

# The Davidson Academy of Nevada Application 2010-2011 School Year

The Davidson Academy of Nevada strongly recommends that you keep a copy of this application and attached materials for your records, as all applications and supporting documents become the property of the Academy and will not be returned. All applications are confidential and are used only for the purpose of identifying and supporting qualified students. The Davidson Academy of Nevada does not discriminate based on race, color, gender, national origin, religion or disability in administration of its admissions policies or access to its educational programs and activities.

## Section 1: General Information (Please type or print legibly in ink.)

### Student Information

First Name \_\_\_\_\_ MI \_\_\_\_\_ Last Name \_\_\_\_\_

Gender:  Female  Male Age \_\_\_\_\_ Date of Birth \_\_\_\_\_ Is student under the age of 18?  Yes  No

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Student's email \_\_\_\_\_ (If same as parent/guardian, leave blank.)

### Parent/Guardian Information

Relation to Applicant \_\_\_\_\_ Custodial Parent/Guardian:  Yes  No  
(Ms. Mrs. Mr. Dr.) First Name \_\_\_\_\_ MI \_\_\_\_\_ Last Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell \_\_\_\_\_

Email \_\_\_\_\_

Relation to Applicant \_\_\_\_\_ Custodial Parent/Guardian:  Yes  No  
(Ms. Mrs. Mr. Dr.) First Name \_\_\_\_\_ MI \_\_\_\_\_ Last Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email \_\_\_\_\_

Marital Status of Student's Parents: \_\_\_\_\_

Which languages are spoken in the home and by whom: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## Section 2: Parent/Guardian & Student Perspectives

Attach additional pages as needed with the student's last name and first initial, at the top of the page in the upper right corner along with page numbers in the form of page x of y. Label responses with application section number, heading and question number.

### Parent/Guardian Perspective *(To be completed by the parent/guardian)*

1. Describe what you, as a parent, are looking for in a school. Include information about the kinds of courses, classroom experiences, and the overall education plan you would most like to see for your student.
2. The Davidson Academy is a highly challenging environment. What in your child's academic and personal life leads you to consider him or her likely to respond well to the challenges the Academy presents? What gives you pause as to your child's academic and personal readiness for the Academy?

### Student Perspective *(To be completed by the student)*

1. Describe your personality. Include information about how you get along with others, how you feel about yourself, what you think is important in life, and how you think others tend to see you.
2. Describe your academic strengths and weaknesses. Include information about your work ethic and attitude toward school and learning in general. Include ideas you have about your future academic and/or career plans.
3. In your decision to apply for acceptance to the Academy, what are you seeking (order by importance; #1 being most important)?
 

_____ Social/Peer connections	_____ Academic challenge
_____ Extracurricular opportunities	_____ Non-traditional academic environment
_____ Other _____	
4. The Davidson Academy's Core Values are: Integrity, Responsibility, Pursuit of Knowledge, Respect, Leadership, and Balance. Select one of these values and discuss its relevance to you and your own beliefs.
5. In 250 words or less, explain the relationship of factors you think would be necessary to thrive in a rigorous, challenging environment. You may write this as a "recipe" or you may develop an equation/formula to illustrate this relationship. Here are some factors from which you can choose (you may add any variables of your own):  
 C = Curiosity    K = Knowledge    W = Work    IM = Imagination    H = Humor    T = Time    P = Play    CO = Collaboration

## Section 3: Schooling History

To help us better understand how we can assist you in meeting your child's academic needs, please complete all of the appropriate sections below that explain your child's schooling history. These entities will **NOT** be contacted by The Davidson Academy of Nevada without your permission.

- ▶ Each applicant must enclose a copy of a *recent* writing assignment that has revision advice written directly on one draft from a teacher, along with the corrected and graded final version of the paper.
- ▶ Student's current grade level is \_\_\_\_\_.

**School Records:** Please submit copies of the form on Page 9 for **EACH** school the applicant previously attended. Official school records must be sent directly to The Davidson Academy of Nevada, documenting ALL previous academic years. **If homeschooled, provide documentation regarding course of study for EACH academic year by typing this information on attached pages. Additional requirements for homeschool students can be found on Page 5.**

### Section 3: Schooling History *(continued)*

Education	School Environment(s) applicant has experienced <i>(circle all that apply)</i>
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Public School      Private School      Home School      Gifted/Magnet School      College/University  
 Preschool      Elementary      Middle/Junior High      High School      Other \_\_\_\_\_

