



Application Instructions School Year 2020-2021

Application process: **Opens:** October 1, 2019
Closes: November 27, 2019

Content and Deadlines

The application packet contains:

Part 1: *Form #1 is a google form and can be found at this link*
<https://forms.gle/kF3ApZNKeUWuBptn8>

Part 2: *Parent and Student Application Statement*

Part 3: *Counselor Verification*

- The school counselor is asked to attach the student's report cards, standardized test results (MAP/PARCC) and general information.
- The *counselor* will send the completed form to Clarksburg High School.

Part 4: *Teacher Reference/Evaluation (3 references needed from academic teachers)*

- The *student* will choose the subject area and give the appropriate form to their teacher and have them sign confirming they received the form.
- The *teachers* will send the completed form to Clarksburg High School via pony, USPS or emailing rachel_l_clements@mcpssmd.org

Part 5: *Writing Sample*

- The student is asked to submit **1 writing sample based on a prompt**.

It is the *student's responsibility* to see that Parts 3 and 4 are distributed to the teachers and school counselor prior to November 1st to allow them time to complete and return to the school.

The *student and parent* are to complete Part 1 (online) and Part 2 and return to CHS no later than November 27th, 2019

The *student* is to submit Part 4- signed teacher recommendation verification and complete Part 5 (their writing sample) and return it to CHS no later than November 27th, 2019.

****Note: The APPS Program is available only to students residing within the Clarksburg HS Cluster. Enrollment in the APPS program is not a reason for school transfer to be granted.****

If you have questions, please contact Rachel Clements at 240.740.6000 or rachel_l_clements@mcpssmd.org

The APPS program committee will not evaluate any applicant for whom an incomplete application packet is submitted.

School Address: Clarksburg High School • 22500 Wims Road • Clarksburg, Maryland 20871

*Current 9th graders may apply, but students are strongly encouraged to apply in their 8th grade year due to the rigors of the program

Part 2

PARENT APPLICATION STATEMENT

I hereby submit this application for my child to be considered for the APPS Program at Clarksburg High School. I understand that this application reflects my child's work and abilities. I understand that if any information in this application is found to be falsified or plagiarized, my child's application could be rejected. I understand that this application will be held in confidence by all members of the APPS committee and will not be returned to students or parents.

The APPS program is offered only to students **residing within the Clarksburg High School Cluster**. Students should not apply if you reside outside the Clarksburg High School boundaries.

Parent /Guardian Signature: _____ Date: _____

STUDENT APPLICATION STATEMENT

I hereby submit this application. I certify that the information here is correct and an accurate representation of my work and abilities. I understand that plagiarizing any portion of this application will be grounds for my application to be rejected. I understand that this application will be held in confidence by all members of the APPS committee and will not be returned to students or parents.

I understand that if accepted into the APPS program I will be expected to:

- attend seminars and guest speaker opportunities
- take 6 AP classes and their corresponding AP exams
- complete an AP Showcase presentation to demonstrate my extended learning.

Student Signature: _____ Date: _____

Student Name:

APPS PROGRAM
Advanced Placement Power Scholars
Clarksburg High School

Part 3: COUNSELOR VERIFICATION

Student Name: _____ MCPS ID#: _____

Current School:

Rocky Hill Neelsville Hallie Wells Other: _____

1. Counselors please **attach report cards for this student** that include quarterly GPA
 - a. 7th grade report card
 - b. 8th grade report card (include final grades for MP1)
2. As a school, please send one alphabetical list of the most recent MAP-R/ MAP-M scores for your 8th grade students to APPS Coordinator rachel_1_clements@mcpsmd.org
3. Do you have any special concerns or considerations in the following areas about this student's participation in an accelerated academic program?

Attendance: Yes No Behavioral Concerns: Yes No

Academic Concerns: Yes No Special Requirements: Yes No

Please explain any "yes" answers:

I verify the information attached to this form is the official report cards or transcript.

Counselor Signature: _____ Date: _____

(Counselor: Please complete the form, add requested information and forward to Clarksburg High School by Nov. 27, 2019 via PONY, US mail or email to APPS Coordinator rachel_1_clements@mcpsmd.org)

Student Name:

Part 4: Teacher Recommendation Verification

Choose three of your current academic teachers and politely ask them to complete a recommendation form for you. For each of your three teachers that agree to fill out your recommendation from, please have them sign below indicating they received the form and include the subject that they teach.

