



# SOLICITUD DE INGRESO A PROGRAMAS VANGUARD EN LAS ESCUELAS DEL VECINDARIO

## Jardín de Niños a duodécimo grado

### 2016-2017

Todos los documentos de la siguiente lista deben ser entregados con esta solicitud de ingreso en la escuela de su vecindario. *Por favor marque las casillas correspondientes a los documentos que acompañan la solicitud. Es responsabilidad de los padres presentar todos los datos al entregar la solicitud.*

**Alumnos que NO HAN SIDO IDENTIFICADOS como superdotados y talentosos (G/T) en HISD**

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Solicitantes del 1 <sup>ro</sup> al 12 <sup>vo</sup> grado: Boleta de calificaciones final del año anterior, mayo/junio, 2015<br><input type="checkbox"/> Solicitantes del Jardín de Niños: Boleta de calificaciones final del semestre en enero, 2016<br><input type="checkbox"/> Si están disponible los resultados de las pruebas normativas nacionales de rendimiento (Iowa/Logramos o Stanford/Aprenda) (de los últimos 12 meses) | <input type="checkbox"/> Si está disponible el resultado de la prueba de habilidad no verbal (CogAT 7) (de los últimos 12 meses)<br><input type="checkbox"/> Se aceptará solo una recomendación de maestro por solicitud. La primera recomendación recibida será la que se utilice, y las recomendaciones preparadas usando el formulario electrónico tienen preferencia. *Para todos los alumnos de HISD que actualmente asisten al Jardín de Niños y a 5 <sup>o</sup> grado los maestros de su clase completarán el formulario electrónico. | <input type="checkbox"/> Solicitud de ingreso completa y firmada por uno de los padres<br><br><p style="text-align: center;"><b>Toda evaluación necesaria será programada por el coordinador de Vanguard.</b></p> |
|---|---|---|

Número de identificación de HISD: \_\_\_\_\_ Grado para el que presenta la solicitud: \_\_\_\_\_

1. Nombre del alumno: \_\_\_\_\_  
*Apellido* *Primer nombre* *Inicial del segundo nombre*

2. Fecha de nacimiento Mes: \_\_\_\_\_ Día: \_\_\_\_\_ Año: \_\_\_\_\_ Sexo:  Masculino  Femenino

3. Escuela de HISD que le corresponde al alumno según su domicilio: \_\_\_\_\_

4. Escuela a la que asiste en la actualidad: \_\_\_\_\_ Grado actual: \_\_\_\_\_

5. Domicilio actual de los padres o tutores legales:

\_\_\_\_\_

*Calle    Número de apartamento    Ciudad    Estado    Código Postal*

6. ¿Trabaja uno de los padres o tutores legales para HISD?  No  Sí. Número de identificación \_\_\_\_\_  
 Si la respuesta es sí ¿viven ustedes en la zona de asistencia de HISD?  Sí.  No.

7. ¿Con quién vive el niño como residente permanente?  Ambos padres  Madre  Padre  Otra persona \_\_\_\_\_

8. Nombre del padre: \_\_\_\_\_ Celular del padre: \_\_\_\_\_

Teléfono de trabajo (padre): \_\_\_\_\_ Teléfono de casa (padre): \_\_\_\_\_

9. Nombre de la madre: \_\_\_\_\_ Celular de la madre: \_\_\_\_\_

Teléfono de trabajo (madre): \_\_\_\_\_ Teléfono de casa (madre): \_\_\_\_\_

10. Dirección de correo electrónico (e-mail): \_\_\_\_\_

11. ¿En qué idioma recibe el niño instrucción en la escuela? \_\_\_\_\_

12. Si el niño recibe algún servicio de educación especial de una escuela de HISD o de cualquier otra institución educativa, sírvase informar al coordinador Vanguard. Marque todo lo que corresponda y entregue la documentación del Distrito:

