

Young Writers Program



School Application 2008-2009

Please provide all information requested and type or print clearly.

School Information

SCHOOL NAME _____ PRINCIPAL _____

SCHOOL DISTRICT _____

SCHOOL ADDRESS: STREET _____ CITY _____ STATE _____ ZIP _____

CONTACT PERSON _____ TITLE _____

PHONE _____ E-MAIL _____

NAME OF TEACHER WHO WILL PARTICIPATE, AND GRADES HE/SHE TEACHES _____

CHARTER SCHOOL YES NO

IF YES, NAME OF PUBLIC SCHOOL DISTRICT IN WHICH THE SCHOOL IS LOCATED _____

GRADES SERVED _____

SCHOOL YEAR BEGINS _____ SCHOOL YEAR ENDS _____

SCHOOL INTERSESSIONS/CLOSURES _____

SEMESTER/SESSION YOU ARE MOST INTERESTED IN WORKING WITH YWP FALL SPRING SUMMER

ARE CLASSES SELF-CONTAINED: YES NO IF NO, LENGTH OF AN AVERAGE CLASS TIME IS: _____

DOES YOUR SCHOOL PARTICIPATE IN THE FREE/REDUCED LUNCH PROGRAM: YES NO

IF YES, WHAT PERCENT OF THE STUDENT BODY PARTICIPATES IN THE FREE/REDUCED LUNCH PROGRAM? _____

Student Enrollment

TOTAL _____ MALE _____ FEMALE _____

AFRICAN AMERICAN _____ ASIAN & PACIFIC ISLANDER _____ HISPANIC _____

WHITE (NON-HISPANIC) _____ NATIVE AMERICAN _____ OTHER _____

DOES YOUR SCHOOL OFFER ARTS-BASED PROGRAMS: YES NO

IF YES, PLEASE PROVIDE THE NAME AND A BRIEF DESCRIPTION OF THE PROGRAM(S):

WHAT AREA OF PROGRAMMING IS YOUR SCHOOL MOST INTERESTED? ARTIST RESIDENCY TEACHER TRAINING BOTH

PLEASE PROVIDE THE NAMES AND A DESCRIPTION OF ANY PROGRAMS FROM ARIZONA STATE UNIVERSITY THAT ARE CURRENTLY IN PLACE AT YOUR SCHOOL OR HAVE BEEN AT YOUR SCHOOL IN THE PAST FIVE (5) YEARS.

PROVIDE YOUR SCHOOL'S MOST RECENT ACHIEVEMENT PROFILE: I.E. EXCELLING, IMPROVING, MAINTAINING PERFORMANCE, UNDERPERFORMING, EXTREMELY SMALL SCHOOL.