Teacher Recommendation #1	
Teacher (print)	Subject
Teacher (sign)	Date

Teacher Recommendation #2	
Teacher (print)	Subject
Teacher (sign)	Date

Teacher Recommendation #3	
Teacher (print)	Subject
Teacher (sign)	Date

Part 5: Writing Sample

The APPS application requires a writing sample. The APPS program cohort begins with students in AP Social Studies classes. As a result, the writing sample is based on social studies skills and content. Students do not need any prior knowledge to answer the prompt.

Students are to respond to ONE of the prompts below in a typed essay that should be no more than one page double spaced in Times New Roman 12 point font. Please attach your essay to this page and circle the prompt to which you are responding.

Prompt #1

“If your newspaper columns are open to the women of Seneca county, we throw down the glove to any one who will meet us, in fair argument, on the great question of Woman’s Rights. Depend upon it, this soon will be the question of the day. All other reforms, however important they may be, cannot so deeply affect the interests of humanity as this one. Let it [this challenge] therefore be fairly and candidly met...”

Elizabeth Cady Stanton and Elizabeth W. McClintock, letter to the editor of the Seneca County Courier in New York State, 1848

Using the excerpt, answer a, b, and c in a cohesive written response. Use complete sentences, a bulleted list is not acceptable.

- a.) What claim do the writers make?
- b.) What is one piece of evidence to support this claim?
- c.) Briefly describe one purpose of the excerpt.

Prompt #2

“To win the war America freed the slave and armed him; and the threat to arm the mass of the Black workers of the Confederacy stopped the war... Most Americans used the negro to defend their own economic interests and, refusing him adequate land and real education and even common justice, deserted him shamelessly as soon as their selfish interests were safe.

“The main question to which the Negroes returned again and again [during Reconstruction] was the problem of owning land. It was ridiculed as unreasonable and unjust to the impoverished landholders of the South, and as part of the desire for revenge which the North had... [But] again and again... [formerly enslaved people] expressed their right to the land and the deep importance of this right...

“What [White Southerners and some White Northerners] insisted on during Reconstruction was labor... Of labor for the economic benefit of the laborer.... they had no conception; and to any transfer of capital in land to the laborer... they were bitterly opposed.”

W.E.B. Du Bois Black Reconstruction: An Essay Toward a History of the Part Which Black Folk Played in the Attempt to Reconstruct Democracy in America.

Using the excerpt, answer a, b, and c in a cohesive written response. Use complete sentences, a bulleted list is not acceptable.

- a.) What claim does W.E.B. Du Bois make?
- b.) What is one piece of evidence to support this claim?
- c.) Briefly describe the point of view of this excerpt

English/ Language Arts Teacher Recommendation

Current English/Language Arts Teacher Recommendation Form

To be completed by the teacher

Dear Teacher:

Your recommendation is an important consideration in the decision process of the screening committee. Please complete the recommendation with reference to the demands of this challenging program and the full spectrum of students in general. Your comments are encouraged and greatly appreciated.

Student Name: _____

A. Is this course an advanced course? Yes No

If no, is there an advanced course available in the school? Yes No

B. Recommendation for APPS program: Recommend
 Recommend with reservations
 Do not recommend

C. Please comment on the student's academic / personal integrity and performance.

CONFIDENTIAL

Please use the following rating scale in completing each of the descriptors for this student. Consider the student with reference to the demands of the program and the full spectrum of students in general.

