Dear Applicant Family,

Thank you for your interest in Angeles Workshop School.

We want to make this process as effortless as possible. We are primarily interested in learning about your educational concerns as a family and the educational background of your child. The application allows us to understand how we can best serve your family. Please complete the items below and do not hesitate to contact us with any queries.

#### ADMISSION CHECKLIST FOR ANGELES WORKSHOP SCHOOL

- Submit completed Application for Admission
- 0 Attach recent photograph of the applicant.
- Attach completed Student Essay and Questions Form. (This section is to be written by the student, in his/her own words)
- Attach application fee of \$50.00
- Submit two teacher /mentor recommendations who have taught the student over the past three years.
- Sign the request of transcript form and submit it to your child's current school. 0
- Submit all materials to Angeles workshop. We want to get to know you and will be inviting you to come in for an in person meeting with your child and possibly for a school shadow day.

Please contact us with any questions.

Scott Stubbe and Ndindi Kitonga, Ph.D Founders, The Angeles Workshop School 9713 Venice Blvd. Los Angeles, CA 90034 http://www.angelesworkshop.com/ 562-441-8802 (Ndindi cell) 310-415-3760 (Scott cell)

Email: angelesworkshop@gmail.com



# APPLICATION FOR ADMISSION TO ANGELES WORKSHOP SCHOOL

I. Applicant'	s First, Middle and	Last Name						
Pre	Preferred Name							
2. Grade app	licant is applying for	or						
3. Date of Bi	rth							
4. Schooling	History (we are int	erested in your education	al experiences over the past	three years)				
Cu	rrent School in Atte	endance						
Pre	evious School Date:	s in Attendance						
5. Parent/ Gu	ardians and other i	mportant adults in the chi	ld's life					
	Name	address	Contact numbers and email address	Relationship to applicant	the Field/line of work			
Guardian 1			uddross	прричин				
Guardian 2								
Other								
Other								
	-		rith us. Would you be interessiasts, or joining us on day		-			
7. Siblings								
Name		age	grade	(	current school			

8. Please tell us mo	ore about your educational concerns
•	What are the critical elements you are seeking in your child's school experience?
•	What are your child's passions and interests?
•	What are your passions and interests?
	s to be completed by your child.
• • • activitie	How would you describe yourself? What are your passions? What book have you read recently and enjoyed? Why? Why are you interested in joining the Angeles Workshop School community? What courses or sare you looking forward to participating in? Share an interesting anecdote about an activity you shared with friends and family members. What hifficant to you about this experience?
	evidence of something you have done that you are proud of. This could be a copy of a work of art, a ng a special activity, a link to an online project you were involved in, etc. Please write a short that you did.

# TEACHER/MENTOR RECOMMENDATION FORM

2. Name and title of person completing this form:

1. Applicant's name:

3. Title of school/organization

4. Contact informat	ion:				
· T	elephone number				
· A	address				
· E	Smail address				
5. In what capacity	5. In what capacity do you know the applicant?				
6. What is the appli	cant passionate about?				
7. In thinking of the	e student, use the space below to discuss the following about this applicant:				
• Ir	Intellectual curiosity and motivation				
• C	Capacity for independent decision-making				
• S	Social interactions with peers, adults				
• C	Community service, extracurricular outreach				
• Ir	ntegrity				

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#### REQUEST FOR TRANSCRIPTS

#### **INSTRUCTIONS**

- 1. Sign and date the bottom of this form.
- 2. Deliver the form to your child's current school.
- 3. Your child's current school will forward the information to Angeles Workshop School or you are free to collect these items in a sealed envelope and forward them to us yourself.
- 4. NOTE: If you are from a homeschooling environment please provide any documents that describe the educational experiences of your child.

1	
Current School	
Student Name:	
Student's Curre	ent Grade:
An application	for the student above has been submitted to Angeles Workshop School.
Please provide	the following information:
0	Grades for the two previous years.
o the pr	If the student has not been at your school for the past two years, please include transcripts from evious school.
0	Current grades
0	Available test scores
0	Immunization Records/Health Card
Guardian signa	ture:
Date:	
Please return th	e information to:
Founders, The 9713 Venice Bl	nd Ndindi Kitonga, Ph.D Angeles Workshop School vd. Los Angeles, CA 90034 ngelesworkshop.com/

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