



Application For Admission

14 months that last a lifetime.

Application for Admission Welcome!

Beacon Academy
477 Longwood Avenue • Boston • MA • 02215
Phone: 617.423.2266
Email: admission@beaconacademy.org
Website: www.beaconacademy.org



To the Family:

We are pleased that you are interested in Beacon Academy, and the Admissions Committee looks forward to considering your student's candidacy for our school. Enclosed are the forms required for a completed application. The deadline for applying to Beacon Academy is February 1st.

Beacon Academy is a co-ed independent day school. It is important to us that families are actively involved. We will provide many opportunities for your engagement, expecting that you will be a committed partner in your student's education. It is also important to us that each family make some investment in the total cost of their student's education. The Office of Financial Aid will work with you individually to determine a figure that is equitable based on your financial circumstances.

Each student applying to Beacon Academy must be nominated. That means that an adult who knows your student will testify that he or she is a good candidate for our school based on academic performance, character and ability to be a positive member of our school community.

There are six components of the application process:

- The Nomination (form included)
- The Written Application
- Student and Family Interviews
- Admission Testing
- Financial Aid Application
- A Visiting Day

If you have questions about any part of the application process, please contact the Office of Admission.

On behalf of the Board of Trustees and the many educators and citizens who are supporting Beacon Academy, I want to thank you for your application to be a part of this new and wonderful educational community.

Sincerely,

Cindy Laba
Founder and Head of School

Beacon Academy admits students of any race, color, religion, gender, sexual orientation or national and ethnic origin to all the rights, privileges, programs and activities generally accorded or made available to students at the School. It does not discriminate on the basis of race, color, religion, gender, sexual orientation or national and ethnic origin in the administration of its educational policies, admission policies, financial aid programs, or athletic and other school-administered programs.

Beacon Academy is a one of a kind transformative experience offered to a select group of students who will devote a year between 8th & 9th grades preparing for entrance to competitive independent and public exam high schools. The year begins with an enriching full-time summer program which includes academic skills building, test preparation, sports, and field trips. It continues in September with rigorous academic work focused on honing expository writing skills, reading comprehension, and quantitative analysis. The experience culminates in a second summer of individually-designed study and leadership development. Our curriculum will help students strengthen core competencies and develop new skills preparing them for success in secondary school and beyond. During their high school careers, Beacon Academy will continue to be involved, as a source of encouragement and support.

In what way(s) is this student memorable?

Beacon Academy believes in a strong family-school relationship. Please comment on your experience with this family.

Please rate the student with respect to the following qualities, compared to other students at the same grade level.

	Excellent	Very good	Good	Average	Below Average	No basis for judgment
Motivation and initiative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Strength of character	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self-confidence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Responsibility for own behavior	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reaction to criticism and setbacks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Imagination and creativity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Intellectual curiosity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Academic strength	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Acceptance by peers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tolerance towards others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Contribution to community	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sense of humor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I recommend this student to Beacon Academy:

	Enthusiastically	Strongly	Fairly strongly	Without enthusiasm	Not recommended
For academic promise	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
For personal promise	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Signed _____ Date _____

Nominations are vital to our admission process. We very much appreciate your taking the time to complete this one for us.

Would you like us to acknowledge receipt of this form? Yes No

Would you like to receive more information about Beacon Academy? Yes No

Address _____

Application for Admission

Family Information and Application

Part I

This form must be completed by parent or guardian.

Student's name _____ Male Female
First Middle Last

Usually called _____ Student's social security number _____

Student's date of birth _____ Citizenship _____

Home address _____

Telephone _____ Primary language spoken in your home _____

Student's school _____ Present grade _____

Telephone _____

Other schools attended in the last three years: (name, address, dates attended)

(1) Parent's/Guardian's name Mr. Ms. Mrs. Other _____

Address _____

Home Telephone _____ Mobile Telephone _____

Work Telephone _____ Email Address _____

Work (name and address of employer and position held)

