

# Cambridge Program Application

## **Student:**

- Complete a student application with Lehigh Acres Middle School
- When submitting your Middle School Application at School Choice, select Lehigh Acres Middle School as Choice #1
- Complete application packet

## **From your current school:**

- FAST results based on the most recent years' assessment (documents not required if taken in Lee County)
- A copy of your most recent report card
- One teacher recommendation
- Request for Release of Documentation

The application should be sent to:

**LAMS Secondary 1 Cambridge Program**  
**Attention: Kelly Fay**  
**651 Sunrise Blvd. Lehigh Acres, FL. 33936**

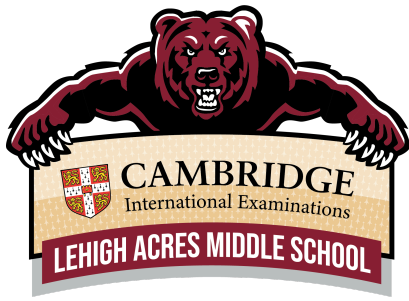
## **Acceptance:**

Acceptance letters will be mailed on a rolling basis as applications are reviewed and evaluated.

## **Contact:**

Kelly Fay (Cambridge Coordinator)  
kellygf@leeschools.net

Please return completed application to Kelly Fay  
**Lehigh Acres Middle School - A Premier STEAM Magnet School**  
651 Sunrise Blvd., Lehigh Acres, FL 33936  
Phone (239) 369-6108 | Fax (239) 356-2803



# Cambridge Program Application

## Student Personal Data Form

### Student's Name:

First \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_

Student ID # \_\_\_\_\_ Student Birth date \_\_\_\_\_ Gender \_\_\_\_\_  
(mm/dd/yy)

Current school \_\_\_\_\_ Current Grade \_\_\_\_\_

### Student's Residence:

Street \_\_\_\_\_ APT \_\_\_\_\_

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

Student's Mailing Address (if different from above):

Street \_\_\_\_\_ APT \_\_\_\_\_

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

### Parent Contact:

#### **Father**

First \_\_\_\_\_ Last \_\_\_\_\_ cell# \_\_\_\_\_

work# \_\_\_\_\_ home# \_\_\_\_\_ email \_\_\_\_\_

#### **Mother**

First \_\_\_\_\_ Last \_\_\_\_\_ cell# \_\_\_\_\_

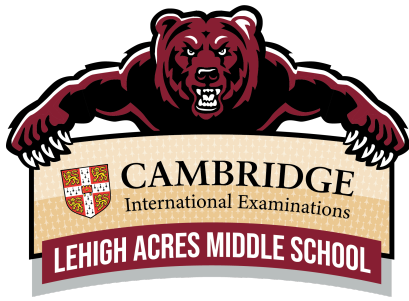
work# \_\_\_\_\_ home# \_\_\_\_\_ email \_\_\_\_\_

#### **Guardian**

First \_\_\_\_\_ Last \_\_\_\_\_ cell# \_\_\_\_\_

work# \_\_\_\_\_ home# \_\_\_\_\_ email \_\_\_\_\_

Please return completed application to Lehigh Acres Middle School



# Cambridge Program Application

## Confidential Teacher Recommendation

Student: \_\_\_\_\_

School: \_\_\_\_\_

Teacher: \_\_\_\_\_ Subject: \_\_\_\_\_

**Please use the following rating scale when completing the descriptors for this student:**

- 5=Exhibits this trait to an exceptional degree
- 4= Exhibits this trait consistently
- 3= Exhibits this trait frequently
- 2= Exhibits this trait occasionally
- 1= Exhibits this trait rarely
- 0= Not observed

Traits/Rating	5	4	3	2	1	0
A self-motivated						
Is innovative						
Works independently						
Works well in groups						
Demonstrates sensitivity for others						
Demonstrates enthusiasm for learning in this subject area						
Learns quickly with good retention						
Rarely absent and always punctual						
Positive attitude about learning						
Persistent and complete (follow through) in assignments /classwork						
Prepared for class						
Shows responsibility/dependability/honesty						
Demonstrates acceptable classroom behavior conducive to learning						

