



ALASKA
NATIVE
HERITAGE
CENTER

Alaska Native Heritage Center
8800 Heritage Center Drive
Anchorage, AK 99504
Phone 907-330-8000
Fax 907-330-8003

2011-2012 High School Program Application

Student Information

Print Name (First/Last) _____

* Physical Street Address (No PO Boxes) _____

* This information will be used by ANHC van drivers to drop the student off at home or the nearest ASD bus stop after the program. If there are any changes in the normal drop-off point, ANHC must be notified in writing in advance.

City _____ State _____ Zip _____

School _____ Grade _____ School Counselor _____

Please provide previous middle school attended: _____

Please check each Alaska Native Corporation with which you are affiliated:

- | | |
|--|--|
| <input type="checkbox"/> AHTNA | <input type="checkbox"/> Cook Inlet Region Inc. |
| <input type="checkbox"/> Arctic Slope Regional Corporation | <input type="checkbox"/> Doyon Limited |
| <input type="checkbox"/> The Aleut Corporation | <input type="checkbox"/> Koniag, Inc. |
| <input type="checkbox"/> Bering Straits Native Corporation | <input type="checkbox"/> Nana Regional Corporation |
| <input type="checkbox"/> Bristol Bay Native Corporation | <input type="checkbox"/> Sealaska Corporation |
| <input type="checkbox"/> Calista Corporation | <input type="checkbox"/> The 13 th Regional Corporation |
| <input type="checkbox"/> Chugach Alaska Corporation | |

Select the class or classes you would like to participate in:

Art Dance Communications: Media Arts Native Games/NYO Leadership

Primary Parent/Guardian Information

Name _____

Mailing Address _____

E-mail Address _____

Home Phone _____ Work Phone _____ Cell Phone _____

Secondary Parent/Guardian Information

Name _____

Mailing Address _____

E-mail Address _____

Home Phone _____ Work Phone _____ Cell Phone _____

Emergency Contact Information

Name _____ Phone _____

Name _____ Phone _____

Medical Information

Name of Physician _____ Phone _____

Health or Physical Conditions _____

Medication _____

Allergies _____

In the event of an emergency, I authorize that the student be referred to any appropriate health care facility or to: _____

Parent/Guardian Signature: _____ Date: _____

Select one method of transportation for the student:

- I hereby authorize the student to participate in the ANHC High School Program and to be transported in ANHC vehicles from his/her school to the Center and back home or a designated location determined by the transportation department. Students from Bartlett, Dimond, East, Service, South and West may only be dropped off within the school boundaries at the designated location. Eagle River and Chugiak students will be dropped off at the Eagle River Walmart.

All drop-off locations are subject to review by ANHC prior to the student's enrollment. Some may not be eligible for ANHC transportation due to distance or accessibility. Students will only be dropped off at the locations designated in writing and signed by their parent/guardian. Temporary changes in drop-off location must be submitted in writing, signed by the parent/guardian and turned in at least 24 hours in advance.

Bad weather conditions may require cancellation of the day's program, or alternative student drop-off times/locations. Schools will be notified by 12:00 p.m. of any a changes.

Disruptive behavior, physical conflict, illegal drugs and other serious infractions on ANHC vehicles will not be tolerated. Engaging in disruptive behavior will result in disciplinary action, including suspension, expulsion from the program, or police charges where applicable.

- I will personally provide transportation for my student from his/her school to the Center and back home.
- I (the student) am 18 years of age and have my own transportation to and from ANHC.

Please Note:

Any student being picked up from the Alaska Native Heritage Center will only be allowed to leave on the van or with a parent/guardian (named on this form). If the student is being picked up at ANHC prior to 5:00 p.m. parent/guardian will be required to fill out a Student Release Form and show identification at the front desk.

Students will not be allowed to ride to/from ANHC with friends, ride the People Mover, or walk without prior written communication from the parent/guardian. All students driving themselves must show proof of insurance and provide a copy of their driver's license. Parents must provide written permission if their student can ride with another student.

This application MUST be turned in to ANHC staff BEFORE you ride the ANHC van or attend class.

In accordance with Federal law and U.S. Department of Agriculture policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age or disability. To file a complaint of discrimination, write USDA, Director, Office of Civil Rights, Room 326-W, Whitten Building, 1400 Independence Avenue, SW, Washington, DC 20250-9410 or call (202)720-5964 (voice or TDD). USDA is an equal opportunity provider and employer.

Alaska Native Heritage Center (ANHC) High School Program Student Behavior Contract

Welcome to the Alaska Native Heritage Center's High School Program 2011-2012.

