

FINAL ISP APPLICATION:
DUE NO LATER THAN WEDNESDAY, MARCH 8, 2006

A. Name _____ Year _____

Faculty Advisor _____

On-site Advisor _____

Telephone _____

Address _____

Address during your ISP, if different from your home address

Telephone _____

B. Day of the week and the time when you will meet with your faculty advisor each week.

Day _____ Time _____

C. Projected schedule of your week, hour-by-hour and day-by-day. (You may want to use the 7-day rotation instead of a weekly breakdown.)

D. Essay to be attached.

E. If you are to remain active in a Varsity sport or in an academic course, obtain the necessary information and corresponding signature(s) of approval.

Coach: I have reviewed this application and communicated my perception of the candidate's commitment to the team/activity during the ISP. I have attached an up-to-date schedule of games and practices.

Coach _____ Date _____ Sport _____

Teacher: I have reviewed this application and approve the schedules in the above section.

Teacher _____ Date _____ Sport _____

F. Be sure to attach the completed letter from your on-site advisor.

THE APPLICATION MUST BE COMPLETED UP TO THIS POINT BEFORE GETTING ANY OF THE SIGNATURES OF APPROVAL THAT FOLLOW.

G. PARENTAL APPROVAL

I have gone over every aspect of this application with my son/daughter, and I feel that the Project will be a feasible and worthwhile experience.

Parent or guardian _____ Date _____

H. Approval of your faculty project advisor.

I have reviewed this application thoroughly with my advisee, and I feel that the Project will be a feasible and worthwhile experience. We have arranged a time to meet once each week during the Project. The on-site advisor has agreed to contact me (or the ISP Coordinators) if anything goes wrong or changes significantly during the project.

Faculty Advisor for the Project _____ Date _____

I. Applicant's pledge:

I agree to follow the guidelines for the ISP and to live up to the spirit of the philosophy behind the ISP. I agree to follow the schedule above and realize successful completion of this project is a graduation requirement.

Applicant's Signature _____ Date _____