Dear Student,

On behalf of the Early College Programs staff, I want to express our appreciation for your interest in the Kansas Academy of Mathematics and Science (KAMS) at Fort Hays State University. You will find that we offer a challenging curriculum in a very unique learning environment. The experience and knowledge gained from completing our program clearly differentiates KAMS students from traditional high school graduates. Our students are the future leaders of Kansas and will play a critical role in the long-term economic prosperity of the state.

Currently, we are able to offer the KAMS experience to **40 students per class.** The admission process is selective and holistic. Grades and standardized test scores are certainly important in the admissions decision process, but we also consider the maturity of the applicant and their willingness to put forth the time and effort needed to be successful.

If you have questions about the program or the application process, please feel free to contact us at (785) 628-4690 or at kams@fhsu.edu. Please visit our website (www.fhsu.edu/kams) regularly for the most current information.

Again, thank you for your interest and we look forward to working with you on your journey to becoming a part of one of the most prestigious early college programs in the nation.

Sincerely,

Mr. Will Burns
Director, Early College Programs at Fort Hays State University
Kansas Academy of Mathematics & Science
600 Park St.
Hays, KS 67601
P: 785-628-4690
F: 785-629-4077
E: kams@fhsu.edu
**Admission Information**

**Academic Preparedness**
- Completion of Algebra II and Geometry during 9th & 10th grade years (required)
- Completion of all Physical Education and Foreign Language requirements during 9th & 10th grade years
- Compare sending school’s graduation requirements to KAMS curriculum to ensure student will meet high school graduation requirements
- Take an ACT or SAT exam in the fall of sophomore year or earlier (minimum ACT of 23 or SAT of 1150 is required)
- Try to take the following courses at the high school level to better prepare for the KAMS curriculum (suggested, not required):
  - Biology, Chemistry, Physics, Pre-Calculus, Trigonometry
- May need to seek other opportunities (online, correspondence, community college) to complete any missing coursework for KAMS admission and/or KAMS completion.
- PLAN is not accepted

**Timeline**

<table>
<thead>
<tr>
<th>Early Fall</th>
<th>TBD</th>
<th>December 15, 2020</th>
<th>Mid-Spring 2021</th>
</tr>
</thead>
<tbody>
<tr>
<td>Application materials available</td>
<td>KAMS Preview Day</td>
<td>Application Priority Deadline (sophomore applicants)</td>
<td>Pre-enrollment</td>
</tr>
</tbody>
</table>

Once all application materials have been received, the admission committee will review the application and will notify the student of a decision.

**Selection Criteria**
Selection is based on the following:
- Minimum of 23 on ACT or 1150 on SAT
- All application materials, including:
  - Grade Point Average (GPA)
  - Grades in core level classes (math and science)
  - ACT/SAT subsection scores
  - Personal essay and short answers
  - Leadership and involvement
  - Class Rank
  - Evaluations

**Instructions**

Please print or type the student’s name at the top of each page of the application and any additional pages submitted with the application. Retain a photocopy for your records. We accept application materials via mail, email, or fax (see contact information below).

**Short Answers & Personal Essays**
These sections are to be completed by the student working alone and must not be written or edited by other persons. The student will verify meeting this requirement by signing and dating the Certification of Accuracy page.

**Extracurricular Activities, Awards & Honors, and Courses**
May be completed by student or parent/guardian. Additional pages may be attached, if necessary.

**Parent or Guardian Statement**
To be completed by the parent/guardian. The parent/guardian will verify meeting this requirement by signing and dating the Certification of Accuracy page.

**CONTACT INFORMATION:**
Kansas Academy of Mathematics & Science
Fort Hays State University
600 Park St. Hays, KS 67601
Fax: 785-628-4077 | Email: kams@fhsu.edu

**Certification of Accuracy Page**
Must be signed and dated by the student AND a parent/guardian. This page must have original signatures when submitted to KAMS.

**Teacher/Mentor Evaluations**
Part A of each evaluation requires a parent/guardian and the applicant to furnish information prior to submitting a copy of that page along with the corresponding Part B to each teacher/mentor.

After the teacher/mentor/counselor completes the evaluation, he/she must send all original pages to KAMS. They are not to give the evaluation back to the applicant or parent/guardian once completed.

