



**COMAL  
ACADEMY**

*2019-2020 Application*

*Fully Accredited by the Texas Education Agency*

# Comal Academy Application

Complete all information legibly. Return the complete application to your counselor.

## Part I

Name _____		ID# _____	
<i>Last</i>	<i>First</i>	<i>Middle</i>	
Date of Birth _____	Age _____	Sex: M ____ F ____	
Residence Addresses _____			
Street	City	Zip	
Mailing Address _____			
Street	City	Zip	
Student Email Address: _____			
Student Home Phone _____		Student Cell Phone _____	
Requesting:	AM session	PM session	Full Day session

Parent/Guardian(s) \_\_\_\_\_

*Father*

*Mother*

Cell Phone \_\_\_\_\_

Work Phone \_\_\_\_\_

Email address \_\_\_\_\_

**Applicant Resides With** \_\_\_\_\_ **Relationship** \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Relationship \_\_\_\_\_

Home # \_\_\_\_\_ Work # \_\_\_\_\_ Cell# \_\_\_\_\_

Number of years in High School \_\_\_\_\_ Current enrolled grade \_\_\_\_\_

When do you want to graduate? \_\_\_\_\_

What career do you plan to pursue? \_\_\_\_\_

College     Tech/Trade School     Military     Direct Employment

**ANSWER THE FOLLOWING QUESTIONS COMPLETELY.  
DON'T LEAVE ANYTHING BLANK.**

1. Do you have a job? Y/ N Place of employment \_\_\_\_\_ Work Hours \_\_\_\_\_
2. Do you have your own transportation? Y/N \_\_\_\_\_
3. List all medications you take on a regular basis.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
4. Are you presently on probation through the courts? Y/N \_\_\_\_\_

If yes, briefly describe the stipulations and conditions of your probation.

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Probation Officer: \_\_\_\_\_

Location (County): \_\_\_\_\_ Phone Number \_\_\_\_\_

**Comal Academy Application  
Part II**

**Essay Topic**

**Required for application to be considered**

Student must complete a one-page essay, stressing **three major points** that explain why they feel they will be successful at Comal Academy. In this essay, students can discuss any information included in Part I of the application, as well as any other relevant information addressing unusual life circumstances. Students who have had excessive absences, course failures, and/or discipline problems must address these issues in their essay and thoroughly explain what changes they have made to achieve their goals.

**Please attach essay to this application.**

Alternative schools are designed to meet the needs of students who are at risk of dropping out or who are returning to school after previously dropping out. Pursuant to Section 29.08(b) of the TEC, school districts in Texas are required to provide accelerated instruction who are “at risk of dropping out of school.”

**Administrator/Counselor Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Comal Academy Application  
Part III**

**Your acceptance to Comal Academy is pending the following clearance. Student must receive signatures before turning in application to be reviewed.**

Library books/fees:

Cleared: \_\_\_\_\_  
Signature

Textbooks/fees:

Cleared: \_\_\_\_\_  
Signature

Parking fees:

Cleared: \_\_\_\_\_  
Signature

Cafeteria fees:

Cleared: \_\_\_\_\_  
Signature

Extracurricular equipment, etc.:

Cleared: \_\_\_\_\_  
Program Signature

\_\_\_\_\_  
**Student Signature**

\_\_\_\_\_  
**Date**

**Please read the statements below and initial.**

**Initial**

**STUDENT**

- \_\_\_\_\_ I understand this is a voluntary application to Comal Academy and **DOES NOT** guarantee my acceptance.
- \_\_\_\_\_ I agree to help maintain the workplace atmosphere at Comal Academy by coming to school each day with a workplace attitude.
- \_\_\_\_\_ I understand that curriculum at Comal Academy is self--paced, requiring the academic ability to work independently with self--discipline. **All courses are computer based.**
- \_\_\_\_\_ **I understand that I am required to meet at least 1 credit every 2 weeks if attending ½ day and 1 credit per week if attending full day.**
- \_\_\_\_\_ I agree to abide by all the codes and rules/regulations of CISD and Comal Academy, and violations will be grounds for removal from the program.
- \_\_\_\_\_ I understand that I am not allowed to sleep in class.
- \_\_\_\_\_ I am aware that attendance is vital to my success, and I must comply with all state attendance rules. I must maintain **90% attendance** at all times.
- \_\_\_\_\_ I agree to attend any and all EOC/STAAR tutorial sessions until I pass all exit level STAAR tests or EOC exams.
- \_\_\_\_\_ I understand that I am required to meet post-secondary goals, including, but not limited to, PSAT, SAT, ACT, ASVAB, or TSI testing.

