



WHS LEAP Leadership and Educational Advancement Program Student Application

2024-2025 SCHOOL YEAR – APPLICATIONS DUE BY March 8, 2024

Name:
(Please print)

Date of Birth:

Street Address:

LEAP Pathway

I am applying for the following LEAP Pathway for the 2024-2025 academic year:

DUAL Enrollment

Students take Gr. 8 core subjects in the Middle School and electives in the High School.

EARLY Enrollment

Students are enrolled in and take all Gr. 9 courses at the High School.

Parent/Guardian Information

Name:

Street Address: *SAME AS ABOVE (circle)*

Email:

Phone:

APPLICATION REQUIREMENTS – INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED

Application Form
(pg. 1-2)

Personal Statement
(pg. 2)

1 Graded Writing Assignment from a core subject (ELA, Math, Science, or Social Studies)
(pg. 3)

Parent/Guardian Signature
(pg. 2)

Student Signature
(pg. 2)

Teacher Recommendation
(pg. 4)

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Please return your completed application to the Counseling Office by March 8, 2024.



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ADDITIONAL REQUIREMENTS

I understand that the following records will be collected and reviewed as part of the application process:

(Students and Guardians please initial each indicating acceptance.)

____ / ____ Gr. 6 & Gr. 7 Report Cards

____ / ____ Gr. 6 & Gr. 7 Attendance

____ / ____ Gr. 6 & Gr. 7 Discipline Record

Personal Statement

Directions: On a separate sheet of paper, please answer the question below in a response that is no more than 200 words. Your response should be typed and represent your best writing.

Question: Why would you like to participate in LEAP at Westport High School?

Please include the reason for your pathway preference (dual or early enrollment) and what you hope to achieve with this opportunity.

SIGNATURES

By signing below, I accept that high school credits earned in the 2024-2025 LEAP year are only transferable to Westport High School for Dual students. I realize that LEAP availability is subject to change due to scheduling and enrollment requirements. I give permission for the LEAP committee to review school records for the purpose of determining eligibility for participation in LEAP.

Signature of applicant (student):	Date:
Signature of parent/guardian:	Date:

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Graded Writing Assignment
Cover Sheet

Student Name:
 (Please print)

Date:

Directions:

Select a writing assignment that you have completed in one of your current Gr. 7 core classes (ELA, Math, Science, or Social Studies) that has been graded by your teacher.

Complete this Cover Sheet and attach it to the front of your graded writing assignment to submit with your application.

Only original, hand-written or typed assignments including teacher comments and/or rubric will be accepted for review.

In what core class was the attached assignment completed?

Teacher Name:

Briefly describe the assignment:

What grade did you receive?

Attach this Cover Sheet to the front of your graded writing assignment and submit it with your application.

Please return this recommendation directly to the Counseling Office by March 8, 2024.



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Teacher Recommendation

Student Name: <small>(Please print)</small>	Date:
Person Completing Form: <small>(Please print)</small>	Relationship to Student:

The above-named student is applying for LEAP at WHS. This form will be used as part of the criteria to determine the student's acceptance into the program.

Directions:
 Please rate the student in the areas below by placing a check in the column that best indicates the student's level of performance for each descriptor, compared to the student's peers.

		Exemplary	Proficient	Developing	Limited
Leadership	<i>Serves as a role model and motivates others</i>				
Academic Achievement	<i>Strives to work to personal potential</i>				
Integrity	<i>Acts with honesty, responsibility, and a positive attitude</i>				
Perseverance	<i>Overcomes setbacks and working to achieve goals</i>				
Community	<i>Contributes to and engages in the school community</i>				

		Recommend with Enthusiasm	Strongly Recommend	Recommend	Recommend with Reservation
Overall Evaluation					

Additional comments (optional): _____

*Please return this recommendation directly to the Counseling Office **by March 8, 2024.***