Include evaluations from the following:
1. Science Teacher
2. Mathematics Teacher
3. English Teacher
4. School Counselor
5. Mentor

Updated 4/15/20
Kansas Academy of Mathematics and Science (KAMS)

Student Application

Section 1

Please print (in black ink) or type.

Date of Birth ____________________ Age ___________ SS# ________________________

Last Name __________________________ Legal First Name ___________________ Middle Initial ___________

Preferred Name __________________________

Home Address _________________________ City __________________________ Zip ______________________

County ___________________________ Home Phone __________________________ Cell Phone ___________________

Applicant’s Email __________________________ Parent/Guardian Email __________________________

U.S. Citizen? Yes ☐ No ☐ * If no, are you a permanent resident? Yes ☐ * No ☐

Note: If you have a Green Card, a notarized copy of the front and back must be submitted with this application. If you do not have a Green Card, please see the Academy of Mathematics & Science (AMS) website for international student information: www.fhsu.edu/ams

Kansas Resident? Yes ☐ No ☐

Note: If you are not a Kansas resident, out-of-state tuition and all program costs will be the student’s/family’s responsibility

Current Grade Level ______ Are you currently a freshman applying for Early Admission? _____________

Is English your native language? Yes ☐ No ☐ If no, how long have you spoken English? ______________________

What languages are spoken in your home? __________________________

Current High School: __________________________ USD#: _____________

School Address: __________________________

City: __________________________ State: _________ Zip: ______________________

Current High School Designation Public ☐ Private ☐ Home School ☐

Principal’s Name __________________________

Principal’s E-mail __________________________

Superintendent’s Name __________________________

Are you currently receiving free or reduced lunches? Yes ☐ No ☐

What was your FIRST information source about KAMS? __________________________
When did you become interested in applying to KAMS? Who encouraged you to apply? ____________________________

Have you attended an Information Session?  Yes □  No □  Have you attended Preview Day?  Yes □  No □

Hometown Newspaper _______________________________  City _______________________________

Check each adult who has legal custody over you:

Mother □  Father □  Grandmother □  Grandfather □  Step-parent □  Other □

Name of Adult #1 with whom you live:

Last Name _______________________________  First Name _______________________________

Relationship to Applicant _______________________________  Email _______________________________

Home Phone _______________________________  Cell Phone _______________________________

Name of Adult #2 with whom you live:

Last Name _______________________________  First Name _______________________________

Relationship to Applicant _______________________________  Email _______________________________

Home Phone _______________________________  Cell Phone _______________________________

If there another adult with whom we need to communicate with, please provide the following information:

Last Name _______________________________  First Name _______________________________

Relationship to Applicant _______________________________  Email _______________________________

Home Phone _______________________________  Cell Phone _______________________________
Section 2

Please follow the instructions listed below for each item in Section 2. The applicant’s name must be typed or printed on the top of each additional page.

Short Answer Questions:
Answer the following questions in 50-100 words each on a separate sheet of paper, using the following formatting: typed, double-spaced, font size no smaller than 10pt, top and bottom margins no less than 1 inch, and side margins no less than 1.25 inches. The applicant’s name must be typed or printed on the top of each page. The answers must be your own work and must not be written or edited by others. You will verify this by signing the Certification of Accuracy page.

1. If you are selected for KAMS, you will be asked to live, study, and work in a residential community away from home. Summarize your feeling about living in this environment and leaving home.
2. Describe one way in which you have demonstrated leadership.
3. Describe a stressful situation in your life, how you coped with it, and what you learned from the situation.

Extracurricular Activities:
On a separate sheet of paper, list organized and individual extracurricular activities (i.e. music, chess club, newspaper, scouting, or other school, community and religious activities) and those related to mathematics, science and technology for grades 9 through 10. List organization memberships, offices held and grade of participation. Also, include out-of-school activities such as Talent Search programs, 4-H, or computer workshops. Please follow the formatting described above for the Short Answer Questions.

Awards and Honors:
On a separate sheet of paper, list individual or team honors, both in and out of school that you have received in the last two years, such as academic musical and athletic honors. Indicate grade (9-10) and whether it was at the local, state, or national level. KAMS reserves the right to verify awards received. Do not send copies of the awards at this time. Please follow the formatting described above for the Short Answer Questions.