- 5 – Exhibits this trait to an **exceptional degree**
- 4 – Exhibits this trait **consistently**
- 3 – Exhibits this trait **frequently**
- 2 – Exhibits this trait **occasionally**
- 1 – Exhibits this trait **rarely**

	RATING	SCORE				
Demonstrates higher order thinking skills (analysis/synthesis of ideas)	5	4	3	2	1	
Learns quickly with good retention	5	4	3	2	1	
Is a keen and alert observer	5	4	3	2	1	
Applies concepts to new materials	5	4	3	2	1	
Quickly recognizes and understands conceptual relationships	5	4	3	2	1	
Seeks intellectual challenges	5	4	3	2	1	
Is sensitive to clock and calendar deadlines	5	4	3	2	1	
Works well in group settings	5	4	3	2	1	
Demonstrates ability to concentrate	5	4	3	2	1	
<i>Demonstrates strong skills in:</i>						
Word usage and mechanics	5	4	3	2	1	
Content appropriate reading comprehension	5	4	3	2	1	
Content appropriate written expression	5	4	3	2	1	
Content appropriate critical thinking	5	4	3	2	1	
Content appropriate problem solving	5	4	3	2	1	
Demonstrates initiative and intellectual curiosity	5	4	3	2	1	
Is a self-starter and can work independently	5	4	3	2	1	
Can see past immediate rewards to long-range goals	5	4	3	2	1	
Generates a large number of ideas or solutions to problems	5	4	3	2	1	
Is a high academic risk-taker	5	4	3	2	1	
Demonstrates an interest in Language Arts	5	4	3	2	1	
TOTAL						

MCPS teachers complete and return this recommendation form to the Clarksburg HS APPS Program via mail, PONY or email; or to the counseling office in the applicant's school for forwarding. If the recommendation is from a teacher outside MCPS, please mail/email these forms to address below: Please note these forms are identical to MCPS magnet program teacher recommendation forms. Those can be substituted for submission.

All recommendations for
 Clarksburg High School APPS program
 must be received by
 the beginning of Winter Break (12/20)

Clarksburg High School APPS Program
 (Advanced Placement Power Scholars)
 22500 Wims Road
 Clarksburg, MD 20871
 Attn.: APPS Coordinator
 rachel_l_clements@mcpss.org

Teacher completing form: PRINT

Telephone number

Course title

Grade level

Teacher signature

Date

Mathematics Teacher Recommendation

Current Math Teacher Recommendation Form

To be completed by the teacher

Dear Teacher:

Your recommendation is an important consideration in the decision process of the screening committee. Please complete the recommendation with reference to the demands of this challenging program and the full spectrum of students in general. Your comments are encouraged and greatly appreciated.

Student Name: _____

A. Is this course an advanced course? Yes No

If no, is there an advanced course available in the school? Yes No

B. Recommendation for APPS program? Recommend

Recommend with reservations

Do not recommend

C. Please comment on the student's academic / personal integrity and performance.

CONFIDENTIAL

Please use the following rating scale in completing each of the descriptors for this student. Consider the student with reference to the demands of the program and the full spectrum of students in general.

5 – Exhibits this trait to an **exceptional degree**

4 – Exhibits this trait **consistently**

3 – Exhibits this trait **frequently**

2 – Exhibits this trait **occasionally**

1 – Exhibits this trait **rarely**

	RATING					SCORE
Demonstrates higher order thinking skills (analysis/synthesis of ideas)	5	4	3	2	1	
Learns quickly with good retention	5	4	3	2	1	
Is a keen and alert observer	5	4	3	2	1	
Applies concepts to new materials	5	4	3	2	1	
Quickly recognizes and understands conceptual relationships	5	4	3	2	1	
Seeks intellectual challenges	5	4	3	2	1	
Is sensitive to clock and calendar deadlines	5	4	3	2	1	
Works well in group settings	5	4	3	2	1	
Demonstrates ability to concentrate	5	4	3	2	1	
<i>Demonstrates strong skills in:</i>						
Mathematical computation	5	4	3	2	1	
Content appropriate reading comprehension	5	4	3	2	1	
Content appropriate written expression	5	4	3	2	1	
Content appropriate critical thinking	5	4	3	2	1	
Content appropriate problem solving	5	4	3	2	1	
Demonstrates initiative and intellectual curiosity	5	4	3	2	1	
Is a self-starter and can work independently	5	4	3	2	1	
Can see past immediate rewards to long-range goals	5	4	3	2	1	
Generates a large number of ideas or solutions to problems	5	4	3	2	1	
Is a high academic risk-taker	5	4	3	2	1	
Demonstrates an interest in Mathematics	5	4	3	2	1	
TOTAL						

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Attn.: APPS Coordinator
rachel_l_clements@mcpssmd.org

Teacher completing form: PRINT

Telephone number

Course title

Grade level

Teacher signature

Date

Science Teacher Recommendation

Current Science Teacher Recommendation Form

To be completed by the teacher

Dear Teacher:

Your recommendation is an important consideration in the decision process of the screening committee. Please complete the recommendation with reference to the demands of this challenging program and the full spectrum of students in general. Your comments are encouraged and greatly appreciated.