**Please copy and complete this form, as needed, so each school the applicant has attended is recorded.**

Academic History	_____ to _____	_____ to _____
	<input type="checkbox"/> Public <input type="checkbox"/> Private <input type="checkbox"/> Other _____ <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time  Is this a school for gifted students? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Public <input type="checkbox"/> Private <input type="checkbox"/> Other _____ <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time  Is this a school for gifted students? <input type="checkbox"/> Yes <input type="checkbox"/> No
Has an IEP been developed for your child? If so, please submit a copy.	IEP? <input type="checkbox"/> Yes <input type="checkbox"/> No	IEP? <input type="checkbox"/> Yes <input type="checkbox"/> No
Has a Section 504 Plan been developed for your child? If so, please submit a copy.	Section 504 plan? <input type="checkbox"/> Yes <input type="checkbox"/> No	Section 504 plan? <input type="checkbox"/> Yes <input type="checkbox"/> No
School Name:		
School Address:		
School Phone & Fax:		
School Website:		
Child participated in Grade Level(s): <i>(if applicable)</i>		
Acceleration:	<input type="checkbox"/> None <input type="checkbox"/> Full <input type="checkbox"/> Partial	<input type="checkbox"/> None <input type="checkbox"/> Full <input type="checkbox"/> Partial
If partially accelerated, please indicate subject(s):		
If fully accelerated, please indicate total # of years:		

**Section 3: Schooling History (continued) – Other Opportunities**

Please copy and complete this form as needed so each opportunity the student has accessed is recorded.

<b>COLLEGE OR UNIVERSITY</b> <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <b>Is this an Early Entrance Program?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
Academic Year:
Name of College or University:
Web Address of College or University:
Contact Person (Dean of specific department, academic advisor, etc.):
Email Address of Contact Person:
Telephone Number of Contact Person:
Course(s) in which child/adolescent has been enrolled, number of credits earned and dates of enrollment:

<b>DISTANCE LEARNING</b> <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time
Academic Year(s) enrolled in program:
Name of Program:
Web Address of Program:
Contact Person (Dean of specific department, academic advisor, etc.):
Email Address of Contact Person:
Course(s) in which child/applicant enrolled, number of credits earned and dates of enrollment:

### Section 3: Schooling History (continued) - Homeschooled Candidates

<b>HOMESCHOOL</b> <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <b>Academic Year(s):</b> _____
Primary Instructor: _____
Additional Instructors/Tutors: _____

If your child/adolescent is of compulsory school age in your state and you have completed any intent to homeschool forms, please attach a copy of any forms you have filed.

For the same purposes that report cards and transcripts are requested from applicants enrolled in traditional school settings, please submit the following documentation for homeschool students. Please attach additional pages as needed to answer the following questions with the student's last name and first initial at the top of the page in the upper right corner along with page numbers in the form of page x of y. Also, please label the responses with the application section number and heading, and question number.

1. **Program Information** - What philosophy guides your homeschooling program? What outside programming (i.e. online course supplementation, community college classes) if any, are utilized in the administration of the home schooling program? If outside resources are used, please indicate your child's grades in these courses.
  
2. **Curriculum** - Please document the texts and resources that have been used during the last two years of the student's homeschooling experience and their grade levels, plus describe how they were used (e.g. pace, frequency of use, required assignments, independent reading, tests, projects, etc.). Provide syllabi, if available.

Subject	Curriculum – A year ago	Curriculum – This year
Mathematics		
Science		
Reading/ Language Arts		
Writing		
History/ Social Studies		
Music		
Art		
Other		

3. **Teaching** - Please briefly give the educational background of the primary instructor responsible for home schooling the student.
  
4. **Student Skill Level** - Please submit one recent English paper with revision advice given by the adult responsible for teaching English and one recent math assignment or test.

### Section 4: Test Score Criteria

► In addition to one or more reports containing qualifying test scores, applicants are required to submit copies of full reports for all individual or group administered intelligence or achievement tests, including but not limited to previous versions of IQ tests listed and any other tests of cognitive abilities.

Detection of omitted or falsified information may result in terminating the application review process or revoking acceptance and/or enrollment. **Additional achievement testing may be required.** Please see below for testing submission requirements. All testing must have been administered in the past two years.

Currently enrolled in 7 <sup>th</sup> grade or below or Homeschooled	Currently enrolled in 8 <sup>th</sup> grade or above
<p><b>One of the following:</b> SAT I, ACT, Explore, SB -5, WISC IV or DAS <b>AND</b> <b>One of the following:</b> KTEA-II, WIAT-II, WJ-III</p>	<p><b>One of the following:</b> SAT I, ACT, Explore, SB -5, WISC IV or DAS</p>

#### IQ Tests

A complete copy of all test score report(s) must be attached.

Test Name	Score Guidelines
Stanford-Binet V (SB-5)	Standard score of 145 or greater (99.9 <sup>th</sup> percentile) for Full Scale or Verbal or Non-Verbal
Wechsler Intelligence Test – IV (WISC IV)	Standard score of 145 or greater (99.9 <sup>th</sup> percentile) for Full Scale or Verbal or Perceptual Reasoning
Differential Abilities Scale (DAS)	Differential Ability Scales-II Standard Score 145+ (99.9 <sup>th</sup> percentile) General Conceptual Ability or Nonverbal Reasoning

#### Placement Tests

A complete copy of all test score report(s) must be attached.