Courses:
On a separate sheet of paper, list all honors, accelerated, dual enrollment, or college courses you have taken or have in progress in grades 9-10. If your classes are not honors or accelerated, please include an explanation (examples: not offered, limited enrollment, schedule conflict or personal choice). If you have earned college credit, please furnish an official transcript from the institution. Please follow the formatting described above for the Short Answer Questions.

Circumstantial Information (optional):
In addition to identifying students with exemplary academic records, KAMS will take into consideration underperforming high ability students. Applicants may use this section to justify being considered for admission. KAMS attempts to identify those applicants whose previous school grades or admission test scores may underpredict future academic success. The factors we consider in making admissions decisions are based on individual circumstances, such as:

1. Had a health problem which significantly affected, for a period of time, an otherwise exceptionally good academic record;
2. Had completed an exceptionally rigorous academic program;
3. Does not speak English at home; or
4. Had other exceptional circumstances.

This information is considered with the applicant’s credentials. Responding on a separate sheet of paper, describe any factors that you believe the Admission Committee should consider as they review your application. Please follow the formatting described above for the Short Answer Questions.

Personal Essay Question:
Answer the following essay question in 300-350 words on a separate sheet of paper using the following formatting: typed, double-spaced, font size no smaller than 10pt, top and bottom margins no less than 1 inch, and side margins no less than 1.25 inches. The applicant’s name must be typed or printed on the top of each page. These essays must be the student’s own work and must not be written or edited by others. You will verify this by signing the Certification of Accuracy page.

Explain how KAMS will help you reach your long-term goals, how you will benefit from KAMS, and how KAMS would benefit from your admittance.
Please explain how you believe the Kansas Academy of Mathematics and Science can enhance your student’s education. Also, please explain how your student will enhance the Kansas Academy of Mathematics and Science.
We certify that the above information given herein is true and accurate. We understand that giving false information will make this applicant ineligible for admission to KAMS or subject to cancellation of registration if admission has occurred.

We verify the answers provided to the short answer and personal essay questions are the applicant's own work and have not been written or edited by others. Additionally, we verify that the parent/guardian statement has been composed by the applicant's parent/guardian.

We understand that the applicant must meet all entry requirements, including ACT or SAT minimums, completion of Algebra II and Geometry prior to beginning the first semester at KAMS, and that resident aliens must demonstrate lawful alien residency (present Green Card or proof of United States citizenship) at time of application.

Further, we understand that admission decisions are based on multiple criteria including subjective judgments regarding academic and leadership potential, maturity and motivation, along with grades and test scores.

If the applicant is accepted for admissions to KAMS, we agree to adhere to the rules and regulations now in existence and those that may be established by the school in the future. We understand that, if admitted, this student will be assigned to specific courses or sections.

Applicant Signature

Parent/Guardian Signature

Date

Date

Retain a photocopy of the application & additional supporting documents.

Please send original documents to:

Kansas Academy of Mathematics and Science
Fort Hays State University
600 Park Street
Hays, KS  67601

Phone: (785) 628-4690
Fax: (785) 628-4077
Email: kams@fhsu.edu

Statement of Non-Discrimination:
The Kansas Academy of Mathematics and Science and Fort Hays State University do not discriminate on the basis of race, color, creed, religion, national origin, sex, age, or disability in admission, access to, or employment in their programs and activities. Any person having inquiries concerning compliance with the regulations implementing Equal Employment Opportunity Commission (EEOC) and Americans with Disabilities Act (ADA) guidelines is directed to contact the President’s Office, Fort Hays State University, 600 Park Street, Hays, KS  67601, (785) 628-4231.
Parent/Guardian and Applicant Instructions:
Parent/Guardian and applicant must complete Section 1 with original signatures. Complete information as indicated, sign, and submit both parts 1 and 1a of the form to the Science Teacher of your choice.

Science Teacher Instructions:
The Science Teacher must complete Section 1a. For questions 1-6, please rate the applicant (by circling the number) on a 5-point scale, with 5 being the highest rating and 1 being the lowest. N/A means you have not observed the applicant with respect to the particular characteristic.