Student Name: _____

A. Is this course an advanced course? Yes NoIf no, is there an advanced course available in the school? Yes No

B. Recommendation for APPS program? Recommend
 Recommend with reservations
 Do not recommend

C. Please comment on the student's academic / personal integrity and performance.

CONFIDENTIAL

Please use the following rating scale in completing each of the descriptors for this student. Consider the student with reference to the demands of the program and the full spectrum of students in general.

5 – Exhibits this trait to an **exceptional degree**4 – Exhibits this trait **consistently**3 – Exhibits this trait **frequently**2 – Exhibits this trait **occasionally**1 – Exhibits this trait **rarely**

	RATING					SCORE
Demonstrates higher order thinking skills (analysis/synthesis of ideas)	5	4	3	2	1	
Learns quickly with good retention	5	4	3	2	1	
Is a keen and alert observer	5	4	3	2	1	
Applies concepts to new materials	5	4	3	2	1	
Quickly recognizes and understands conceptual relationships	5	4	3	2	1	
Seeks intellectual challenges	5	4	3	2	1	
Is sensitive to clock and calendar deadlines	5	4	3	2	1	
Works well in group settings	5	4	3	2	1	
Demonstrates ability to concentrate	5	4	3	2	1	
<i>Demonstrates strong skills in:</i>						
Scientific concepts	5	4	3	2	1	
Content appropriate reading comprehension	5	4	3	2	1	
Content appropriate written expression	5	4	3	2	1	
Content appropriate critical thinking	5	4	3	2	1	
Content appropriate problem solving	5	4	3	2	1	
Demonstrates initiative and intellectual curiosity	5	4	3	2	1	
Is a self-starter and can work independently	5	4	3	2	1	
Can see past immediate rewards to long-range goals	5	4	3	2	1	
Generates a large number of ideas or solutions to problems	5	4	3	2	1	
Is a high academic risk-taker	5	4	3	2	1	
Demonstrates an interest in Science	5	4	3	2	1	
TOTAL						

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 Attn.: APPS Coordinator
 rachel_l_clements@mcpssmd.org

Teacher completing form: PRINT

Telephone number

Course title

Grade level

Teacher signature

Date

Social Studies Teacher Recommendation

Current Social Studies Teacher Recommendation Form

To be completed by the teacher

Dear Teacher:

Your recommendation is an important consideration in the decision process of the screening committee. Please complete the recommendation with reference to the demands of this challenging program and the full spectrum of students in general. Your comments are encouraged and greatly appreciated.

Student Name: _____

A. Is this course an advanced course? Yes No

If no, is there an advanced course available in the school? Yes No

B. Recommendation for APPS program? Recommend

Recommend with reservations

Do not recommend

C. Please comment on the student's academic / personal integrity and performance.

CONFIDENTIAL

Please use the following rating scale in completing each of the descriptors for this student. Consider the student with reference to the demands of the program and the full spectrum of students in general.