- Educación Especial-Evaluación Individual Completa (FIE)     Sección 504- Plan de acomodación 504  
 Educación Bilingüe (LEP)/ESL en caso de no estar inscrito en alguna escuela de HISD, complete la encuesta de idioma en casa (HLS)

**Se requiere que los padres entreguen documentación de los servicios especiales que el alumno recibe junto con esta solicitud para el programa Vanguard de las Escuelas del Vecindario.**

<p><b>Etnia del alumno (elijá una)</b></p> <p><input type="checkbox"/> Hispano/Latino  <input type="checkbox"/> No Hispano/Latino</p> <hr/> <p><b>Raza del alumno (elijá todas las que correspondan)</b></p> <p><input type="checkbox"/> Amerindio o Nativo de Alaska  <input type="checkbox"/> Nativo de Hawai/Otro Isleño del Pacífico  <input type="checkbox"/> Asiático  <input type="checkbox"/> Blanco  <input type="checkbox"/> Afroamericano</p>	<p style="text-align: center;"><b>CUADRO DE INGRESOS 2015-2016</b></p> <p>Si sus ingresos anuales, mensuales o semanales son <b>iguales o inferiores</b> a uno de los niveles de las siguientes listas, y el número de personas de su familia es el mismo que el número de personas que figura en la hilera de sus ingresos, marque la casilla:</p> <table border="0" style="width: 100%; text-align: center;"> <thead> <tr> <th style="text-align: left;"><i>Número de personas</i></th> <th><i>Anual</i></th> <th><i>Mensual</i></th> <th><i>Semanal</i></th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/> 2</td> <td>\$29,471</td> <td>\$2,456</td> <td>\$567</td> </tr> <tr> <td><input type="checkbox"/> 3</td> <td>\$37,167</td> <td>\$3,098</td> <td>\$715</td> </tr> <tr> <td><input type="checkbox"/> 4</td> <td>\$44,863</td> <td>\$3,739</td> <td>\$863</td> </tr> <tr> <td><input type="checkbox"/> 5</td> <td>\$52,559</td> <td>\$4,380</td> <td>\$1,011</td> </tr> <tr> <td><input type="checkbox"/> 6</td> <td>\$60,255</td> <td>\$5,022</td> <td>\$1,159</td> </tr> <tr> <td><input type="checkbox"/> 7</td> <td>\$67,951</td> <td>\$5,663</td> <td>\$1,307</td> </tr> <tr> <td><input type="checkbox"/> 8</td> <td>\$75,647</td> <td>\$6,304</td> <td>\$1,455</td> </tr> <tr> <td colspan="4">Por cada miembro de familia adicional sume:</td> </tr> <tr> <td></td> <td>+\$7,696</td> <td>+\$642</td> <td>+\$148</td> </tr> </tbody> </table>	<i>Número de personas</i>	<i>Anual</i>	<i>Mensual</i>	<i>Semanal</i>	<input type="checkbox"/> 2	\$29,471	\$2,456	\$567	<input type="checkbox"/> 3	\$37,167	\$3,098	\$715	<input type="checkbox"/> 4	\$44,863	\$3,739	\$863	<input type="checkbox"/> 5	\$52,559	\$4,380	\$1,011	<input type="checkbox"/> 6	\$60,255	\$5,022	\$1,159	<input type="checkbox"/> 7	\$67,951	\$5,663	\$1,307	<input type="checkbox"/> 8	\$75,647	\$6,304	\$1,455	Por cada miembro de familia adicional sume:					+\$7,696	+\$642	+\$148
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Nombre de uno de los padres (en letra de imprenta por favor): \_\_\_\_\_

Firma de uno de los padres: \_\_\_\_\_ Fecha: \_\_\_\_\_

**2016-2017 HISD Vanguard Programs  
TEACHER RECOMMENDATION FORM**

**Student Name:** \_\_\_\_\_ **Current Grade Level:** \_\_\_\_\_

For students currently in Kindergarten and 5<sup>th</sup> grade, this form will be completed online by the classroom teacher with collaboration from all teachers who instruct this student. For students in all other grades, this form should be completed by the current teacher, or teacher from the previous school year only. **Submit only one teacher recommendation form with your application. This form must be returned in a sealed envelope signed by the teacher across the seal.**