Applicant's Last Name: ____________________________  Applicant's Legal First Name ____________________________

Current Grade ____________________________

Home Address ____________________________  City ____________________________
Zip ____________________________  Home Phone ____________________________  Cell Phone ____________________________

Applicant’s Email ____________________________

Release of Records:
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Under the Family Education Rights and Privacy Act of 1974, students have access to their education records. However, students may waive their right to review comments and information including this records report and its supporting documents, in which case they will be held in confidence. Do you wish to waive your right to examine this report and its supporting documents?  Yes ☐ No ☐

Applicant Signature ____________________________  Parent/Guardian Signature ____________________________

Date ____________________________  Date ____________________________

Evaluator: The Kansas Academy of Mathematics and Science (KAMS) Admission Committee requests your assistance in providing us with a fair evaluation of the applicant with respect to the characteristics described on the following page. This information is used for two purposes: 1) to determine the admissibility of the applicant to KAMS and 2) if the applicant is admitted, the information is further used by the KAMS staff to help the applicant during his/her studies at KAMS. The KAMS Admission Committee relies on comments, anecdotes, and assessments by teachers and administrators in evaluating applicants. Please do not return this form to the student or parent/guardian. Please mail, email, or fax all sections of this evaluation with your original signature to:

Kansas Academy of Mathematics and Science
Fort Hays State University
600 Park Street
Hays, KS  67601
Fax: 785-628-4077
Email: kams@fhsu.edu
<table>
<thead>
<tr>
<th>Evaluation Item</th>
<th>Rating 1</th>
<th>Rating 2</th>
<th>Rating 3</th>
<th>Rating 4</th>
<th>Rating 5</th>
<th>N/A</th>
<th>Additional Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Participation or Engagement</td>
<td>1 2 3 4 5</td>
<td>N/A</td>
<td></td>
<td></td>
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<td></td>
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<td>How well does the applicant participate in class discussions or group assignments? Does the applicant appear engaged, interested, and knowledgeable? Additional comments.</td>
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</tr>
<tr>
<td>2. Commitment</td>
<td>1 2 3 4 5</td>
<td>N/A</td>
<td></td>
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<tr>
<td>How committed is the student? Does the applicant attend class regularly as required? Issues of attendance, timeliness, tardiness, completing assignments on time and as directed and perseverance are indicators of commitment to education. Additional comments.</td>
<td></td>
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<tr>
<td>3. Valuating Education</td>
<td>1 2 3 4 5</td>
<td>N/A</td>
<td></td>
<td></td>
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<td></td>
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<td>Does the applicant have an attitude of inquiry and an eagerness to learn? Does he/she take the initiative to improve his/her understanding of classroom material and/or does he/she appear to have the inner drive to better his/her education position? Additional comments.</td>
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<tr>
<td>4. Intellectual Ability</td>
<td>1 2 3 4 5</td>
<td>N/A</td>
<td></td>
<td></td>
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<td></td>
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<tr>
<td>Does the student grasp the material quickly with little apparent effort? In what ways does the student demonstrate high ability? Additional comments.</td>
<td></td>
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<tr>
<td>5. Personal Responsibility</td>
<td>1 2 3 4 5</td>
<td>N/A</td>
<td></td>
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<td>Does the applicant take or accept responsibility for his/her actions, successes, and failures? Does he/she tend to address his/her concerns directly with person(s) involved (whether it’s the teacher or anyone else)? Additional comments.</td>
<td></td>
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<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Emotional Reactions</td>
<td>1 2 3 4 5</td>
<td>N/A</td>
<td></td>
<td></td>
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<td></td>
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<td>Does the applicant react positively to adverse situations such as setbacks (poor grades), criticism or conflict? Additional comments.</td>
<td></td>
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<td></td>
<td></td>
<td></td>
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<tr>
<td>7. In comparison with other students you have taught, how would you rank the applicant in intellectual ability? Additional comments:</td>
<td>1 2 3 4 5</td>
<td>N/A</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. In comparison with other students that you have taught, how would you rank the applicant’s work habits or study skills? Additional comments:</td>
<td>1 2 3 4 5</td>
<td>N/A</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. The applicant is recommended by you?</td>
<td>1 2 3 4 5</td>
<td>N/A</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<td>10. If you’d care to write a letter in addition to filling out this form, it would strengthen the applicant’s file.</td>
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**Science Teacher Printed Name**  
**Science Teacher Signature**  

**Grade Level**  
**Courses Taught**  
**Date**
Parent/Guardian and Applicant Instructions:

Parent/Guardian and applicant must complete Section 2 with original signatures. Complete information as indicated, sign, and submit both parts 2 and 2a of the form to the Math Teacher of your choice.