\_\_\_\_\_ **Strongly recommended**

\_\_\_\_\_ **Recommend**

\_\_\_\_\_ **Recommended with Reservations\* Please comment**

\_\_\_\_\_ **Do not recommend**

The Cambridge Program requires students to work at a very high level. Students must be motivated and enjoy learning. In your opinion, does this student possess the necessary characteristics for successful performance in this program? \_\_\_\_ Yes \_\_\_\_ No

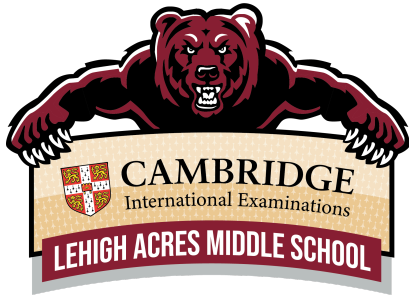
Please include ALL other information relevant to the student's potential success or failure in the program (discipline, attendance, etc.). Any additional information is appreciated and may be continued on the reverse side.

\_\_\_\_\_  
\_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

We appreciate your candid evaluation of this student. All recommendations are kept strictly confidential. The completed form should be ponied to LAMS – att: Kelly Fay Cambridge Program Coordinator

Please return completed application to Lehigh Acres Middle School



# Cambridge Program Application

## Request for the Release of Documentation 2024 - 2025

**(Please forward to your school's guidance office AFTER parent and student have signed this form)**

This form gives your current school permission to release confidential student information regarding the named student's discipline/behavior record, exceptional education record, student grade information, and FAST data. The guidance department MUST have this form completed and presented to them before any information is released.

Name of school currently attending: \_\_\_\_\_ Current Grade \_\_\_\_\_

**Applicant's Legal Name: (please print or type)**

Last Name \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

**To the school contact person:**

This student is applying for admission to the LAMS Cambridge Program at Lehigh Acres Middle School. This application cannot be evaluated until all items listed below are received. Because this is a confidential process, we ask for your cooperation in helping the student complete the process.

- Discipline/behavior record
- Exceptional education record
- Student grade information
- FAST data

This form gives the current school, parent, and student permission to release documentation regarding the applicant's discipline/behavior record, exceptional education record, student grade information, and FAST data.

### RELEASE

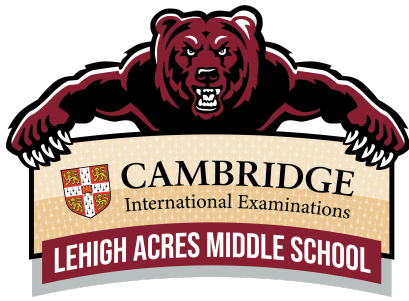
Parent/Guardian/Student signatures indicate permission to release to Lehigh Acres Middle School the documents necessary for consideration for admission to the LAMS Cambridge Program.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

Please Print Parent Name \_\_\_\_\_

Please return completed application to Lehigh Acres Middle School



# Cambridge Program Application

## Academic and Behavior Agreement

First \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_

Student ID # \_\_\_\_\_ Grade \_\_\_\_\_ Date \_\_\_\_\_

I \_\_\_\_\_, agree to abide by all  
(Print student's first and last name here)

rules of the classroom and school and to maintain quarterly grades of C's or higher in all classes for the 2024-2025 school year.

I understand that breaking the classroom and school rules could result in being placed on academic probation from the Cambridge Program. If a second offense is committed, it is possible that I will be removed from the program. Any actions that result in an administrative hearing could result in immediate dismissal from the program.

Furthermore, I understand that report cards lower than a C could result in being placed in academic probation. If grades are not acceptable the following quarter, I could be removed from the Cambridge Program.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

Please return completed application to Lehigh Acres Middle School