**Parent Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Initial**

**PARENT**

- \_\_\_\_\_ I have read the information provided in this application and confirm it is true and accurate.
- \_\_\_\_\_ **I understand that my student is required to meet at least 1 credit every 2 weeks if attending ½ day and 1 credit per week if attending full day.**
- \_\_\_\_\_ I understand the terms of my student’s placement at Comal Academy. I will partner with the home HS/Comal Academy in seeing that my student abides by the terms.
- \_\_\_\_\_ I understand that all CISD codes and rules/regulations apply to Comal Academy, and violations will be grounds for removal from the program.
- \_\_\_\_\_ I am aware that attendance at school is vital to the success of my student, and I will take the necessary steps for my student to have good attendance.
- \_\_\_\_\_ I will ensure that my student attends any and all EOC/STAAR tutorials available intended to help them pass the EXIT level state tests.
- \_\_\_\_\_ I understand that my student must have completed all courses on their graduation plan and pass all EXIT level exams to participate in graduation.
- \_\_\_\_\_ I understand my student is required to meet post-secondary goals, including, but not limited to, PSAT, SAT, ACT, ASVAB, or TSI testing.

\*\*\*\*\*Both parent and student have received a copy of the **Comal Academy Handbook**

**Parent Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**TITLE IX STATEMENT: Comal Independent School District does not discriminate on the basis of race, sex, age, religion, color, national origin, or disability in providing education services, activities or programs. It is the intent and policy of this District to conduct its activities in compliance with all Federal and State laws prohibiting discrimination on the basis of race, sex, age, religion, color, national origin, or disability.**

# COMAL ACADEMY CHECKLIST

\*\*\*\*This page to be completed by the counselor\*\*\*\*

Name: \_\_\_\_\_ ID# \_\_\_\_\_

Current credit count: \_\_\_\_\_ Credits remaining for Graduation \_\_\_\_\_

## 1. SPECIAL PROGRAMS:

SPED - (LD \_\_\_\_\_ ED \_\_\_\_\_) 504 \_\_\_\_\_ G/T \_\_\_\_\_ LEP \_\_\_\_\_  
Migrant \_\_\_\_\_ Dyslexia \_\_\_\_\_

If a student meets all of the below criteria, please have them complete a Comal Academy packet for review. Students will only be reviewed once all paperwork is completed.

## 2. Student is coded At-risk: \_\_\_\_\_ Yes \_\_\_\_\_ No

\*\*\*Students coded At-risk for the following will go under review since these are not permanent At-risk indicators.

\_\_\_\_\_ 7-12 2+ Courses Failed \_\_\_\_\_ Unsatisfactory Test Scores

## 3. Student must have freshmen and sophomore core classes completed.

\_\_\_\_\_ English I \_\_\_\_\_ English II  
\_\_\_\_\_ Algebra \_\_\_\_\_ Geometry  
\_\_\_\_\_ Biology \_\_\_\_\_ IPC/Chemistry/Physics  
\_\_\_\_\_ World Geography \_\_\_\_\_ World History/US History

## 4. Student must complete EOC's for Algebra, Biology, and at least English 1 or 2.

\_\_\_\_\_ English 1 EOC \_\_\_\_\_ English 2 EOC  
\_\_\_\_\_ Algebra EOC \_\_\_\_\_ US History EOC  
\_\_\_\_\_ Biology EOC

## 5. Counselors, please initial that the following are with this application:

\_\_\_\_\_ Transcript  
\_\_\_\_\_ Attendance Record  
\_\_\_\_\_ Current Grades  
\_\_\_\_\_ Credit Analysis  
\_\_\_\_\_ Application with Essay  
\_\_\_\_\_ Edgenuity Form of classes needed  
\_\_\_\_\_ Has the student taken TSI \_\_\_\_\_ Yes (Provide Scores) \_\_\_\_\_ No