(2) Parent's/Guardian's name Mr. Ms. Mrs. Other _____

Address _____

Home Telephone _____ Mobile Telephone _____

Work Telephone _____ Email Address _____

Work (name and address of employer and position held)

Parents/Guardians Married Separated Divorced Other _____

Father remarried – Stepmother's name _____ Mother remarried – Stepfather's name _____

Student lives with Parent/Guardian (1) Parent/Guardian (2)
(If the above descriptions do not apply to your family, please adjust the wording)

Optional Information
Do you identify your student as a person of color? Yes No
(If yes, please indicate your student's racial/ethnic affiliation.) _____
(The above information helps us in completing state and federal statistical surveys and in better understanding our application patterns regarding diversity.)

It is very important to us to get to know you and your child and we appreciate your thoughtful responses to the following questions. If English is not your first language and answering these questions becomes a barrier to your child applying for admission, please contact us and we can arrange to get your responses and thoughts in person. You may write or type your responses and use additional paper if needed.

Why do you want your child to attend Beacon Academy?

Which three words would you use to describe your child?

In what areas does your child need improvement?

Is there anything else you would like us to know about you, your child, or your family?

How did you hear about our school?

In consideration of the undertaking by the Admission Office of Beacon Academy to process the undersigned candidate's Application for Admission and related forms, the undersigned agree that the information furnished on these forms, together with all the information and materials of any kind received by the Admission Office from any source, or prepared by anyone at its request, shall be completely confidential and shall not be disclosed to anyone, including the candidate and his/her family, except that the Director of Enrollment Management may, for official purposes and/or at his/her discretion, disclose any part or all thereof to such person or persons as he / she deems advisable.

Parent's/Guardian's signature _____ Date _____

Student's signature _____ Date _____

This form must be accompanied by an official transcript.

Beacon Academy
477 Longwood Avenue • Boston • MA • 02215
Phone: 617.423.2266
Email: admission@beaconacademy.org
Website: www.beaconacademy.org

Student's name _____

School _____ School telephone _____

Parent's/Guardian's signature _____ Date _____

(The above signed authorizes the release of all information requested below for the purposes therein described.)

To the school:

The student named above is applying for admission to Beacon Academy. This questionnaire should be completed by the appropriate school administrator, principal, or guidance counselor who knows the student well. Please attach a complete transcript for this year and the past three years of grades, teacher and advisor comments, the results of all standardized testing, and information on all additional support services the student accesses.

Beacon Academy is an extra year of school between 8th & 9th grades designed to prepare motivated, academically promising students to attend competitive independent and public exam high schools. The school provides a challenging academic program, as well as opportunities for personal growth. The faculty is committed to helping all students reach their fullest potential by developing a love of learning and a desire for excellence in all they undertake.

Please return this completed form to Beacon Academy as soon as possible. If you choose to write a letter providing the requested information instead of this form, we ask that you still complete the check-off boxes and sign and date the form before returning it to us with your letter. Your appraisal will be held in strict confidence. Thank you for your assistance.

Cindy Laba
Founder and Head of School

Administrator's Name _____ Position _____

How well do you know the student academically? _____ As a person? _____

Please submit these materials with this recommendation:

- | | |
|---|---|
| <input type="checkbox"/> Recent teacher reports, if any | <input type="checkbox"/> Final or mid-semester grades for current term (must be included) |
| <input type="checkbox"/> Standardized test scores | <input type="checkbox"/> Grades since 6th grade, if available |
| <input type="checkbox"/> A school profile, if available | <input type="checkbox"/> Attendance record (must be included) |
| <input type="checkbox"/> A copy of the student's IEP, if applicable | |

Your school serves grades: _____ to _____. Number of students in entire school _____

Please explain your school's grading system. What is the passing mark? _____ Honors mark? _____

Are students placed in sections according to ability? Yes No If yes, please tell us which level the student is placed for each subject.

Has the student ever been dismissed, suspended, placed on probation, or received other serious disciplinary action? Yes No

Has he or she withdrawn from school voluntarily for an extended period of time for reasons other than health? Yes No
(If the answer to either or both of these questions is yes, please provide a full explanation on a separate sheet of paper.)