**Evidence of Possible Giftedness: Please circle the word that best indicates the degree to which the student exhibits the following characteristics in relation to students of similar age, experience, or environment.**

**A. General Intellectual Ability**

	Rarely	Less than half the time	About half the time	More than half the time	Consistently most of the time
1. Shows a preference for complex tasks and "why" of things	Rarely	Less than half the time	About half the time	More than half the time	Consistently most of the time
2. Has knowledge and vocabulary unusual for age or grade; has fluent verbal ability	Rarely	Less than half the time	About half the time	More than half the time	Consistently most of the time
3. Demonstrates abstract and critical thinking ability, an ability to think things out, to think things logically or analytically	Rarely	Less than half the time	About half the time	More than half the time	Consistently most of the time
4. Is a keen and alert observer; often "sees more" in a learning situation than others; may show evidence of long, detailed memory	Rarely	Less than half the time	About half the time	More than half the time	Consistently most of the time
5. Shows an interest in problem solving and is flexible and resourceful in problem solving	Rarely	Less than half the time	About half the time	More than half the time	Consistently most of the time
6. Has a quick grasp of concepts and underlying principles and can see relationships between ideas, events, people and things; may ask provocative questions	Rarely	Less than half the time	About half the time	More than half the time	Consistently most of the time

**B. Creative Ability**

1. Is curious and asks many questions	Rarely	Less than half the time	About half the time	More than half the time	Consistently most of the time
2. Produces work which is fresh, vital, and unique; creates new ideas, products, and processes; does the unexpected	Rarely	Less than half the time	About half the time	More than half the time	Consistently most of the time
3. Exhibits playfulness and a keen sense of humor; may make jokes, puns, etc. at times	Rarely	Less than half the time	About half the time	More than half the time	Consistently most of the time
4. Shows unusual capacity for concentration, imagination, and originality on tasks that interest him or her	Rarely	Less than half the time	About half the time	More than half the time	Consistently most of the time
5. Bored quickly with routine tasks, memorization of facts and details; prefers talking about ideas and problems	Rarely	Less than half the time	About half the time	More than half the time	Consistently most of the time
6. Exhibits emotional sensitivity, expressing intense feelings	Rarely	Less than half the time	About half the time	More than half the time	Consistently most of the time
7. Enjoys variety and novelty in learning experiences	Rarely	Less than half the time	About half the time	More than half the time	Consistently most of the time

**C. Leadership Ability**

1. Is self confident with peers and adults	Rarely	Less than half the time	About half the time	More than half the time	Consistently most of the time
2. Demonstrates a willingness for and skills in decision making	Rarely	Less than half the time	About half the time	More than half the time	Consistently most of the time
3. Is willing to take risks; tends to think independently	Rarely	Less than half the time	About half the time	More than half the time	Consistently most of the time
4. Exhibits organizational skills with tasks, peers, time, and/or materials	Rarely	Less than half the time	About half the time	More than half the time	Consistently most of the time
5. Carries responsibility well, works well in situations that require initiative and independence	Rarely	Less than half the time	About half the time	More than half the time	Consistently most of the time
6. Shows empathy and tolerance toward others; generally relates well with others	Rarely	Less than half the time	About half the time	More than half the time	Consistently most of the time
7. Can express self well; has good verbal skills and is usually well understood	Rarely	Less than half the time	About half the time	More than half the time	Consistently most of the time

Student's Name: \_\_\_\_\_ School: \_\_\_\_\_

Current Grade Level: \_\_\_\_\_ Subject Area of Instruction: \_\_\_\_\_ Date: \_\_\_\_\_

Teacher's Name (please print): \_\_\_\_\_ Teacher's Signature: \_\_\_\_\_

**Teachers: Please return completed form to parent/applicant in sealed envelope with signature across seal.**