Math Teacher Instructions:

The Math Teacher must complete Section 2a. For questions 1-6, please rate the applicant (by circling the number) on a 5-point scale, with 5 being the highest rating and 1 being the lowest. N/A means you have not observed the applicant with respect to the particular characteristic.

Applicant’s Last Name: ________________________________  Applicant’s Legal First Name ________________________________

Current Grade ______________________________________

Home Address ________________________________________ City _____________________________

Zip ____________________ Home Phone _____________________ Cell Phone ______________________

Applicant’s Email _____________________________________

Release of Records:

We, the undersigned, hereby request that all data regarding this application be provided to the Kansas Academy of Mathematics and Science officials. We grant permission to: (name of high school) ___________________________________________________________________________ to release all school records, including education records, regarding the student’s application.

Under the Family Education Rights and Privacy Act of 1974, students have access to their education records. However, students may waive their right to review comments and information including this records report and its supporting documents, in which case they will be held in confidence. Do you wish to waive your right to examine this report and its supporting documents?  Yes ☐  No ☐

_________________________________________  ______________________________________
Applicant Signature  Parent/Guardian Signature

_________________________________________  ______________________________________
Date  Date

Evaluator: The Kansas Academy of Mathematics and Science (KAMS) Admission Committee requests your assistance in providing us with a fair evaluation of the applicant with respect to the characteristics described on the following page. This information is used for two purposes: 1) to determine the admissibility of the applicant to KAMS and 2) if the applicant is admitted, the information is further used by the KAMS staff to help the applicant during his/her studies at KAMS. The KAMS Admission Committee relies on comments, anecdotes, and assessments by teachers and administrators in evaluating applicants. Please do not return this form to the student or parent/guardian. Please mail, email, or fax all sections of this evaluation with your original signature to:

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Fort Hays State University
600 Park Street
Hays, KS 67601
Fax: 785-628-4077
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| 10. If you’d care to write a letter in addition to filling out this form, it would strengthen the applicant’s file. | | |

Math Teacher Printed Name ________________________ Math Teacher Signature ________________________

Grade Level ____________________________ Courses Taught ____________________________ Date _____________
Parent/Guardian and Applicant Instructions:
Parent/Guardian and applicant must complete Section 3 with original signatures. Complete information as indicated, sign, and submit both parts 3 and 3a of the form to the English Teacher of your choice.

English Teacher Instructions:
The English Teacher must complete Section 3a. For questions 1-6, please rate the applicant (by circling the number) on a 5-point scale, with 5 being the highest rating and 1 being the lowest. N/A means you have not observed the applicant with respect to the particular characteristic.

Applicant’s Last Name: __________________________________________ Applicant’s Legal First Name ________________________________

Current Grade ________________________________________________

Home Address ________________________________________________  City ________________________________

Zip __________________ Home Phone ____________________________  Cell Phone ____________________________

Applicant’s Email ____________________________________________

Release of Records:
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Applicant Signature __________________________________________ Parent/Guardian Signature ______________________________________

_________________________  ___________________________
Date                        Date

Evaluator: The Kansas Academy of Mathematics and Science (KAMS) Admission Committee requests your assistance in providing us with a fair evaluation of the applicant with respect to the characteristics described on the following page. This information is used for two purposes: 1) to determine the admissibility of the applicant to KAMS and 2) if the applicant is admitted, the information is further used by the KAMS staff to help the applicant during his/her studies at KAMS. The KAMS Admission Committee relies on comments, anecdotes, and assessments by teachers and administrators in evaluating applicants. Please do not return this form to the student or parent/guardian. Please mail, email, or fax all sections of this evaluation with your original signature to:

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Hays, KS 67601
Fax: 785-628-4077
Email: kams@fhsu.edu
### Evaluation 3a – English Teacher

**Applicant’s Name**

<table>
<thead>
<tr>
<th>Low</th>
<th>High</th>
<th>N/A</th>
</tr>
</thead>
</table>

1. **Participation or Engagement**
   How well does the applicant participate in class discussions or group assignments? Does the applicant appear engaged, interested, and knowledgeable? Additional comments.
   