Has the student received any special tutoring or other academic or personal support services through your school? Yes No

What are the first three words that come to mind to describe this student?

1. _____ 2. _____ 3. _____

Beacon Academy believes in a strong family-school relationship. Please comment on your experience with this family.

Please comment on the character and citizenship of this student.

Please rate the student with respect to the following qualities, compared to other students at the same grade level.

	One of the top few I have encountered	Excellent (top 10% this year)	Good	Average	Below Average	No basis for judgment
Academic Potential	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Academic Achievement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Intellectual Curiosity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to Work Independently	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Organization	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reaction to Criticism and Setbacks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self Esteem	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Responsibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Honesty	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Concern for Others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Creativity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emotional Stability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Strength of Character	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self-confidence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Acceptance by Peers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tolerance towards Others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Contribution to school community	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sense of Humor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I recommend this student to Beacon Academy:

	Enthusiastically	Strongly	Fairly strongly	Without enthusiasm	Not recommended
For academic promise	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
For personal promise	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Signed _____ Date _____

E-mail Address _____

School recommendations are vital to our admission process. We very much appreciate your taking the time to complete this one for us.

This form must be completed by the English teacher.

Beacon Academy
477 Longwood Avenue • Boston • MA • 02215
Phone: 617.423.2266
Email: admission@beaconacademy.org
Website: www.beaconacademy.org

Student's name _____

To the English Teacher:

Your frank evaluation of this student's intellectual and personal qualities will help us give the careful and thorough consideration the student deserves. We are interested in learning about strengths and weaknesses in areas such as capacity for work, values, maturity, and sense of self as a student and as a person. In addition, if special circumstances have interfered with academic achievement, we would like to know about them.

Beacon Academy is an extra year of school between 8th & 9th grades designed to prepare motivated, academically promising students to attend competitive independent and public exam high schools. The school provides a challenging academic program, as well as opportunities for personal growth. The faculty is committed to helping all students reach their fullest potential by developing a love of learning and a desire for excellence in all they undertake.

Please return this completed form to Beacon Academy as soon as possible. If you choose to write a letter providing the requested information instead of this form, we ask that you still complete the check-off boxes and sign and date the form before returning it to us with your letter. Your appraisal will be held in strict confidence. Thank you for your assistance.

Cindy Laba
Founder and Head of School

Teacher's Name _____ Title _____

School _____ How long have you known the student? _____

What are the first three words that come to mind to describe this student?

1. _____ 2. _____ 3. _____

How accurately does the student read and understand what he or she has read?

How well does the student write?

Please be specific about areas of strength and weakness, particularly in the following areas: grammar, spelling and punctuation.

Comment on the effect this student's presence or absence has on the dynamics or tone of the class.

Describe the student's overall level of academic effort.

Finally, please comment on the character and citizenship of the student.

Please rate the student with respect to the following qualities, compared to other students at the same grade level.

	One of the top few I have encountered	Excellent (top 10% this year)	Good	Average	Below Average	No basis for judgment
Academic Potential	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Academic Achievement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Intellectual Curiosity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to Work Independently	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Organization	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reaction to Criticism and Setbacks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self Esteem	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Responsibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Honesty	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Concern for Others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Creativity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emotional Stability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Strength of Character	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self-confidence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Acceptance by Peers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tolerance towards Others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Contribution to school community	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sense of Humor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I recommend this student to Beacon Academy:

	Enthusiastically	Strongly	Fairly strongly	Without enthusiasm	Not recommended
For academic promise	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
For personal promise	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Signed _____ Date _____

E-mail Address _____

School recommendations are vital to our admission process. We very much appreciate your taking the time to complete this one for us.

This form must be completed by the math teacher.