5 – Exhibits this trait to an **exceptional degree**

4 – Exhibits this trait **consistently**

3 – Exhibits this trait **frequently**

2 – Exhibits this trait **occasionally**

1 – Exhibits this trait **rarely**

	RATING					SCORE
Demonstrates higher order thinking skills (analysis/synthesis of ideas)	5	4	3	2	1	
Learns quickly with good retention	5	4	3	2	1	
Is a keen and alert observer	5	4	3	2	1	
Applies concepts to new materials	5	4	3	2	1	
Quickly recognizes and understands conceptual relationships	5	4	3	2	1	
Seeks intellectual challenges	5	4	3	2	1	
Is sensitive to clock and calendar deadlines	5	4	3	2	1	
Works well in group settings	5	4	3	2	1	
Demonstrates ability to concentrate	5	4	3	2	1	
<i>Demonstrates strong skills in:</i>						
Word usage and sentence structure	5	4	3	2	1	
Content appropriate reading comprehension	5	4	3	2	1	
Content appropriate written expression	5	4	3	2	1	
Content appropriate critical thinking	5	4	3	2	1	
Content appropriate problem solving	5	4	3	2	1	
Demonstrates initiative and intellectual curiosity	5	4	3	2	1	
Is a self-starter and can work independently	5	4	3	2	1	
Can see past immediate rewards to long-range goals	5	4	3	2	1	
Generates a large number of ideas or solutions to problems	5	4	3	2	1	
Is a high academic risk-taker	5	4	3	2	1	
Demonstrates an interest in Social Studies	5	4	3	2	1	
TOTAL						

MCPS teachers complete and return this recommendation form to the Clarksburg HS APPS Program via mail, PONY or email; or to the counseling office in the applicant's school for forwarding. If the recommendation is from a teacher outside MCPS, please mail/email these forms to address below: Please note these forms are identical to MCPS magnet program teacher recommendation forms. Those can be substituted for submission.

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Attn.: APPS Coordinator
rachel_l_clements@mcpssmd.org

Teacher completing form: PRINT

Telephone number

Course title

Grade level

Teacher signature

Date

World Languages Teacher Recommendation

Current World Languages Teacher Recommendation Form

To be completed by the teacher

Dear Teacher:

Your recommendation is an important consideration in the decision process of the screening committee. Please complete the recommendation with reference to the demands of this challenging program and the full spectrum of students in general. Your comments are encouraged and greatly appreciated.

Student Name: _____

A. Is this course an advanced course? Yes No

If no, is there an advanced course available in the school? Yes No

B. Recommendation for APPS program? Recommend

Recommend with reservations

Do not recommend

C. Please comment on the student's academic / personal integrity and performance.

CONFIDENTIAL

Please use the following rating scale in completing each of the descriptors for this student. Consider the student with reference to the demands of the program and the full spectrum of students in general.

5 – Exhibits this trait to an **exceptional degree**

4 – Exhibits this trait **consistently**

3 – Exhibits this trait **frequently**

2 – Exhibits this trait **occasionally**

1 – Exhibits this trait **rarely**

	RATING					SCORE
Demonstrates higher order thinking skills (analysis/synthesis of ideas)	5	4	3	2	1	
Learns quickly with good retention	5	4	3	2	1	
Is a keen and alert observer	5	4	3	2	1	
Applies concepts to new materials	5	4	3	2	1	
Quickly recognizes and understands conceptual relationships	5	4	3	2	1	
Seeks intellectual challenges	5	4	3	2	1	
Is sensitive to clock and calendar deadlines	5	4	3	2	1	
Works well in group settings	5	4	3	2	1	
Demonstrates ability to concentrate	5	4	3	2	1	
<i>Demonstrates strong skills in:</i>						
Word usage and sentence structure	5	4	3	2	1	
Content appropriate reading comprehension	5	4	3	2	1	
Content appropriate written expression	5	4	3	2	1	
Content appropriate critical thinking	5	4	3	2	1	
Content appropriate problem solving	5	4	3	2	1	
Demonstrates initiative and intellectual curiosity	5	4	3	2	1	
Is a self-starter and can work independently	5	4	3	2	1	
Can see past immediate rewards to long-range goals	5	4	3	2	1	
Generates a large number of ideas or solutions to problems	5	4	3	2	1	
Is a high academic risk-taker	5	4	3	2	1	
Demonstrates an interest in World Languages	5	4	3	2	1	
TOTAL						

MCPS teachers complete and return this recommendation form to the Clarksburg HS APPS Program via mail, PONY or email; or to the counseling office in the applicant's school for forwarding. If the recommendation is from a teacher outside MCPS, please mail/email these forms to address below: Please note these forms are identical to MCPS magnet program teacher recommendation forms. Those can be substituted for submission.

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Attn.: APPS Coordinator
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Teacher completing form: PRINT

Telephone number

Course title

Grade level

Teacher signature

Date