Please read the following list of expectations and their corresponding rules of conduct carefully before signing the *Student Behavior Contract*. If there is anything that you do not understand, please discuss it with your instructor or program director prior to signing the contract. We sincerely appreciate your contributions to the Alaska Native Heritage Center. All of us at the Center welcome you and wish you great success as you learn and enjoy your time with us!

I will:

Respect members of the ANHC staff, adults, and my fellow students.

- Be polite to everyone and treat others as I would like to be treated.
- Show appreciation for knowledge and expertise of teachers, Elders, and guest presenters by listening attentively.
- Keep my hands to myself, which means I will not engage in public displays of affection.

Respect the Center.

- Enjoy the displays and take pride that my culture is represented.
- Do my part in keeping the Center clean and orderly.
- Report any damage immediately so that it can be repaired.

Respect the High School Program (HSP).

- Show my commitment to the HSP by participating as much as I am able.
- Do my part to minimize distractions by turning off cell phones, pagers, iPods, electronic games, etc. before entering the Center.

Respect the driver and the van.

- Do my part to keep the van neat and clean by not bringing food or drink into the van.
- Do my part to keep everyone safe by behaving in a courteous and orderly manner.
- Offer to share seating if the van is crowded.

If I cause danger, damage, or disruption in any manner to the Alaska Native Heritage Center's and/or High School Program's employees, visitors, participants, grounds, facilities, and/or programs, I fully understand that I will be subject to disciplinary actions up to and including expulsion from the HSP and may be prohibited from returning to the Center's property.

Parent/Guardian and Student, please read and sign:

We have read, fully understand, and agree to follow all of the Center's expectations listed on this form while participating in the High School Program. We understand that the Center is partnered with the Anchorage School District.

Parent/Guardian Signature: _____ **Date:** _____

Student Signature: _____ **Date:** _____

THIS SPACE RESERVED FOR OFFICIAL H.S.P. USE ONLY
ANHC High School Program Acceptance

Staff Signature _____ Date _____

Authorization for Mutual Exchange of Information

I authorize a representative of the Alaska Native Heritage Center to access Anchorage School District assessment and achievement data for _____.
(Name of Student)

This data may include but is not limited to attendance, standardized test scores, graduation status, and transcript of grades earned up until date of withdrawal/graduation.

I understand this data will be used solely for the purposes of determining the success of the High School Program and in compliance with the guidelines of the US Department of Education and other donors who fund the ANHC High School program. Information will not be shared with any other individuals or agencies without written permission of the parent or guardian.

I hereby consent to the release of this information to the Alaska Native Heritage Center.

(Signature of Parent/Guardian) (Date)

Student Mailing Address: _____ Phone: _____

School: _____ Student ASD Number (if known): _____

Student Grade (Check one): Freshman Sophomore Junior Senior

Date of Birth: _____

Expected Student Graduation Date: _____

(Signature of ANHC Representative and Title) (Date)

ANCHORAGE SCHOOL DISTRICT
CREDIT BY CHOICE APPLICATION

REQUEST FOR CREDIT /PE WAIVER for FALL SPRING SEMESTER OF _____
(YEAR)

1. NAME (print) _____
LAST FIRST

2. STUDENT NUMBER _____ PRESENT GRADE LEVEL _____

3. CONSIDERATION IS REQUESTED FOR: (CHECK ONE)

EDUCATIONAL TRAVEL to _____ Date _____

CORRESPONDENCE COURSE entitled _____
From _____ Correspondence Program
Under the supervision of _____

COLLEGE COURSE WORK at _____
Course title (must be 100 or above) _____ Number of Semester hours _____

EARLY COLLEGE ADMISSIONS PROGRAM
GPA _____ (must be 3.5 or above) Coursework to be taken at _____

CREDIT BY EXAMINATION for Course Title _____
Supervised by _____ Approximate Exam Date _____

COMMUNITY SERVICE/FIELD STUDY TITLE (120 hours) ANHC High School Program _____
Supervised by Steven Alvarez _____

WAIVER OF PHYSICAL EDUCATION CREDIT for the following activity (150 hours) _____
See Specific Program Requirements and follow attached Required Journal Format

Signature of Physical Education Department Chairperson _____

HIGH SCHOOL CREDIT FOR MIDDLE SCHOOL WORK -- Use attached application

Student Signature _____ Parent Signature _____

Counselor _____ Curriculum A. P. _____

FINAL GRADE _____ DATE PROCESSED _____