Beacon Academy

477 Longwood Avenue • Boston • MA • 02215

Phone: 617.423.2266

Email: admission@beaconacademy.org

Website: www.beaconacademy.org

Student's name _____

To the Math Teacher:

Your frank evaluation of this student's intellectual and personal qualities will help us give the careful and thorough consideration the student deserves. We are interested in learning about strengths and weaknesses in areas such as capacity for work, values, maturity, and sense of self as a student and as a person. In addition, if any special circumstances have impacted academic achievement, whether good or bad, we would like to know about them.

Beacon Academy is an extra year of school between 8th & 9th grades designed to prepare motivated, academically promising students to attend new, competitive independent and public exam high schools. The school provides a challenging academic program, as well as opportunities for personal growth. The faculty is committed to helping all students reach their fullest potential by developing a love of learning and a desire for excellence in all they undertake.

Please return the completed form to Beacon Academy as soon as possible. If you choose to write a letter providing the requested information instead of this form, we ask that you still complete the check off boxes below and sign and date the form before returning it to us with your letter. Your appraisal will be held in strict confidence. Thank you for your assistance.

Cindy Laba

Founder and Head of School

Teacher's name _____ School _____

Course title & description _____ How long have you known the student? _____

What are the first three words that come to mind to describe this student?

1. _____ 2. _____ 3. _____

Please rate the student with respect to the following qualities, compared to other students at the same grade level.

	One of the top few I have encountered	Excellent (top 10% this year)	Good	Average	Below Average	No basis for judgment
Knowledge of the Basic Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Accuracy in the Use of Basic Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Problem Solving Ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reasoning Ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Understanding of and Appreciation for the Underlying Ideas and Concepts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Effort	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall Performance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Willingness to Accept the Challenge of the More Difficult Problems & Exercises	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Command of Mathematics When Compared to Other Students You Have Taught	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please tell us how far along this student is in Algebra.

Comment on the effect this student's presence or absence has on the dynamics or tone of the class.

Describe the student's overall level of academic effort.

Finally, please comment on the character and citizenship of the student.

Please rate the student with respect to the following qualities, compared to other students at the same grade level.

	One of the top few I have encountered	Excellent (top 10% this year)	Good	Average	Below Average	No basis for judgment
Academic Potential	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Academic Achievement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Intellectual Curiosity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to Work Independently	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Organization and Study Habits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reaction to Criticism and Setbacks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self Esteem	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Responsibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Honesty	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Concern for Others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Creativity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emotional Stability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Strength of Character	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self-confidence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Acceptance by Peers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tolerance towards Others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Contribution to school community	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sense of Humor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I recommend this student to Beacon Academy:

	Enthusiastically	Strongly	Fairly strongly	Without enthusiasm	Not recommended
For academic promise	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
For personal promise	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Signed _____ Date _____

Email Address _____

School recommendations are vital to our admission process. We very much appreciate your taking the time to complete this one for us.

This form must be completed by an adult, typically non-faculty, who can speak in detail about the student's personal characteristics.

Beacon Academy
477 Longwood Avenue • Boston • MA • 02215
Phone: 617.423.2266
Email: admission@beaconacademy.org
Website: www.beaconacademy.org

Student's name _____

The student named above is applying for admission to Beacon Academy. We are eager to learn from you about the student's aptitude, experiences and achievements in an activity outside the classroom.

Beacon Academy is an extra year of school between 8th & 9th grades designed to prepare motivated, academically promising students to attend competitive independent and public exam high schools. The school provides a challenging academic program, as well as opportunities for personal growth. The faculty is committed to helping all students reach their fullest potential by developing a love of learning and a desire for excellence in all they undertake.

Please return this completed form to Beacon Academy as soon as possible. If you choose to write a letter providing the requested information instead of this form, we ask that you still complete the check boxes and sign and date the form before returning it to us with your letter. Your appraisal will be held in strict confidence. Thank you for your assistance.

Cindy Laba
Founder and Head of School

What are the first three words that come to mind to describe this student?

1. _____ 2. _____ 3. _____

In what capacity and for how long have you known this student?

What level of skill and/or responsibility has the student displayed in your area?

How would you describe the student's work ethic, self-esteem and personal resilience?

Finally, please comment on the character and citizenship of the student.

