



Medina High School

Two Mustang Drive

Medina, NY 14103

585-798-2700

For Prospective Students

AVID Application

Return to Mr. Bell by _____

Student Name _____

Date _____

Parent's Name _____

Current Grade Level: _____

Parent Email: _____

Phone # _____

1. Write YES if you willing to take AVID all year as an elective class _____
2. Write YES if you and your parents commit to the parent participation that is an essential part of your success in AVID _____
3. Mother's Education: College Bach. Degree ____, College Assoc. Degree ____, No College ____
4. Father's Education: College Bach. Degree ____, College Assoc. Degree ____, No College ____
5. Student Race / Ethnicity: _____ I choose not to disclose: ____
6. Are you eligible for free / reduced lunch? ____ Yes ____ No I choose not to disclose: ____

All students who turn in an AVID application will participate in a 10 minute interview in which the following questions will be asked. Students will be evaluated on their interview performance so preparation is important!

1. What do you enjoy doing in your free time? What interests do you have?
2. What do you like most and least about school?
3. What motivates you?
4. How much time do you spend doing schoolwork at home?
5. What does "hard work" mean to you? Can you tell us about a time when you worked hard?
6. Do you want to go to college? Why or why not?
7. Do you have an idea of what you would want to study in college or do for a career?
8. What do you know about AVID? Why do you want to be a part of AVID?
9. Do you have any questions you would like to ask us about the AVID program?

FOR MORE INFORMATION ABOUT AVID, PLEASE VISIT WWW.MEDINACSD.ORG, SELECT "HIGH SCHOOL" FROM THE "SCHOOLS" TAB AND THEN CLICK "AVID" ON THE LEFT-HAND MENU. ALSO VISIT WWW.AVID.ORG TO LEARN MORE