To assist potential students in deciding whether enrollment in Kid's Community College would be a good fit, Kid's Community College will allow potential students to “shadow” a currently enrolled student (the student sponsor). The “shadow” program is solely meant to assist potential students in making an enrollment decision. Below are the shadowing parameters based on grade level any change must be approved on individual basis by the Campus Director.

High School – Full day shadowing
Middle School – Half or full day shadowing
Elementary School – Half day shadowing only

Kid’s Community College will host prospective students Tuesday, Wednesday and Thursday from September 1st to April 30th. Specific dates will vary between campuses and can be obtained by contacting the School Counseling Office. While we welcome visitors, we are unable to accommodate multiple shadows per grade level. Additionally, throughout the year, activities may be scheduled that require our students’ full attention and that are not conducive to campus visits. Kid’s Community College does not host guests during mid-term exams, final exams, standardized testing dates, field trips etc. We ask that you schedule your desired shadow day at least one week in advance. When calling the School Counseling Office, please have an alternative day/date available. The following rules apply to any potential student who wishes to shadow at Kid’s Community College Charter School:

1. Potential students may only shadow one day at Kid’s Community College during the school year.
2. Shadowing students are required to complete an application prior to shadowing.
3. The Campus Director will review each application and will approve/deny the request.
4. Once an applicant has been approved, School Counseling Staff will notify applicant to schedule shadowing date.
5. Shadowing students must be accompanied, at all times, either by Kid’s Community College staff or by the Student Ambassador. This will include escorting student to and from classes, lunch and restroom breaks.
6. Shadowing students must follow all Kid’s Community College school rules, classroom rules, and instructions from Kid’s Community staff while shadowing and are expected to participate in classes.
7. Attire must be modest and uniform appropriate. Jeans free of rips and tears are acceptable. Shorts need to be Bermuda style and length. Athletic shorts, t-shirts with graphics or wording and midriff tops are not permitted. Shoes must be closed toe.
8. Shadowing student will need a pocket folder with notebook paper, a pencil and a book to read during tests or quizzes.
9. On the shadowing date, the shadowing student must check-in with parent/legal guardian in the front office and is checked out in the front office at the end of the day or scheduled visit. The School Counselor will assign all shadowing students to a Student Ambassador. Student Ambassadors have gone through a selective application process that includes a complete academic/disciplinary review and parental permission has been obtained.
10. If student will be shadowing through lunch he/she must bring a bag lunch from home or money to purchase a school lunch. School lunches will need to be paid in the front office on the morning of the shadowing and students will be given a shadowing pin lunch number. The cost of a school provided lunch is $4.00.
11. The parent/guardian of the shadowing student is responsible for the behavior of the shadowing student while he/she is shadowing at Kid’s Community College. In the case of any disruptive behavior the parent/guardian will be asked to immediately come and pick up their student.
KID’S COMMUNITY COLLEGE® CHARTER SCHOOLS

Student Shadowing Application

Name ___________________________ Current Grade ________ Date of Birth _____ / ____ / _____

Gender (circle) M F Shadow Request Dates _________ _________ _________

Address (Street Address City State Zip)

__________________________________________________________

Phone ___________________________ School Currently Attending ____________________________

Family Information

Father’s Name ___________________________ Contact Number __________________________

E-Mail Address ___________________________

Mother’s Name ___________________________ Contact Number __________________________

E-Mail Address ___________________________

Emergency Contact

Name ___________________________ Contact Number __________________________

Name ___________________________ Contact Number __________________________

Does student have any special medical conditions (allergies, seizures, diabetes, etc.)? Yes or No (Circle)
If Yes, please list conditions, medications and any other pertinent information.

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

In the event of a life threatening accident or illness, I understand that the school may contact the 911 emergency medical systems immediately. My selection indicates my agreement to be financially responsible for my student’s care and treatment. (Please initial) Yes or No __________________________

Are there any subjects/classes you would like to visit?

________________________________________________________________________________________

How did you hear about Kid’s Community College?

________________________________________________________________________________________

Parent Signature ___________________________ Date ______________

Please list your top three shadow dates:
1. __________ 2. __________ 3. __________
Student must have two teacher references (form attached).
RECOMMENDATION FORM

Applicant’s Name: ________________________________

The above-named person has applied to shadow at Kid’s Community College Preparatory High School and has given your name as a reference. Please be honest and candid in your evaluation. This referral will be kept strictly confidential. Since this form must be on file before his/her student shadowing can be considered, please return it promptly. Please email to: jalcantara@kidscoc.org.

Kid’s Community College Preparatory High School, jalcantara@kidscoc.org.

1. How long have you known the applicant? ________ In what capacity? ____________________________________________

2. What do you believe are the applicant’s greatest strengths? ____________________________________________

3. In what ways might the applicant need to experience positive growth? __________________________

4. Additional comments? (optional) ________________________________________________________________

5. Please circle the number which best describes the applicant in each of the areas of growth listed below. Note: 5 indicates the applicant is most like the characteristics on the left side, and 1 the characters on the right side. If you feel you cannot honestly evaluate a certain characteristic, please circle the letters N/A on the right.

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>5</th>
<th>4</th>
<th>3</th>
<th>2</th>
<th>1</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Sociability</td>
<td>secure, outgoing, friendly</td>
<td>5 4 3 2 1</td>
<td>shy, introverted, unsocial</td>
<td>N/A</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Judgment</td>
<td>sound, careful, teachable</td>
<td>5 4 3 2 1</td>
<td>rash, impulsive, headstrong</td>
<td>N/A</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Service Attitude</td>
<td>compassionate, unselfish</td>
<td>5 4 3 2 1</td>
<td>indifferent, self-centered</td>
<td>N/A</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Industriousness</td>
<td>diligent, thorough</td>
<td>5 4 3 2 1</td>
<td>lazy, incomplete, needs supervision</td>
<td>N/A</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Choice of Friends</td>
<td>high standards, careful</td>
<td>5 4 3 2 1</td>
<td>no standards, careless</td>
<td>N/A</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Influence on Others</td>
<td>good, helpful, OK</td>
<td>5 4 3 2 1</td>
<td>passive detrimental</td>
<td>N/A</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. Trustworthiness</td>
<td>conscientious, dependable</td>
<td>5 4 3 2 1</td>
<td>needs guidance, irresponsible</td>
<td>N/A</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. Intellect</td>
<td>vigorous, creative, learning</td>
<td>5 4 3 2 1</td>
<td>slow, unmotivated, self-satisfied</td>
<td>N/A</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. Emotional Stability</td>
<td>solid, positive, secure</td>
<td>5 4 3 2 1</td>
<td>dependent, weak, troubled</td>
<td>N/A</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10. Attitude to Authority</td>
<td>teachable, obedient</td>
<td>5 4 3 2 1</td>
<td>rebellious, querulous, resentful</td>
<td>N/A</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

6. Considering the applicant for acceptance as a student at Kid’s Community College Preparatory High School

☐ I recommended without reservation  ☐ I recommended with some reservation

☐ I do not recommend under present circumstances  ☐ I do not recommend under any circumstances

Name___________________________ Position/Title___________________________ Date _______________

Address________________________ City________________________ State____ Zip Code________

Country________________________ Phone________________________ Email________________________