Please rate the student with respect to the following qualities, compared to other students at the same grade level.

	Excellent	Very good	Good	Average	Below Average	No basis for judgment
Motivation and initiative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Strength of character	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self-confidence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Responsibility for own behavior	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reaction to criticism and setbacks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Imagination and creativity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Intellectual curiosity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Academic strength	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Acceptance by peers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tolerance towards others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Contribution to community	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sense of humor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I recommend this student to Beacon Academy:

	Enthusiastically	Strongly	Fairly strongly	Without enthusiasm	Not recommended
For academic promise	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
For personal promise	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Recommendations are vital to our admission process. We very much appreciate your taking the time to complete this one for us.

Would you like us to acknowledge receipt of this form? Yes No

Would you like to receive more information about Beacon Academy? Yes No

Signed _____ Date _____

Please print name _____ Telephone _____

Address _____

Email _____

Guidelines For Applying For Financial Aid

FINANCIAL AID AT BEACON ACADEMY

Beacon Academy strives to enroll students who demonstrate excellence and potential. The School's financial aid program provides the opportunity for admitted students, whose families need financial assistance and view education as a top priority, to attend Beacon Academy.

The Beacon Academy Financial Aid Committee makes all decisions regarding financial aid awards. Awards are made in the form of direct grants to individual families. These grants are dollar amounts that go directly towards a student's tuition and do not require any repayment. Those students receiving financial aid at Beacon Academy are held to the same standards, both academic and behavioral, as all Beacon Academy students. Students receiving aid are not subject to any extra responsibilities or requirements.

A family's financial aid status is kept confidential; the only people who have access to it are the Director of Financial Aid and members of the Financial Aid Committee at Beacon Academy. It is assured that the results of the financial aid process will remain confidential between the institution and family.

PLEASE NOTE: If you do not apply for financial aid at the same time as you apply for admission to Beacon Academy, we cannot guarantee funds will be available.

HOW TO APPLY FOR FINANCIAL AID

All families applying for financial aid should refer to the Preliminary Financial Aid Application in the admission materials prior to contacting the Office of Financial Aid. It is necessary to complete and mail these forms so that they are all *received* by January 15.

Financial aid application materials you may need (some or all of the following):

Parents Financial Statement form (PFS) – which provides financial analysis and suggested contribution for educational expenses based on the principles and services of School and Student Service for Financial Aid (SSS)

IRS form 4506 – which provides Beacon Academy the ability to receive tax information on your family directly from the Internal Revenue Service.

Business or Farm Statement – if your family receives income from business or a farm

Financial statement for parents who are separated or divorced or have never been married

The PFS and B/F may be submitted on-line at <https://sss.ets.org>
Please request these forms if applicable.

SEE NEXT PAGE FOR DETAILED INSTRUCTIONS

Checklist For Applying For Financial Aid

TO COMPLETE YOUR FINANCIAL AID APPLICATION

1. Complete the Preliminary Financial Aid Application and return to Beacon Academy as soon as possible in order to receive the required materials.
2. Complete the Parents Financial Statement (PFS) and make a photocopy of it.
3. Send the original PFS and required fee to:
 School and Student Service for Financial Aid
 Educational Testing Service
 P.O. Box 371478
 Pittsburgh, PA 15250 -7478

Please note that Beacon Academy's school code is 4269. Fee waivers are available.

Send the following to Beacon Academy:

- Photocopy of the PFS (unless you are applying on-line)
- A copy of your most recent federal income tax return (1040), including all supporting schedules and W-2 forms (your current year tax return should be submitted by March 1)
- IRS form 4506 (do not include \$39 fee; also sign but do not date the form)
- Business/Farm Statement (if necessary)
- Financial Statement for Parents Who Are Separated or Divorced or Have Never Been Married (if necessary)

(It is wise to retain a copy of all forms for your own records.)

NOTE: Even if your current year tax return cannot be completed by January 15th, all above materials must be submitted by that date to insure preliminary consideration. Final action will not be taken however until the entire application procedure, including receipt of the current year tax forms has been completed. Computations based on the PFS will be adjusted to reflect figures shown on the most recent tax forms. Funds will not be reserved beyond the initial round of awards for those individuals whose PFS or tax returns are received after the deadline and may not be available.

