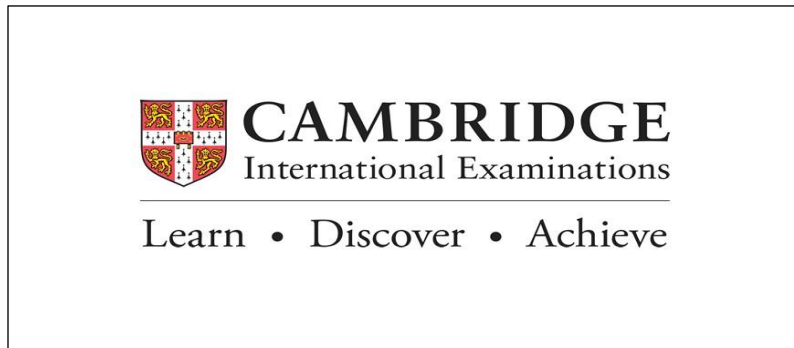


Rockledge High School CAMBRIDGE AICE PROGRAM APPLICATION PACKET



*The Cambridge International Exams (CIE) Program is a division of
The University of Cambridge (Cambridge, England)*

For students **ZONED** for Rockledge High School

For those NOT zoned for Rockledge high, the application is located at <https://brevardflc.scriborder.com/family>

Student Name:

Advanced International Certificate of Education (AICE) Checklist

Application Checklist for Submission:

1. _____ Complete Application
2. _____ Signed Statement of Commitment
3. _____ Teacher Recommendation Form (in sealed envelope if not sent in courier)
4. _____ Teacher Recommendation Form (in sealed envelope if not sent in courier)
5. _____ **Valid** email address and **Cell Phone Number**: ALL correspondence will be conducted via email
6. _____ Copies of seventh and first semester of eight grade report cards, as well as copies of standardized tests from 7th grade, (including Stanford or ITBS if from a private school)

Return to: Rockledge High School Guidance Attention: Cambridge
220 Raider Road
Rockledge, Florida 32955

If you have any questions, please contact Ms. Wanda Krajewski, Cambridge Coordinator at Krajewski.wanda@brevardschools.org. May also be reached by phone at 321-636-3711 Ext: 26194

***An incomplete application or illegible packet will
prevent a student from being considered for
participation in the Cambridge AICE Program***

Dear Students and Parents:

We welcome your interest in the University of Cambridge Advanced International Certificate of Education (AICE) Program at Rockledge High School. The Cambridge curriculum is taught in over 150 countries worldwide. In 1994, the Cambridge AICE program was first introduced to the United States.

Cambridge courses are demanding pre-university courses that emphasize higher order thinking skills, oral skills, writing skills, problem solving, teamwork and investigative skills. Highly motivated students who excel academically and are well rounded in their extracurricular activities will be attracted to this program.

Students will be evaluated on the following:

- Grade Point Average
- Classes taken (honors, advanced math/science, etc.)
- FSA, EOC or other standardized test scores
- Teacher recommendations

The Application Packet includes the following:

- Requirements for Admission
- Student Application form
- Student and Parent Commitment Form
- Teacher Recommendation Forms

Sincerely,
Wanda Krajewski
Cambridge Co-Coordinator

- **Application is due to Rockledge High School Guidance Office by February 23, 2024**
- **Notification via Family Dashboard (Not Zoned) or Email (Zoned) of seat offering or waitlist status March 4-8, 2024**
- **Deadline for New Applicants to Accept or Decline Offered Seat via Family Dashboard April 8, 2024**

CAMBRIDGE AICE PROGRAM
Rockledge High School
STATEMENT OF COMMITMENT and FINANCIAL RESPONSIBILITY

As a student in the University of Cambridge International Examinations – Advanced International Certificate of Education Program, I realize that I will be required to sit for examinations during or at the end of my 9th, 10th, 11th, and 12th grade years. I further realize that some of the examination dates fall in April, May, June, and November and that the dates of these examinations are set by the University of Cambridge and **cannot** be changed or modified by Rockledge High School. The University of Cambridge **does not offer** any make-up exams to any students regardless of the reason(s) why the student fails to take the exam. Since the University of Cambridge will charge the school for the exam, whether, or not, the exam is taken, the school has the right to hold the student, and their parents, financially responsible for any, and all, charges incurred for missed exams. Additionally, the student cannot earn the Cambridge college credit and possibly the high school graduation credit for the course if the exam is not taken.

I understand that I may be asked to sit for examinations during the months of April, May, June and November as determined by the University of Cambridge and that no make-up exams are given for any reason. I understand that my parents and I will be held financially responsible for the cost incurred in any University of Cambridge International Examinations to which I commit, but fail, to take for any reason. I also understand that if I fail to take an exam, I will not earn the Cambridge college credit and possibly the high school graduation credit for the course.

Name of Student (printed) _____
 Signature of Student _____ Date _____

As the parent of an AICE student, I understand that my child may be expected to sit for examinations during the months of April, May, June and November as determined by the University of Cambridge and that no make-up exams are given for any reason. I further understand that my child and I will be held financially responsible for any University of Cambridge International Examinations to which my son or daughter commits, but fails, to take for any reason. I also understand that if my child does not sit for the exam for a course, they cannot earn the Cambridge college credit and may not earn the high school graduation credit for the course.

