

2009 ATS Application 6-9

<u>Office Use Only</u>	
Date:	
Check #:	
Check Amt:	
Charge:	Y P
Entered:	
Verified:	

Complete **both** sides of this application and return it with the following **REQUIRED** items:

- 1. a copy of a recent **2008-2009 report card**, including grade level and information listed on page 15.
- 2. the appropriate nonrefundable application fee. See below for details.
- 3. a copy of your "Advanced Level" ATS scores

• See pages 70-71 for more information on filling out this application.

Student Information • Have you participated in ATS classes before? Yes No

Student Name: _____
Last Name First Name Middle Initial

Mailing Address: _____
Address

_____ City State Zip Code

Home Phone: () _____ Date of Birth: _____ Gender: Female Male
Area Code

Current School: _____ Grade (as of Jan. 1, 2009): 6 7 8 9

Parent/Guardian Information

Parent/Guardian Name(s): _____
Individuals who are authorized to discuss or change information about this student.

Cell or Daytime Phone Number: _____ Ask For: _____

Primary Email Address: _____
Time-sensitive correspondence from ATS may be sent to this address.

Test Score Information – Look at your Test Results report for this information, and write your highest verbal & math scores below

"Advanced Level" ATS Verbal Score "Advanced Level" ATS Math Score

Carpooling – see page 6 **Mail a carpool list to me** with my acceptance packet. YES NO
 As a courtesy, ATS generates lists of ATS participants who are interested in carpooling and apply by April 27. **It is the responsibility of students and parents to make their own arrangements.** By requesting a carpool list you are authorizing release of your name and contact information (your address will not be listed).

Financial Aid **I am applying for financial aid.** YES NO
 If YES, complete the Financial Aid Application on pages 75 - 76. Be sure to send all required documents before April 27 to be considered.


<p>• Fees Due Now - Nonrefundable application fee</p> <p>If your application is received: You pay:</p> <p>By 4:00 pm on April 20 \$25</p> <p>By 4:00 pm on April 27 \$35</p> <p>After 4:00 pm on April 27 \$45</p>	<p><input type="checkbox"/> Check or Money Order enclosed. (Payable to "ATS")</p> <p>Please charge the application fee to my:</p> <p><input type="checkbox"/> VISA <input type="checkbox"/> MasterCard</p> <p><i>If you are charging the application fee, all information below must be correct & complete in order to process your application. Incomplete applications will be returned and may cause an increase in fee and delayed consideration for classes.</i></p>
---	--

Cardholder's Name _____ 3-digit security code _____
(from the back of your card)

Account Number (16 digits) _____ Expiration Date _____


Authorized Signature _____

Last Name	First	Middle Initial
-----------	-------	----------------

 Incomplete applications will be returned without being considered for placement. Be sure it's complete to avoid missing important deadlines.

Class Selections - Class placements are based on your selections below. Classes are filled top score down.

• I'm applying for class(es) if available.

 It is very important that you put the correct ATS code on the application as this code is used for class consideration and placement. ATS is not responsible for erroneous codes due to incorrect class information on the application. Be sure to check all information!

Class Request

Primary Choice: Course Name	ATS Code	Dates	Days	Time	Score Req

• If this class is not available (check only one box): add me to the waiting list consider me for my alternate below:

Alternate Choice: Course Name	ATS Code	Dates	Days	Time	Score Req

Class Request

Primary Choice: Course Name	ATS Code	Dates	Days	Time	Score Req

• If this class is not available (check only one box): add me to the waiting list consider me for my alternate below:

Alternate Choice: Course Name	ATS Code	Dates	Days	Time	Score Req

Class Request

Primary Choice: Course Name	ATS Code	Dates	Days	Time	Score Req

• If this class is not available (check only one box): add me to the waiting list consider me for my alternate below:

Alternate Choice: Course Name	ATS Code	Dates	Days	Time	Score Req

Class Request

Primary Choice: Course Name	ATS Code	Dates	Days	Time	Score Req

• If this class is not available (check only one box): add me to the waiting list consider me for my alternate below:

Alternate Choice: Course Name	ATS Code	Dates	Days	Time	Score Req

Class Request

Primary Choice: Course Name	ATS Code	Dates	Days	Time	Score Req

• If this class is not available (check only one box): add me to the waiting list consider me for my alternate below:

Alternate Choice: Course Name	ATS Code	Dates	Days	Time	Score Req

Deadlines

- Apply by April 20 for the **early bird savings!** See pages 22-23 for important placement information and details.
- Application Deadline: **April 27** by 4:00 pm

Mail (including express and overnight mail) or Hand Deliver

Academic Talent Search
7750 College Town Drive, Suite 101
Sacramento, CA 95826

Fax

(916) 278-5930
If faxing your application, you must include VISA or MasterCard information to pay the appropriate application fee.

