

Saddleback High School 7th and 8th Grade IB Prep Program Interest Form



2802 South Flower St. Santa Ana, CA 714-569-6300

Please **print or type** the following information:

| Student's Last Name: | |
|-----------------------------------|--|
| Student's First Name: | |
| Home Address: | |
| Current Grade Level: | |
| Next Grade Level: | |
| Current School:: | |
| Student ID #:: | |
| Date of Birth:: | |
| Mother/Guardian Name: | |
| Mother/Guardian Phone Number: | |
| Mother/Guardian Email Address: | |
| Father/Guardian Name: | |
| Father/Guardian Phone Number: | |
| Father/Guardian Email Address: | |
| Student's First Language: | |





| Please list the classes you are currently taking: | |
|---|--|
| Why do you want to join the IB Prep Program at Saddleback High School? | |
| What personal qualities do you possess which will enable you to be successful in a rigorous academic program such as the International Baccalaureate Program? | |
| What is an area of improvement that you would like to work on to become successful? | |
| Are you involved in any sports or extracurricular activities? Please list them all. | |
| Current Teacher's Full Name: | |
| Teacher's Email Address for Recommendation Form: | |
| Do you have any questions/concerns/ accommodations? | |
| Student Signature: | |
| Parent Signature: | |

Please email this completed form to the IB Coordinator, Heather.LaBare@sausd.us Upon receiving, I will send your teacher a recommendation form.