

**Neptune High School**  
**Option II Programming**  
**Application for Experiential Learning for**  
***JumpStart* Education Academy**  
**School Year 2018-2019**  
**DUE BEFORE APRIL 27, 2018**

**Student Name:** \_\_\_\_\_

**Current Grade:** \_\_\_\_\_

**Current Homeroom:** \_\_\_\_\_

**PERSONAL INFORMATION**

**ADDRESS:** \_\_\_\_\_

**DATE OF BIRTH:** \_\_\_\_\_

**Student EMAIL:** \_\_\_\_\_

**PARENT/GUARDIAN NAME:** \_\_\_\_\_

**Parent EMAIL:** \_\_\_\_\_

**PHONE #1:** \_\_\_\_\_ **PHONE#2:** \_\_\_\_\_

**EMERGENCY CONTACT NAME:** \_\_\_\_\_

**PHONE:** \_\_\_\_\_

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1. What are your career goals?

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2. List your favorite subject(s) in school

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3. List your interests/activities outside of school. Would these activities interfere with your participation in the Jump Start Academy?

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4. List any experiences (paid or volunteer) you have had in the field of education.

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**ESSAY**

On a separate piece of paper, please write a composition of approximately 250-300 words answering the following 2 questions:

1. Why are you applying for the JumpStart Education Academy and how does it fit in with your overall career objective?
2. What are your expectations of the JumpStart Education Academy?

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**Student/Family Commitment**

I understand that if accepted to this *JumpStart* Education Academy, I will be expected to meet all expectations of the specific Experiential Learning activities assigned. I understand this includes maintaining a digital portfolio of my activities, participating in a various scheduled activities, and completing required independent work. Upon successful completion I understand I will receive an academic numerical grade, and 2.5 credits. If I do not successfully complete this Experiential Learning experience, I will receive no credit or grade.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Approvals**

*JumpStart* Academy Coordinator Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Option II Review Committee

Approved

Denied