



Dear Interested Applicants and Families:

Enclosed is a packet for admission to the Washington Jesuit Academy for the 2012-2013 school year for the 5th, 6th or 7th grade. I am thankful for your interest in our school and look forward to working with you throughout this process.

Please review the materials enclosed and make sure you have completed all the necessary documents. The financial documents, especially the most recent 1040 tax form, are essential as students must meet qualifying guidelines as students from low-income family situations. In order to be accepted into WJA, families must first qualify under the District of Columbia adjusted guidelines for free or federal reduced National School Lunch program.

WJA is looking for students who show strong potential in academic and social areas. The school records (report card or transcripts from the past two school years) from the student's present school are vital so that we can evaluate the academic and social growth. Please make sure the transcript request form is delivered to your son's school and processed there. Please give the recommendation form to the teacher who will complete the form. It can be mailed directly from the recommender to Washington Jesuit Academy. Lastly, please make sure you sign the form and select a Saturday Morning Admissions Session you would like to attend with your son. The Saturday Admissions Program is a required part of the application process. The program will begin by 9am and be finished around 12 noon on the selected Saturday.

I have included additional information about the school in your packet. We are a middle school (grades 6-8) for boys and operate on an extended school day and extended school year model. You can learn more about the school by visiting our website, www.wjacademy.org. It provides great information about our school and the young men who attend. I am proud of our young men and the work they continue to do as they grow to be "Men for Others."

If you have any questions about the admissions process, please call me at 202-832-7679, x237, or, email me at mwashington@wjacademy.org. Once the forms are completed, please mail, email, or drop them off at the school. Thank you for your interest in WJA.

Sincerely,

A handwritten signature in blue ink that reads "Marcus Washington".

Marcus Washington
Headmaster



Washington Jesuit Academy
900 Varnum Street, NE
Washington, DC 20017
202-832-7679
202-832-8098 fax
www.wjacademy.org

Application for Admission

Please type or print all information. Incomplete applications will not be considered.

STUDENT INFORMATION

Student's Name: _____ Grade Applying For: 5 6 7

Home Address: _____

City: _____ State: _____ Zip Code: _____

Student's Date of Birth: _____ Age: _____

Home Phone **or** Best Number to Reach Parent: (_____) _____

Present School and Grade: _____

FAMILY INFORMATION (please complete fully)

Mother (or legal guardian)	Father
Name: _____	_____
Address: _____ _____	_____
Occupation: _____	_____
Employer: _____	_____
Position: _____	_____
Home Phone: _____	_____
Work Phone: _____	_____
Cell Phone: _____	_____
Email Address: _____	_____

Circle if appropriate:

Parents Together Father Remarried Father Deceased
Parents Divorced or Separated Mother Remarried Mother Deceased

Student Lives with: _____ Relation: _____ How Long?: _____

Brothers, Sisters and Dependants (other than parents) living in the home (include step-brothers and step-sisters)

Names	Age	Relation	Grade in School (if applies)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Religion of Applicant (for statistical purposes only) _____

Parish/Church (if applicable) _____

ACADEMIC INFORMATION

Please list all schools attended between 1st and 5th grades, starting with present:

School Name/Location	Grades	Dates
_____	_____	_____
_____	_____	_____
_____	_____	_____

Has this student ever received any testing and/or assistance for special learning needs or circumstances (ex: IEP, educational testing)? If so, Please describe the special learning needs and the testing performed to assess the student.

Has this student ever participated in any special program within school or outside of school due to behavior problems or other difficulties? Please describe.

Does this student have any health problems (or is this student taking any medications) that could affect participation in sports or other school activities? Please describe.

ASSETS DISCLOSURE AND FINANCIAL STATEMENT

Washington Jesuit Academy (WJA) requires all applications to have a completed **Assets Disclosure Statement as well as a copy of the most recent Tax Return.**

Students admitted to WJA will receive a full scholarship to attend the school, with the parents/ guardians responsible for a \$260 activity fee for the year.

WJA follows the **Federal Free and Reduced Lunch** standards (adjusted to DC cost of living) and the **Assets Disclosure Statement** as guidelines for the financial requirements we have for admittance.

(Note: Please submit a complete copy of last year's tax return with this application. If you are married but filed separately, you must submit both tax returns.)

Student Name: _____

Parent/ Guardian Completing this Form: _____

Please answer all of the following questions:

Current Employer and Annual Salary _____ \$ _____

Number living in Household including yourself: _____

Current amount of cash, savings, checking NOW accounts and certificates of deposit (do not include tax-deferred retirement accounts such as an IRA) _____

Current market value of stocks, bonds, mutual funds, money market accounts (do not include tax-deferred retirement accounts) _____

If you own your own home:
How much did it cost? _____

What year was it purchased? _____

What is its fair value today? (Give best estimate.) _____

How much do you still owe on it? _____

If you own other real estate:
What is its fair value today? _____

How much do you still owe on it? _____

Student savings _____

Is the student already a DC Opportunity Scholar? YES _____ NO _____

What vehicles are owned by members of your household?

Model _____ Year _____ Owned outright _____ **OR** Amount still owed _____

Model _____ Year _____ Owned outright _____ **OR** Amount still owed _____

SPECIAL CIRCUMSTANCES

Below, please provide a brief description of any significant changes in income, expenses or financial condition expected during this coming school year, or other information (such as Funds in restricted trust) you would like considered when eligibility is being determined. If there any special circumstances which affect your financial situation in a significant way, please provide that information below.

I certify that the information on this form is complete and accurate to the best of my knowledge. I will inform the school of any changes to my contact information or major changes to my financial situation during the application process.

