



Access Better Learning & Education
November 2021

APPLICATION FOR ADMISSION

Dear Applicant:

Thank you for your interest in Access Better Learning & Education (“ABLE”)! Enclosed you will find an application as well as some valuable information about this program. Please read the following carefully before submitting your application.

PROGRAM

Access Better Learning & Education offers high school students in the Boston area the opportunity to attend a private school by providing financial sponsorship in addition to quality mentorship. Financial support for ABLE comes from both our member-volunteers (young professionals in Boston) as well as our corporate partners. ABLE mentors are all young professionals in Boston who offer scholars encouragement, guidance, and advice throughout the student’s four-year mission to earn his or her diploma. Students and parents also commit to complying with the “ABLE Pledge,” the details of which will be provided during the interview process.

The program’s success is attributed to the combination of a caring school community, a challenging and engaging education, financial support for our scholars, and involved and supportive mentors to help students realize their full academic potential. Students continue to experience personal growth as they reach new academic heights – amazing their teachers, their parents, their mentors, and often themselves.

LIST OF ABLE PARTNER SCHOOLS

All Boys	Co-Ed
BC High	St. Joseph Prep
Catholic Memorial	Boston Trinity Academy (BTA)
	Matignon
	Cathedral High

List is subject to change



ABLE REQUIREMENTS

Access Better Learning & Education seeks applicants entering 9th grade in the Fall of 2022 who demonstrate financial need and who are seeking to attend a tuition-based high school.

Additionally, please note the following:

- Students and their families who are accepted into the program are **expected to pay a minimum of \$1,000** towards school tuition each year (may vary based on school and applicant financial need), **in addition to other expenses such as books and fees** (please see expected expenses for each high school below). Please keep in mind, that “Other Expenses” listed below do not include **lunch or transportation**, which students and families will also be responsible for.
- Students and parents must also agree to the “ABLE Pledge.” ABLE will explain the details of the pledge in the interview process. The pledge embodies the spirit of ABLE and students are expected to perform to the best of their abilities, both in school and in establishing a relationship with their mentors. Similarly, parents pledge to meet their financial obligation and help support both study time and mentor involvement.

Expected Annual Family Contribution By School

School	Tuition	Other Expenses
BC High	\$1,000	\$850
Catholic Memorial High School	\$1,000	\$850
Saint Joseph Prep	\$1,000	\$850
BTA	\$1,000	\$850
Matignon	\$1,000	\$850
Cathedral High	\$1,000	\$850

These are estimates based on previous experience and may change. Other expenses include books, uniforms, calculators, laptops, registration fees, activity fees, etc.

*Other expenses **DO NOT include lunch or transportation**, which are additional expenses that families are expected to cover.*



APPLICATION PROCESS

Filling out the attached application DOES NOT GUARANTEE ACCEPTANCE into Access Better Learning & Education (ABLE) or any of its partner high schools. You must also apply to and be accepted by the high school in addition to being accepted by ABLE to receive ABLE funding.

The attached document contains three pieces of the broader application:

Part 1: Student Information & Essays

Part 2: Student & Parent Consent

Part 3: Middle School Recommendation

Parts 4 – 7 are separate from the enclosed application but should be included as one package (reference checklist on next page for complete set of materials required).

ABLE will be in touch with middle schools regarding high school acceptance and/or rejection letters, as well as letters indicating scholarships earned by the student.

ABLE REGISTRATION POLICY

Though applicants are given the opportunity to list their school preference, not every student accepted to ABLE is admitted to the Partner School of their first choice.

If a student has been admitted to a Partner School, but has not yet heard whether they are accepted to ABLE, this student should not register (enroll) with the Partner School unless they are prepared to pay the full tuition indicated by the School. Please note that most high school registration fees are non-refundable.

APPLICATION DEADLINE

Complete application is due Friday, December 10, 2021. Applications received after the 10th will not be considered. Those students who are invited to interview with ABLE will be notified mid-to-late December, with interviews held on a weekend in early January, and final admissions decisions announced on a rolling basis between late-January and March 2022.