   1 2 3 4 5 N/A

2. **Commitment**
   How committed is the student? Does the applicant attend class regularly as required? Issues of attendance, timeliness, tardiness, completing assignments on time and as directed and perseverance are indicators of commitment to education. Additional comments.
   
   1 2 3 4 5 N/A

3. **Valuating Education**
   Does the applicant have an attitude of inquiry and an eagerness to learn? Does he/she take the initiative to improve his/her understanding of classroom material and/or does he/she appear to have the inner drive to better his/her education position? Additional comments.
   
   1 2 3 4 5 N/A

4. **Intellectual Ability**
   Does the student grasp the material quickly with little apparent effort? In what ways does the student demonstrate high ability? Additional comments.
   
   1 2 3 4 5 N/A

5. **Personal Responsibility**
   Does the applicant take or accept responsibility for his/her actions, successes, and failures? Does he/she tend to address his/her concerns directly with person(s) involved (whether it’s the teacher or anyone else)? Additional comments.
   
   1 2 3 4 5 N/A

6. **Emotional Reactions**
   Does the applicant react positively to adverse situations such as setbacks (poor grades), criticism or conflict? Additional comments.
   
   1 2 3 4 5 N/A

7. **In comparison with other students you have taught, how would you rank the applicant in intellectual ability?**
   Additional comments.
   
   1 2 3 4 5 N/A

8. **In comparison with other students that you have taught, how would you rank the applicant’s work habits or study skills?**
   Additional comments.
   
   1 2 3 4 5 N/A

9. **The applicant is recommended by you?**
   
   1 2 3 4 5 N/A

10. **If you would care to write a letter in addition to filling out this form, it would strengthen the applicant’s file.**

---

**English Teacher Printed Name**  
**English Teacher Signature**

<table>
<thead>
<tr>
<th>Grade Level</th>
<th>Courses Taught</th>
<th>Date</th>
</tr>
</thead>
</table>
Parent/Guardian and Applicant Instructions:
Parent/Guardian and applicant must complete Section 4 with original signatures. Complete information as indicated, sign, and submit both parts 4 and 4a of the form to the School Counselor of your choice.

School Counselor Instructions:
The School Counselor must complete Section 4a. For questions 1-6, please rate the applicant (by circling the number) on a 5-point scale, with 5 being the highest rating and 1 being the lowest. N/A means you have not observed the applicant with respect to the particular characteristic.

Applicant's Last Name: ___________________________  Applicant's Legal First Name ___________________________

Current Grade __________________________________

Home Address __________________________________  City _____________________________________________

Zip __________________________  Home Phone _____________________________  Cell Phone _____________________________

Applicant's Email ________________________________

Release of Records:
We, the undersigned, hereby request that all data regarding this application be provided to the Kansas Academy of Mathematics and Science officials. We grant permission to: (name of high school) ___________________________ to release all school records, including education records, regarding the student's application.

Under the Family Education Rights and Privacy Act of 1974, students have access to their education records. However, students may waive their right to review comments and information including this records report and its supporting documents, in which case they will be held in confidence. Do you wish to waive your right to examine this report and its supporting documents? Yes ☐ No ☐

Applicant Signature ___________________________  Parent/Guardian Signature ___________________________

Date ___________________________  Date ___________________________

Evaluator: The Kansas Academy of Mathematics and Science (KAMS) Admission Committee requests your assistance in providing us with a fair evaluation of the applicant with respect to the characteristics described on the following page. This information is used for two purposes: 1) to determine the admissibility of the applicant to KAMS and 2) if the applicant is admitted, the information is further used by the KAMS staff to help the applicant during his/her studies at KAMS. The KAMS Admission Committee relies on comments, anecdotes, and assessments by teachers and administrators in evaluating applicants. Please do not return this form to the student or parent/guardian. Please mail, email, or fax all sections of this evaluation with your original signature to:

Kansas Academy of Mathematics and Science
Fort Hays State University
600 Park Street
Hays, KS 67601
Fax: 785-628-4077
Email: kams@fhsu.edu
## Evaluation 4a – School Counselor

<table>
<thead>
<tr>
<th>Section</th>
<th>Description</th>
<th>Rating</th>
<th>Additional Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Participation or Engagement</td>
<td>How well does the applicant participate in class discussions or group assignments? Does the applicant appear engaged, interested, and knowledgeable?</td>
<td>1 2 3 4 5</td>
<td>N/A</td>
</tr>
<tr>
<td>2. Commitment</td>
<td>How committed is the student? Does the applicant attend class regularly as required? Issues of attendance, timeliness, tardiness, completing assignments on time and as directed and perseverance are indicators of commitment to education.</td>
<td>1 2 3 4 5</td>
<td>N/A</td>
</tr>
<tr>
<td>3. Valuating Education</td>
<td>Does the applicant have an attitude of inquiry and an eagerness to learn? Does he/she take the initiative to improve his/her understanding of classroom material and/or does he/she appear to have the inner drive to better his/her education position?</td>
<td>1 2 3 4 5</td>
<td>N/A</td>
</tr>
<tr>
<td>4. Intellectual Ability</td>
<td>Does the student grasp the material quickly with little apparent effort? In what ways does the student demonstrate high ability?</td>
<td>1 2 3 4 5</td>
<td>N/A</td>
</tr>
<tr>
<td>5. Personal Responsibility</td>
<td>Does the applicant take or accept responsibility for his/her actions, successes, and failures? Does he/she tend to address his/her concerns directly with person(s) involved (whether it’s the teacher or anyone else)?</td>
<td>1 2 3 4 5</td>
<td>N/A</td>
</tr>
<tr>
<td>6. Emotional Reactions</td>
<td>Does the applicant react positively to adverse situations such as setbacks (poor grades), criticism or conflict?</td>
<td>1 2 3 4 5</td>
<td>N/A</td>
</tr>
<tr>
<td>7. In comparison with other students you have taught</td>
<td>how would you rank the applicant in intellectual ability?</td>
<td>1 2 3 4 5</td>
<td>N/A</td>
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<tr>
<td>8. In comparison with other students that you have taught</td>
<td>how would you rank the applicant’s work habits or study skills?</td>
<td>1 2 3 4 5</td>
<td>N/A</td>
</tr>
<tr>
<td>9. The applicant is recommended by you?</td>
<td></td>
<td>1 2 3 4 5</td>
<td>N/A</td>
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<tr>
<td>10. If you’d care to write a letter in addition to filling out this form, it would strengthen the applicant’s file.</td>
<td></td>
<td></td>
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**School Counselor:**

<table>
<thead>
<tr>
<th>Printed Name</th>
<th>Signature</th>
</tr>
</thead>
</table>

**Grade Level | Courses Taught (if applicable) | Date **|
Parent/Guardian and Applicant Instructions:
Parent/Guardian and applicant must complete Section 5 with original signatures. Complete information as indicated, sign, and submit both parts 1 and 1a of the form to the Mentor of your choice.

Mentor Instructions:
The Mentor must complete Section 5a. For questions 1-6, please rate the applicant (by circling the number) on a 5-point scale, with 5 being the highest rating and 1 being the lowest. N/A means you have not observed the applicant with respect to the particular characteristic.

Applicant’s Last Name: ___________________________  Applicant’s Legal First Name ___________________________

Current Grade ____________________________________

Home Address ____________________________________  City ________________________________

Zip __________________________  Home Phone ________________________________  Cell Phone ____________________

Applicant’s Email ____________________________________

Release of Records:
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Yes [ ]  No [ ]

__________________________________________  Parent/Guardian Signature

__________________________________________  Date

__________________________________________  Date

Evaluator: The Kansas Academy of Mathematics and Science (KAMS) Admission Committee requests your assistance in providing us with a fair evaluation of the applicant with respect to the characteristics described on the following page. This information is used for two purposes: 1) to determine the admissibility of the applicant to KAMS and 2) if the applicant is admitted, the information is further used by the KAMS staff to help the applicant during his/her studies at KAMS. The KAMS Admission Committee relies on comments, anecdotes, and assessments by teachers and administrators in evaluating applicants. Please do not return this form to the student or parent/guardian. Please mail, email, or fax all sections of this evaluation with your original signature to:

