

# THE INTERNATIONAL BACCALAUREATE PROGRAM

Lincoln Park High School • 2001 North Orchard Street • Chicago, Illinois 60614

## APPLICATION FORM

This application must be returned by **December 1, 2009**. For more information, call (773) 534-8149. An application to the IB Program is also considered an application to the Double Honors Program.

1) **PARENT(S) OR GUARDIAN(S)** MUST FILL OUT THIS PORTION OF THE APPLICATION. *Please print.*

Child's name: \_\_\_\_\_ Male \_\_\_ Female \_\_\_  
(last) (first) (middle)

Child's Birthdate: \_\_\_\_\_ Child's Birthplace: \_\_\_\_\_  
(month) (day) (year) (city and state OR country)

Address: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Child's Social Security #: \_\_\_\_\_ Child's CPS ID # \_\_\_\_\_  
(if available) (if available)

Parent(s)/Guardian(s): \_\_\_\_\_ Business phone: \_\_\_\_\_

Mother's name: \_\_\_\_\_ Business phone: \_\_\_\_\_  
(last) (first) (maiden)

Mother's cell phone: \_\_\_\_\_ Father's cell phone: \_\_\_\_\_  
(if available) (if available)

### Racial/Ethnic Background

- \_\_\_ White, Non-Hispanic
- \_\_\_ Black, Non-Hispanic
- \_\_\_ American Indian/Alaskan Native
- \_\_\_ Asian/Pacific Islander
- \_\_\_ Hispanic
- \_\_\_ Multi-Racial

### Previous Advanced Study

- \_\_\_ Algebra Where? \_\_\_\_\_
- \_\_\_ Biology Where? \_\_\_\_\_
- \_\_\_ Language Where? \_\_\_\_\_
- Language studied: \_\_\_\_\_
- \_\_\_ Other subject What? \_\_\_\_\_

List the names of siblings or relatives who are currently participating in or have participated in the IB program at LPHS:

\_\_\_\_\_

Parent/Guardian's signature: \_\_\_\_\_ Date: \_\_\_\_\_

2) **ATTACH A COPY OF THE 7<sup>TH</sup> GRADE REPORT CARD** TO THIS APPLICATION, THEN GIVE THE APPLICATION WITH THE ATTACHED REPORT CARD TO YOUR ELEMENTARY SCHOOL COUNSELOR OR PRINCIPAL TO COMPLETE.

3) **THE HOME SCHOOL MUST COMPLETE THIS PORTION** AND ATTACH A COPY OF THE STUDENTS CUMULATIVE CARD (CUM CARD) INCLUDING GRADES AND ACHIEVEMENT TEST SCORES AND RETURN TO LPHS (GSR #33) BY DECEMBER 1, 2009.

Name of Elementary School: \_\_\_\_\_ CPS School Unit# \_\_\_\_\_

Address of School: \_\_\_\_\_ Zip \_\_\_\_\_

School Phone Number: \_\_\_\_\_ School Fax Number: \_\_\_\_\_ CPS GSR#: \_\_\_\_\_

### SCORES: Illinois Standards Achievement Test

Reading **Standard Score** \_\_\_\_\_ Date \_\_\_\_\_  
Math **Standard Score** \_\_\_\_\_ Date \_\_\_\_\_

### If your school gives another achievement test, i.e., California,

#### **Terra Nova, Stanford, etc., please list scores:**

Reading \_\_\_\_\_ Date \_\_\_\_\_  
Total Math \_\_\_\_\_ Date \_\_\_\_\_

Principal's Recommendations/Comments: \_\_\_\_\_

\_\_\_\_\_

Principal's Signature \_\_\_\_\_ Date \_\_\_\_\_