SUBMITTING THE APPLICATION

Please scan and email completed applications to ablebostonxc@gmail.com. Please reach out to Madison DeRose (mderose@adventinternational.com) with any questions or concerns.

Hand delivered, mailed, or incomplete applications will not be considered. No parts of this application will be returned, regardless of the status. Do not send original documents; please send photocopies instead. Applicants should keep a photocopy of the complete application for record-keeping purposes.



APPLICATION CHECKLIST

Please submit this checklist along with the application. Completed applications include **all** of the following:

Part	Item	Completed by	Note	Check if Included
1	Student Information and Essays	Student	Included in this application (pgs. 5-8)	
2	Student & Parent Consent	Student / Family	Included in this application (pg. 9)	
3	Middle School Recommendation	Middle School Placement Coordinator / Guidance Counselor	Included in this application (pgs. 10-13)	
4	FACTS Submission	Student / Family	Online financial aid application (pg. 14)	
5	Teacher Recommendation	Teacher	Same recommendation submitted as part of high school application	
6	Report Cards (6th – 8th grade)	School		
7	Standardized Test Scores (e.g. MCAS)	School		

Submitted by: _____

Date: _____



PART 1: Student Information & Essays

A. Student Information

Student's Full Name _____

Gender: _____ Date of Birth _____ (MM/DD/YYYY)

Address _____ Apartment # _____ City _____ Zip _____

Last Name on Mailbox (if different than your own last name) _____

Home Phone (____) _____ Cell Phone (____) _____ Email _____ @ _____

If you do not have a phone, write the name & phone number of someone who can easily contact you.

B. Family Information

Full name(s) of parent(s)/guardian(s) _____

Relationship to candidate: _____

Cell Phone: (____) _____ E-mail: _____ @ _____

Occupation: _____ Employer: _____

Full name(s) of parent(s)/guardian(s) _____

Relationship to candidate: _____

Cell Phone: (____) _____ E-mail: _____ @ _____

Occupation: _____ Employer: _____

Full name(s) and age(s) of sibling(s) _____

Please tell us what language (other than English) you speak at home. _____



C. School Information

From the list of ABLE Partner Schools on the first page of instructions, please rank the high schools that you would like to attend, **in order of preference**. Only list the high schools that you would like to attend and plan on applying to (do not need to list six); you will only be eligible to receive ABLE funding for schools that you list below. Please *only list schools that are shown on the first page of the instructions*. *NOTE: ABLE cannot always place students at their top choice.*

First Choice: _____

Second Choice: _____

Third Choice: _____

Fourth Choice: _____

Fifth Choice: _____

Sixth Choice: _____

Have you attended any partner school events? (please list if so): _____

Name of school you are currently attending: _____

Have you ever repeated a grade(s)? (Yes or No) _____

If yes, which grade(s): _____

Have you ever been dismissed from a school you were attending? (Yes or No) _____ If yes, why?

If not accepted to ABLE and cannot find another source of funding, I will (circle one of the following):

- a. attend an application-based public school
- b. attend my local public high school



How did you hear about ABLE (circle the one that best applies)?

- a. My current school
- b. An organization in my community such as a church (organization name)_____
- c. A relative who was/is an ABLE student (name)_____
- d. An ABLE Mentor (name)_____
- e. A high school open house (school name)_____
- f. My social worker
- g. Word of mouth
- h. ABLE's website

Other _____



D. Short Essays

Each short essay has a recommended word count. This is meant to serve only as a guide, not a strict minimum or maximum on the number of words. Please type up the essays and submit as an attachment.

