responses are valuable in helping OMCHS staff to identify which students will benefit from and succeed in the program.

**Name and Title of Reference:** \_\_\_\_\_

**How long have you known the applicant?** \_\_\_\_\_

**How well do you know the applicant?**    \_\_\_ Very well            \_\_\_ Fairly well            \_\_\_ Somewhat well

**E-mail Address** \_\_\_\_\_ **Phone(\_\_\_\_)** \_\_\_\_\_

1. What is the quality of the applicant's performance in scholastic and extra curricular activities? Does he/she have any unique competencies, talents, or leadership qualities? Please use examples to illustrate your comments.

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2. Why do you feel this student would be a good candidate for Oxnard Middle College High School?

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**CONTINUE ON BACK PLEASE**

## STUDENT REFERENCE/RECOMMENDATION FORM

**RATE THE STUDENT IN THE ATTRIBUTES LISTED BELOW:**

	Excellent	Good	Fair	No Information
3. Academic potential	_____	_____	_____	_____
4. Academic Achievement	_____	_____	_____	_____
5. Effort/Drive	_____	_____	_____	_____
6. Study Habits	_____	_____	_____	_____
7. Attendance	_____	_____	_____	_____
8. Punctuality	_____	_____	_____	_____
9. Ability to work alone	_____	_____	_____	_____
10. Written Expression	_____	_____	_____	_____
11. Ability to express ideas orally	_____	_____	_____	_____
12. Critical Thinking	_____	_____	_____	_____
13. Following Directions	_____	_____	_____	_____
14. Integrity	_____	_____	_____	_____
15. Classroom conduct	_____	_____	_____	_____
16. Respect given to adults	_____	_____	_____	_____
17. Has the ability to do college work	_____	_____	_____	_____
18. Has motivation to go to college	_____	_____	_____	_____
19. Comments:	_____			
	_____			
	_____			
	_____			
	_____			

**OVERALL RECOMMENDATION-CIRCLE ONE:    EXCELLENT    GOOD    FAIR    POOR**

Signature of Reference: \_\_\_\_\_

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

Oxnard Middle College High School selection committee appreciates your time and effort. Should you wish to speak to a Middle College High School staff member, call (805) 385 2540. **PLEASE RETURN THIS FORM TO THE STUDENT IN A SEALED ENVELOPE OR MAIL TO [maricruz.hernandez@oxnardunion.org](mailto:maricruz.hernandez@oxnardunion.org)**