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600 Park Street  
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Fax: 785-628-4077  
Email: kams@fhsu.edu
Applicant’s Name

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<td>3</td>
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<th></th>
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<th></th>
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<table>
<thead>
<tr>
<th>Mentor Printed Name</th>
<th>Mentor Signature</th>
</tr>
</thead>
<tbody>
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<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Relationship to Applicant</th>
<th>Date</th>
</tr>
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<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Instructions:
Parent/Guardian and applicant must complete the information below with the original signature. Complete information as indicated, sign, and submit the following pages to your school official (Counselor, Principal, or Administrator).

Applicant’s First Name ____________________________  Applicant’s Last Name ____________________________

Current Grade ____________________________

Home Address ____________________________  City ____________________________  Zip ____________

Home Phone ____________________________  Cell Phone ____________________________

Applicant’s Email ____________________________

Release of Records
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Applicant Signature ____________________________  Parent/Guardian Signature ____________________________

Date ____________________________  Date ____________________________

School Official’s Information:
First Name ____________________________  Last Name ____________________________

School Address ____________________________  City ____________________________  Zip ____________

School Phone ____________________________  Email ____________________________

Attention School Official (Counselor, Principal, or Administrator):
The Kansas Academy of Mathematics and Science (KAMS) is a residential program for high school aged students who are academically talented in science, mathematics, and technology. Students in this two year program will live together in their own residence hall on the Fort Hays State University campus and complete a rigorous program of college coursework. The primary goals of KAMS are: 1) to prepare advanced students for continued success in college and university science, mathematics, and technology programs; and 2) to develop students with high level of excellence, engagement and ethical actions so they contribute to their local and global communities in ethical and meaningful ways. Upon completion, students will receive a high school diploma from their sending school as well as a completion certificate from KAMS. Please do not return this form to the student or parent/guardian. Please mail, email, or fax this document with your original signature to:

Kansas Academy of Mathematics and Science
Fort Hays State University
600 Park Street
Hays, KS 67601
Fax: 785-628-4077
Email: kams@fhsu.edu
Applicant’s Name ________________________________

Please include a current, official transcript for the student, any standardized test scores, and an official copy of all of the student's ACT and/or SAT score reports.

<table>
<thead>
<tr>
<th>Absences and Tardiness</th>
<th>Total # of Absences</th>
<th># of Unexcused Absences</th>
<th># of Tardies</th>
</tr>
</thead>
<tbody>
<tr>
<td>9th Grade</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Please check one</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Days</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Periods</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10th Grade</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Please check one</td>
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<tr>
<td>Days</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Periods</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Please briefly explain your school’s absence policy. For example, are school activities counted as absences?

________________________________________________________________________

Applicant’s Overall GPA:

__________________________ on a ________________ scale. (example: 3.98 on a 4.0 scale)  Is the GPA weighted  Yes ☐ No ☐

Applicant’s academic rank within his/her class

_____ out of ____________ students, based on ___ semesters.

☐ Honors or AP Algebra I  ☐ Honors or AP Algebra II  ☐ Honors or AP Geometry  ☐ Honors or AP Pre-Calculus

☐ Honors or AP Chemistry ☐ Honors or AP Biology  ☐ Honors or AP Physics  ☐

☐ Honors or AP English II ☐ Other Advanced Courses

Disciplinary Actions

Has the applicant been subject to any disciplinary actions in the last two years?  Yes ☐ No ☐

If yes, please explain:

________________________________________________________________________

Does the applicant currently have an IEP?  Yes ☐ No ☐

Certification of Accuracy

I certify that the information given in the above named applicant’s Official School Records Report is complete and accurate to the best of my knowledge and I understand that any misrepresentation or omission may void the student’s application.

__________________________________________  _________________________________
School Official’s Signature  Title/Position

Checklist of Required Materials:

☐ 9th Grade Transcript  ☐ Copies of all official ACT and SAT reports  ☐ Graduation Requirements

☐ 10th Grade Transcript  ☐ Explanation of School’s Grading System (if available)

School Official: Please submit all documents with your original signature to:

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