Test Name	Score Guidelines (The Academy's College Board School Code Number is 290207.)																														
Scholastic Aptitude Test (SAT I)	<p>Qualified applicants must provide scores that meet or exceed the Verbal/Critical Reading OR Math OR Combined scores as indicated in the following table.</p> <table border="1"> <thead> <tr> <th>SAT I</th> <th>Grade 7</th> <th>Grade 8</th> <th>Grade 9</th> <th>Grade 10</th> </tr> </thead> <tbody> <tr> <td>Verbal/Critical Reading</td> <td>590</td> <td>630</td> <td>650</td> <td>700</td> </tr> <tr> <td>Math</td> <td>630</td> <td>680</td> <td>700</td> <td>720</td> </tr> <tr> <td>Combined</td> <td>1220</td> <td>1310</td> <td>1350</td> <td>1420</td> </tr> </tbody> </table> <p>Please note: The writing section of the SAT I will be considered as supplementary information.</p>	SAT I	Grade 7	Grade 8	Grade 9	Grade 10	Verbal/Critical Reading	590	630	650	700	Math	630	680	700	720	Combined	1220	1310	1350	1420										
SAT I	Grade 7	Grade 8	Grade 9	Grade 10																											
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ACT Assessment (ACT)	<p>Qualified applicants must provide score reports that indicate at least 3 of the 5 scores meet or exceed those listed in the following table.</p> <table border="1"> <thead> <tr> <th>ACT</th> <th>Grade 7</th> <th>Grade 8</th> <th>Grade 9</th> <th>Grade 10</th> </tr> </thead> <tbody> <tr> <td>English</td> <td>26</td> <td>28</td> <td>30</td> <td>32</td> </tr> <tr> <td>Math</td> <td>23</td> <td>27</td> <td>30</td> <td>33</td> </tr> <tr> <td>Reading</td> <td>28</td> <td>30</td> <td>32</td> <td>34</td> </tr> <tr> <td>Science Reasoning</td> <td>24</td> <td>26</td> <td>28</td> <td>30</td> </tr> <tr> <td>Composite</td> <td>24</td> <td>26</td> <td>28</td> <td>30</td> </tr> </tbody> </table>	ACT	Grade 7	Grade 8	Grade 9	Grade 10	English	26	28	30	32	Math	23	27	30	33	Reading	28	30	32	34	Science Reasoning	24	26	28	30	Composite	24	26	28	30
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Composite	24	26	28	30																											

### Section 4: Test Score Criteria (*continued*)

<b>Explore</b>	Qualified applicants must provide score reports that indicate at least 3 of the 5 scores meet or exceed those listed in the following table.				
	<b>EXPLORE</b>	<b>Grade 3</b>	<b>Grade 4</b>	<b>Grade 5</b>	<b>Grade 6</b>
	English	16	19	22	23
	Math	14	16	18	21
	Reading	16	18	19	23
	Science Reasoning	16	18	20	22
	Composite	15	17	20	22

#### Individually Administered Achievement Tests

Test Name	Score Guidelines
Kaufman Test of Educational Achievement ( <b>KTEA-II</b> )	Standard score of 150 or greater (99.9 <sup>th</sup> percentile) Reading, Math or Total Battery
Wechsler Individual Achievement Test ( <b>WIAT-II</b> )	Standard score of 145 or greater (99.9 <sup>th</sup> percentile) Total Reading, Total Mathematics, Total Language, Total Writing or Total Composite
Woodcock Johnson Test of Achievement ( <b>WJ-III</b> )	Standard score of 145 or greater (99.9 <sup>th</sup> percentile) Broad Reading, Broad Mathematics, Broad Written Language cluster(s) or Total Achievement

### Section 5: Recommendation Forms

**Applications will not be reviewed until all required Recommendation Forms are on file.** Family members may not serve as recommenders. A minimum of three recommendation forms is required using the various Recommendation Forms, which must be downloaded separately from the application. A Mathematics Teacher, English Teacher, and one other recommendation form are required, with a fourth recommender of your choice as optional. Recommenders must submit their forms directly to The Davidson Academy, and the admissions committee may contact any or all recommenders. Recommenders should be selected from the **last two years of the student's academic history**. Please select recommenders in the following order of priority:

- Mathematics Teacher Recommendation Form** – current, within last two years, math teacher
- English Teacher Recommendation Form** – current, within last two years, English teacher
- Teacher Recommendation Form** – current, within last two years, teacher in another subject area
- Personal Recommendation Form** – coach, mentor, music, drama or art instructor, supervisor, employer, scout leader, camp counselor, or any other adult who knows the applicant personally (not a family member).

