

## **Orange County Department of Education**

## **Pacific Coast High School**

14262 Franklin Ave., Suite 100 Tustin, CA 92780

Phone: 714-245-6500 Fax: 714-508-0215

## **Application for Admission**

\_\_\_Fall 2014 \_\_\_Spring 2015

·	• •	es our ability to evaluate the appropriateness of PCHS ving documentation to the address or fax number	
Student Transcript (including STAR Testing Results (most Incoming 9 <sup>th</sup> grade students CHEP Families only—give CH Please include a legible curre NOTE: The CA Dept. of Education re	recent copy)  Is may submit 8 <sup>th</sup> grade report of  IEP Teacher Questionnaire to yent parent email address below  Ecommends the following for studyes motivation and a strong commends	h grades from instructors, or grade printout)  ards, with grades and credits, in lieu of a transcript our CHEP teacher to complete and fax to PCHS  Application status in communicated via email. dents who wish to enroll in independent study: "Generally, nitment on the part of the student and parent or guardian.  to work independently."	
Student Name (legal):			
Grade Fall 2014:	Age:	Date of Birth:	
District of Residence:			
Parent Name:		_Parent Email:	
Address:		City/State/Zip:	
Home Phone:		_Cell/Work Phone:	
1. Why is the student choosing	Pacific Coast High School at t	his time?	
2 (a). Is student currently attend 2 (b). Please list all high schools		No	
3. What is the student's reason	for leaving current school?		
4 (a). Was the student enrolled	in CHEP? (Community Home I	Education Program) Is so, teacher's name?	
4 (b). Has the student had home during what grade levels, and fo		udy experience other than CHEP? If yes, where,	

5 (a). Do both parents work?	Mom:	yes	full time	part time
		no		
	Dad:	yes	full time	part time
		no		
5 (b). Who will take primary respondence? If both parents work, explain	-	•	•	
5 (c). Describe the level of familia	rity <u>the student</u>	has with computer	s and the internet.	
5 (d). Describe the level of familia	rity the parent h	nas with computers	and the internet.	
6. How does the student feel abou	ut attending Pac	ific Coast High Sch	ool and working prii	marily from home?
QUESTIONS 7a-7d MUST BE ANSW	ERED FOR APPL	ICATION TO BE RE	VIEWED.	
7 (a). Does the student currently h	nave an active IE	P/Special Ed. Plan?	Yes*	No
Check if applicable:	RSP	Speech/Lan	gSDC	Other
*A copy of IEP or 504 Plan must be	submitted with t	this Request for Adı	mission.	
7 (b). Does the student currently h	nave a Section 50	04 Plan	Yes*	No
*A copy of IEP or 504 Plan must be	submitted with t	this Request for Adı	mission.	
7 (c). Does the student currently	nave undocumei	nted special needs	of any type:	
7 (d). Have you ever revoked cons	ent for special e	ducation related so	ervices declining an	IEP?YesNo
8. Has the student been expelled?		YesNo		
If yes, please explain why:				

9. How did you hear about PCHS?
10. Is the student a student-athlete registered with NCAAYesNo
11. In order to ensure our online orientation clearly explained PCHS, please answer the following questions. This section must be completed fully for the application to be reviewed.
a. How do students earn attendance in an Independent Study Program?
b. Per Independent Study law, who must agree that the program placement is in the best interest of the student?
c. What information is included in a course syllabus?
d. How would you summarize the parent's role at PCHS?
e. How are parents and students informed of student assignment scores?
f. How does the PCHS curriculum differ from that in traditional schools?
g. What do you think your greatest challenge will be in this program?