Name of Parent (printed) _____
 Signature of Parent _____ Date _____

SIGNATURES	
I understand the Rockledge High School AICE Program is a rigorous program for academically talented and motivated students. If accepted as a student, I agree to maintain good attendance and behavior. I will also strive to attain high academic achievement. I understand that test dates are set up by the University of Cambridge and cannot be changed for any reason including athletics at playoff season.	
Signature of applicant:	Date:
Signature of parent/guardian:	Date:

Advanced International Certificate of Education (AICE)

Student personal data form

(Please answer EVERY question completely and legibly)

SECTION I:

Student's Legal Name

(Last)

(First)

(M.I.)

Nickname

Student Number _____

Sex Male Female (circle one)

Birthdate (/ /)
(Month/Day/Year)

Student's Residence:

(Street Address)

(City)

(State)

(Zip)

Student's Mailing Address (if different from above)

(Street Address)

(City)

(State)

(Zip)

Are you currently in the AVID Program? Yes No (circle one)

Parent(s) Name _____

Parent(s) Email Address _____

Home Phone Number _____

Parent Cell Phone Number _____

Student Cell Phone Number _____

Work Phone Number _____

Current Zoned High School _____

Current Middle School _____

SECTION II

The Advanced International Certification of Education Program adheres to federal, state and local legislation regarding equal opportunities for all students.

A. Do you consider yourself?

1) As having a physical or mental impairment which limits one or more major life activities, such as: (Learning, performing manual tasks, walking, seeing, hearing, and/or speaking)?

Yes No (Please circle appropriate answer)

2) As having a record/history of such an impairment listed above?

Yes No (Please circle appropriate answer)

B. If you answered yes to any part of question A of this section, list any accommodation(s) or special service (s) which the school district has been or would have to provide to assist you.

C. If you answered yes to any part of question A of this section, list the type (s) of school activities which your impairment may prohibit you from performing.

The approval of a student to attend a school other than his/her zoned school of attendance for the purpose of attending a choice school or program is valid for as long as the student participates in the choice school/program. A student must return to his/her zoned school of attendance at the end of the semester if he/she no longer participates in the Choice school or program.

Parent Signature _____

Student Signature _____

Advanced International Certificate of Education

Teacher Recommendation - Confidential

Teacher: _____

Counselor: _____

Middle School: _____

Student: _____

Directions to Students

Print your name, your guidance counselor's name, the school you attend and the name of the 8th grade teacher that is recommending you in the space provided. Recommendations must be completed by a current teacher (it is recommended to be a teacher in *one of the following academic areas: Math, English, Social Studies or Science*).

Directions to Teacher

The student whose name appears above is applying for admission to the Advanced International Certificate of Education (AICE) at Rockledge High School. In comparison with other high ability students you have taught; please circle the number above the phrases which most clearly represents the student's typical degree of behavior and attitude on a scale of 1-5. Upon completion of this recommendation, please courier it to Brandy Marconi in the Rockledge High School Guidance office. DO NOT return to the student.

	Strongly Disagree	Somewhat Disagree	Neither Agree nor Disagree	Some what Agree	Strongly Agree
<i>Compared to other students that I have taught...</i>					
This student learns easily.	1	2	3	4	5
This student's achievement is an accurate reflection of his/her ability.	1	2	3	4	5
This student has effective written communication skills.	1	2	3	4	5
This student has effective oral communication skills.	1	2	3	4	5
This student is responsive, considerate and sympathetic toward other students.	1	2	3	4	5
This student demonstrates good work ethic	1	2	3	4	5
This student has good attendance.	1	2	3	4	5

	Below Average	Average	Above Average	Excellent: Top 10%	Outstanding: Top 5%
<i>In comparison with other high ability students I have taught, this student is...</i>					
Enthusiastic about learning	1	2	3	4	5
Excited by new ideas	1	2	3	4	5
Interested in new topics	1	2	3	4	5
Imaginative	1	2	3	4	5
Able to ask insightful questions and develop lines of inquiry	1	2	3	4	5
Willing to take intellectual risks	1	2	3	4	5
Eager to take initiative	1	2	3	4	5
An active participant in classroom discussion	1	2	3	4	5
A thoughtful contributor to classroom discussion	1	2	3	4	5
Dependable	1	2	3	4	5
A willing and able to produce what is promised or required on time	1	2	3	4	5
Willing to admit error when appropriate	1	2	3	4	5
Willing to accept and respond to constructive criticism	1	2	3	4	5
Respected by the faculty	1	2	3	4	5
Respected by peers	1	2	3	4	5
Overall academic promise	1	2	3	4	5
Overall character and personal promise	1	2	3	4	5

Overall Recommendation (Please circle one):

- Highly recommend
- Recommend
- Recommend with reservation
- Do not recommend

I sincerely appreciate you taking the time to complete this form. Thank you for helping to provide this opportunity for our students.

Sincerely,

Wanda Krajewski,
Cambridge Program Co-Coordinator
Rockledge High School

Advanced International Certificate of Education

Teacher Recommendation - Confidential

Teacher: _____

Counselor: _____

Middle School: _____

Student: _____

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