**Homeschooled students:** If outside teachers in mathematics and/or English have taught the student during the past two years, please ask them to complete the *Mathematics Teacher Recommendation Form* and *English Teacher Recommendation Form*. If your student has not had outside teachers in these areas, but has had teachers or mentors in other subjects, ask them to complete the *Generic Teacher Recommendation Form*. If this is not possible, ask a coach, mentor, music, drama or art instructor, supervisor, employer, scout leader, camp counselor, or any other adult who knows your child personally (not a family member) to serve as a recommender using the *Personal Recommendation Form*. You may also use the *Mathematics or English Recommendation Form* with teachers from more than 2 years ago.

**Recommenders:** List the following information for each person asked to complete a recommendation form on behalf of your student.

Recommender #1 - Name \_\_\_\_\_ Email address \_\_\_\_\_ Phone \_\_\_\_\_

Recommender #2 - Name \_\_\_\_\_ Email address \_\_\_\_\_ Phone \_\_\_\_\_

Recommender #3 - Name \_\_\_\_\_ Email address \_\_\_\_\_ Phone \_\_\_\_\_

Recommender #4 (optional) - Name \_\_\_\_\_ Email address \_\_\_\_\_ Phone \_\_\_\_\_

*Please note, no more than four letters of recommendation will be reviewed for an individual applicant.*

### Section 6: Additional Required Details & Signatures

1. Has your child ever been disciplined (including, but not limited to, suspended or expelled) for any action or inaction that requires discipline under the laws or regulations of your state of residence?  
 Yes\*    No
2. Has your child ever exhibited harmful behaviors toward himself/herself or others, or threatened violence to himself/herself or others, of which The Davidson Academy should be aware in formulating an educational program?  
 Yes\*    No

\* If you answer yes to either of the two questions above, please explain the details of each event on separate, attached pages with the student's last name and first initial at the top of the page in the upper right hand corner along with page numbers in the form of page x of y. Clearly label the responses with the application section number, heading and question number.

3. Has your child previously applied to a Davidson Institute for Talent Development program?  
 Yes\*\*    No

\*\* If yes, please provide the program name and date of application: \_\_\_\_\_

4. How did you learn about The Davidson Academy of Nevada?

- Internet Search                       Davidson Institute for Talent Development ([www.DavidsonGifted.org](http://www.DavidsonGifted.org))
- Hoagies' Gifted Education Website    Teacher/Educator                       Friend/Relative
- Convention/ Conference \_\_\_\_\_                       News Media \_\_\_\_\_
- Other: \_\_\_\_\_

I/We attest that to the best of my/our knowledge, all of the information included in this application and any/all attachments is accurate and true. I/We attest that all prior test reports have been submitted, unaltered, in their entirety. I/We understand that detection of omitted or falsified information may result in terminating the application review process or revoking acceptance and/or enrollment.

Signature (Applicant) \_\_\_\_\_ Date \_\_\_\_\_

Signature (Custodial Parent/Guardian) \_\_\_\_\_ Date \_\_\_\_\_

Signature (Parent/Guardian) \_\_\_\_\_ Date \_\_\_\_\_



**School Records Request Form**

Please provide a copy of this School Records Request Form to each academic institution which the applicant previously attended.

**School records must be mailed directly to:**

The Davidson Academy of Nevada  
Attn: Admissions & Records Coordinator  
P.O. Box 9119  
Reno, Nevada 89507

**To be completed by the applicant:**

Full Name: \_\_\_\_\_  
*First Middle Last*

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Social Security No. \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Name of School/University: \_\_\_\_\_

Dates of Attendance: \_\_\_\_\_

Number of Copies of Transcript Requested: 1

I authorize release of the official transcript of my academic records at the school named above for submission to *The Davidson Academy of Nevada*.

\_\_\_\_\_  
*Signature of applicant Date Signed*

\_\_\_\_\_  
*Signature of applicant's parent or guardian Date Signed*

**To the holder of the Applicant's school records:**

This individual is applying for admission to The Davidson Academy of Nevada. We utilize a self-managed application process in which the applicant submits the application and his/her other documents as requested. The applicant is then responsible for requesting official transcripts of school records using this form as provided, and assuring the materials' arrival at The Davidson Academy of Nevada. Therefore, the transcripts should be sent directly from the applicant's previous schooling environment to The Davidson Academy of Nevada.

Please enclose this form with the applicant's official transcript and mail them to:

**The Davidson Academy of Nevada**  
**Attn: Admissions & Records Coordinator**  
**P.O. Box 9119**  
**Reno, Nevada 89507**

Questions? Email [applications@davidsonacademy.unr.edu](mailto:applications@ davidsonacademy.unr.edu)