APPLICATION STEP	INSTRUCTIONS	TIMELINE
Preliminary Application for Financial Aid (PAFA) all families	<input type="checkbox"/> PAFA Send to Beacon Academy with Application for Admission	ASAP
Parents' Financial Statement (PFS) all families (sent to you once we receive your (PAFA))	<input type="checkbox"/> PFS Submit the PFS to SSS in Princeton, NJ, by mail, or complete online at https://sss.ets.org/ (be sure to enter web address as shown). The Beacon Academy school code is 4269.	By January 15
Income and Tax Documentation US families	<input type="checkbox"/> Copy of Federal Income Tax Returns, signed, and all IRS 1040 schedules and W-2 forms. Send directly to Beacon Academy <input type="checkbox"/> IRS Form 4506-T, signed, not dated. Send directly to Beacon Academy <input type="checkbox"/> Copy of W-2 forms <input type="checkbox"/> Copy of Federal Income Tax return	By January 15
Business/ Farm Statement	<input type="checkbox"/> If either parent owns a business or farm, send a complete copy of the Business/Farm statement for each separate entity directly to Beacon Academy. Download from: www.nais.org/files/PDFs/Business_Farm_2005_06.pdf <input type="checkbox"/> Tax Documentation for partnerships and corporations also required	By January 15

Preliminary Financial Aid Application

STUDENT INFORMATION

Student's Name _____
First Middle Last

Grade Applying For _____

Citizenship US Canada Non-US citizen with Green Card
 Other _____

Is this student affiliated with a placement organization? Yes No

If yes, please indicate which organization:

Does this student applicant file a tax return? Yes No
(If yes, please be prepared to send us a copy.)

FAMILY INFORMATION

Have you ever before applied for financial aid at Beacon Academy? Yes No

If yes, for his/her sibling? _____

Please list any siblings who are alumni or currently attending Beacon Academy.

Name	Relationship	Year
_____	_____	_____
_____	_____	_____
_____	_____	_____

Household status: Check the one that applies to your family.

Parents are: married and living together
 not married but living together
 not living together (divorced/separated/never married/other _____).
Custody: Joint Primary _____

Does your town or employer offer tuition assistance? Yes No Amount _____

(over)

In order to be considered for financial aid, you must provide information for **each separate parent household.**

Student's Primary Household: Both Parents Mother or Father Other _____
Please Specify

Parent's Name _____ Spouse _____

Mailing Address _____
Street

City _____ State _____ Country _____ Zip Code _____

Occupation _____

Employer _____

Home Phone _____ Mother Father Other
 Work Phone _____ Mother Father Other
 Cell Phone _____ Mother Father Other

Parent E-mail Address(es) _____ Mother _____ Father

Please Check all that apply to this household:

Will file taxes for this year Will not file taxes for this year
 Filed taxes for last year Did not file taxes last year
 Will file taxes outside US or Canada for this year Filed taxes outside US or Canada last year

Do you own any part of a business or farm? Yes No

Business Type: Proprietorship Partnership S-Corporation C-Corporation Farm

Do you file schedule(s): C E F 1065 1120?

Student's Secondary Household: Mother or Father Other _____
Please Specify

Parent's Name _____ Spouse _____

Mailing Address _____
Street

City _____ State _____ Country _____ Zip Code _____

Occupation _____

Employer _____

Home Phone _____ Mother Father Other
 Work Phone _____ Mother Father Other

Parent E-mail Address(es) _____ Mother Father

This form is submitted by _____

NAME OF PARENT SUBMITTING THIS APPLICATION

APPLICATIONS MUST BE RECEIVED BY JANUARY 15th



Beacon Academy
477 Longwood Avenue
Boston, MA 02215

617-4-BEACON
(617-423-2266)
www.beaconacademy.org

Designed by Studio 5
Simmons College