Parent/Guardian signature _____ Date _____

CHECKLIST OF REQUIREMENTS FOR APPLICATION TO WASHINGTON JESUIT

ACADEMY: (Please check that you have completed each of the following)

- € Grade school transcripts (permission for forward school records included)
- € Recommendations from previous school principal or teacher. (Other recommendations may be requested by WJA)
- € Copy of last year's tax return
- € Fully completed application
- € Completed Assets Disclosure and Financial Statement
- € Selected date for participation in Saturday Morning Admissions Session (see below)

SATURDAY ADMISSIONS PROGRAM

Each student applying to Washington Jesuit Academy is required to participate in one (1) Saturday Morning Admissions Session (9am-12pm). This half- day is designed to allow the student to see the school and give WJA the opportunity to administer a short standardized test, have each student write a brief essay on why they would like to attend WJA, participate in a classroom lesson and conduct a group interview. Parents are required to come during the first hour (9am-10am) to learn about parent expectations at WJA. We ask that you arrive before 9am so that the session can begin promptly. Please check the Saturday date below that you and your son will attend.

- _____ Saturday, January 21st (9am-12pm)
- _____ Saturday, March 24th (9am-12pm)
- _____ Saturday, February 11th (9am-12pm)
- _____ Saturday, April 14th (9am-12pm)
- _____ Saturday, April 28th (9am-12pm)

Applications will be accepted beginning in November 2011. Admission to Washington Jesuit Academy is on a "rolling" basis, so we encourage you to submit an application as early as possible. After a student has completed the Saturday Admissions Program and the full application has been submitted, the application will be reviewed by the Headmaster and Admissions Committee and a

decision will be made. All students accepted to WJA will be required to attend our Summer Program which starts on June 6, 2012. Some students will be accepted conditionally and performance in our summer program will determine if they attend WJA for our full program in late August. We also will maintain a waiting list of potential candidates for 5th, 6th and 7th grade should space become available.

Completed application materials can be submitted by mail, email, fax or in person to:

Admissions
Washington Jesuit Academy
900 Varnum St. NE
Washington, D.C. 20017
Fax: 202-832-8098
Email: mwashington@wjacademy.org

The Washington Jesuit Academy is a Roman Catholic, private, independent middle school for young men sponsored by the Society of Jesus, a Roman Catholic order, and governed by an independent Board of Trustees. The Washington Jesuit Academy does not discriminate on the basis of race, color, national or ethnic origin in the administration of educational programs, admissions policies, hiring policies, financial aid programs, athletic or other school-administered programs, nor does it discriminate on the basis of sex in its hiring practices.

It is my understanding that the Washington Jesuit Academy is an academically challenging school with an **extended-day schedule** (7:30am to 7:15pm for 6th-8th grade, 7:30am – 5:30pm for 5th grade) and an **extended school year** (all students **must** participate in our Summer Program in June and July), with a **rigorous code of conduct** and that full participation of parents or guardians is necessary in order for students to be successful in this program.

Parent/Guardian Signature _____

Date _____

Please call Washington Jesuit Academy Admissions Office with any questions at 202-832-7679 or email Marcus Washington at mwashington@wjacademy.org



Washington Jesuit Academy
900 Varnum Street, NE
Washington, DC 20017
202-832-7679
202-832-8098 Fax
www.wjacademy.org

PERMISSION TO FORWARD ELEMENTARY SCHOOL RECORDS

I give permission for copies of my son's grades, standardized test scores and the results of any testing to be sent to the Washington Jesuit Academy.

Washington Jesuit Academy
900 Varnum St. N.E.
Washington, D.C. 20017

Please sign this form **and take it to your son's present school** and have them forward his academic records to us at the address above.

Student Name _____ Grade _____

Parent's (Guardian's) Signature _____ Date _____



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STUDENT RECOMMENDATION FORM

Please Print Clearly

Character Reference for: _____ Date: _____

Evaluator's Name (print name): _____ Relation to Student: _____

Please check one in each category:

Motivation	Responsibility	Emotional Stability	
<input type="checkbox"/> Internally motivated to excel	<input type="checkbox"/> Assumes responsibility	<input type="checkbox"/> Exceptionally stable	
<input type="checkbox"/> Prepares assigned work regularly	<input type="checkbox"/> Conscientious	<input type="checkbox"/> Usually well-balanced	
<input type="checkbox"/> Needs occasional prodding	<input type="checkbox"/> Usually dependable	<input type="checkbox"/> Unresponsive	
<input type="checkbox"/> Seldom works even under pressure	<input type="checkbox"/> Unreliable	<input type="checkbox"/> Apathetic	
General Behavior	Potential Academic Performance	Academic Grouping (if any)	Parental Involvement
<input type="checkbox"/> Excellent	<input type="checkbox"/> Recommend highly	<input type="checkbox"/> High	<input type="checkbox"/> Very Involved
<input type="checkbox"/> Above average	<input type="checkbox"/> Recommend	<input type="checkbox"/> Average	<input type="checkbox"/> Supportive
<input type="checkbox"/> Average	<input type="checkbox"/> Recommend with reservations	<input type="checkbox"/> Low	<input type="checkbox"/> Minimal
<input type="checkbox"/> Below average	<input type="checkbox"/> Do not recommend	<input type="checkbox"/> Other (specify): _____	<input type="checkbox"/> Absent
<input type="checkbox"/> Poor			

Please use the space below to comment on the following question:

What potential do you see in this student?

The purpose of this form is to request a general assessment of the student, which will become part of his application to Washington Jesuit Academy. The contents of this assessment are confidential and not shared with applicants and their families.

Signature of Evaluator: _____ Email: _____

€ Please contact me regarding this student.