ACT READINESS PROGRAM (ARP) APPLICATION

YOU MAY ALSO APPLY ONLINE AT: https://securek12.lrsd.org/arp

JUNE 3, 2019 – JUNE 21, 2019
at Hall High School
located at 6700 H Street, Little Rock, 72205

Student Name: __________________________________________

Student ID #: ____________________ Race: _____ Sex: _____ Birth Date: ________________

Student Phone: ____________________________ Student Email: ____________________________

Address: 

(Number & Street Address) (City) (Zip Code)

Parent Name: ____________________________ Parent Phone: __________________

Parent Email: ________________________________________________________________________

EDUCATION INFORMATION:

2019-20 Grade Level (10, 11, 12) ______ School Name: _____________________________

Please circle Math courses taken 9th -12th grades: (Must have successfully completed Geometry)

Algebra I  Algebra II  Geometry  Pre-Calculus  Calculus  Statistics  Transition Math

TEST RESULTS: Attach a copy of your most recent ACT score report to your application.

WE MUST HAVE A TEST SCORE REPORT for current 11th and 12th!

(SEE YOUR COUNSELOR ABOUT WAYS TO GET A COPY OF YOUR SCORE REPORT)

HEALTH INFORMATION:

Please list allergies: ____________________________ ____________________________

If parent or guardian cannot be reached, please list an emergency contact:

(Name) (Relationship) (Phone Number)

THE ACT READINESS PROGRAM WILL BE OFFERED MONDAY THROUGH FRIDAY, FROM 8:30 A.M. UNTIL 1:00 P.M. PLEASE BE ON TIME EACH MORNING OF CLASSES. YOU CAN ONLY HAVE TWO (2) ABSENCES DURING THIS SESSION. PERFECT ATTENDANCE QUALIFIES STUDENTS FOR INCENTIVE DRAWINGS.

I give permission for my child to enroll in the ACT Readiness Program. I give permission for the release of school ACT, PLAN, or EXPLORE scores results to the Program Manager. I understand that there are no fees or charges for the program and the ACT Readiness assumes no responsibility for transporting students to and from the program site.

(Parent/Guardian Signature) (Date) (Phone Number)

(Student Signature) (Date) (Phone Number)

***PLEASE SEND COMPLETED APPLICATION, ALONG WITH SCORE REPORTS TO PAT BILBREY, Pat.Bilbrey@lrsd.org, 501-447-2401. THE MAILING ADDRESS IS PARKVIEW HIGH SCHOOL, ATTN: PAT BILBREY, 2501 BARROW ROAD, LITTLE ROCK, AR 72204. REGISTRATION DEADLINE – MAY 17, 2019***