1. Please provide brief background on yourself. Include information about your family history and the community in which you live. **(250 words)**

2. Describe three goals you want to accomplish by the time you graduate from high school (in the next four years). **(250 words)**

3. What are your hobbies? What do you like to do in your free time? Do you participate in any youth organizations (community centers, sports leagues, etc.)? If so, which ones? **(100 words)**

4. Describe one thing you like and one thing you dislike about the school you currently attend (not including lunch and gym). **(100 words)**

5. Why do you want to become a member of ABLE? What do you hope to learn from a potential ABLE mentor? Do you currently have a mentor as part of another program? **(250 words)**



PART 2: Student & Parent Consent

A. Student Consent

By signing below, I declare that the information provided in this Student Application is true, correct, and complete to the best of my knowledge and that the essays are written by me. I understand that if accepted to ABLE, it may be more difficult academically and stricter in terms of discipline than the school I now attend. I am committed to the challenge and will work to the best of my ability every day. I also understand that I will be paired with a mentor who will act as an additional system of support throughout my high school career.

SIGNATURE OF STUDENT _____ DATE _____

B. Parental Consent

By signing below, I understand that if my child is accepted to this program, s/he is expected to remain enrolled in her/his particular school until s/he graduates, unless asked to leave for academic or disciplinary reasons. I will fully support my son or daughter's participation in all aspects of the ABLE program and his or her school, should s/he be accepted. If accepted, I understand that my son/daughter will be required to be responsive to his/her mentor and to contact the mentor regularly. If my child is accepted into and participates in ABLE, I hereby agree that any information pertaining to the educational and personal well-being of my child may be provided to ABLE and my child's mentor by the high school. This includes report cards, progress reports, deficiency notices and other relevant information. If my child is accepted into ABLE, I agree to forward to ABLE a photocopy of his or her final 8th grade transcript at the conclusion of this academic year. I understand that ABLE will continue to track my child's progress after high school. Lastly, I grant ABLE permission to publish my child's first name and/or photograph in any medium whatsoever that is in direct association with ABLE including, but not limited to, the ABLE website, Annual Newsletter, brochures, and other marketing materials.

SIGNATURE OF PARENT _____ DATE _____



PART 3: Middle School Recommendation

This section to be completed by the middle school placement coordinator / guidance counselor (please print or complete as a typed document):

Name _____

School _____

Role _____

How long have you known the applicant? _____

How well do you know the applicant on a personal level? (circle one) Fairly Well Well Very Well

Rate the applicant's academic performance in relation to that of other students in your school. Please elaborate in detail below.

Below Average Average Above Average Exceptional Not Able to Comment



Please rate this applicant's behavior in school and among peers, elaborating below. Please note if the student has been dismissed, suspended, or expelled from school, and elaborate if so.

Behavior is Very Poor

Behavior is Average

Behavior is Better Than Most

Behavior is Exceptional

Not Able to Comment

Briefly describe the applicant's strengths and weaknesses (both scholastic and those of character).

Rate how this student's attendance compares with other students in your school. Please elaborate below.

Attendance is Very Poor

Attendance is Poor

Attendance is Average

Attendance is Better Than Most

Attendance is Exceptional



Rate your perception of the applicant's willingness to meet with a mentor, and please elaborate below:

Very Receptive Somewhat Receptive Ambivalent Not Receptive

To your knowledge, is the applicant part of other programs that provide mentors (eg, Stepping Stone, Mass Mentors, etc.?) Yes / No (Please circle one). If yes, please specify which program.

Rate the applicant's family's involvement in his/her education. Please elaborate below.

Not
Involved

Involved

Highly
Involved

Exceptionally
Involved

Not Able to
Comment



Does your school offer free lunch for financially needy students? Yes / No (Please circle one).

If yes, does the applicant qualify? Yes / No (Please circle one).

RECOMMENDER SIGNATURE _____

DATE _____



PART 4: FACTS Submission

Instructions for Student / Family

1. Please apply for financial aid online at online.factsmtg.com/aid
2. During this process, include all the schools that you are applying to and **also select the Catholic Schools Foundation of Boston**. Making this selection will ensure that we can review your application.

Note also that the wording of the selection is different than prior years.

FACTS example including Catholic Schools Foundation of Boston:

Organizations

Catholic Schools Foundation of Boston (required) ?