2018 – 2019 NEW STUDENT APPLICATION

Early Action Deadline: November 30, 2018
Regular Deadline: February 1, 2019

Breakthrough of Greater Philadelphia is a tuition-free, ten-year academic enrichment program committed to supporting academically motivated, but under-resourced middle and high school students to enter and succeed in college-preparatory high school programs and attend a four-year college. Operating under a ten-year model, programming for students and families begins the summer before seventh grade and continues during the school year and throughout high school and college.

Application Checklist

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<th>Steps:</th>
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<td><strong>1. Student Statement</strong></td>
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<td>□ Student Information</td>
<td>Student</td>
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<td>□ Short Answers</td>
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<td>□ Opinion Essay</td>
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<td><strong>2. Family Statement</strong></td>
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<td>□ Short Answers</td>
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<td>□ Family Contact Information</td>
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<td><strong>3. Free and Reduced Lunch Application</strong></td>
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<td>□ Breakthrough assesses the whole student; your financial information does not necessarily determine your eligibility for our program.</td>
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<td><strong>4. Family Commitment Agreement</strong></td>
<td>Student and Parent/Guardian</td>
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<td><strong>5. Release of Records Form</strong></td>
<td>Parent/Guardian</td>
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<td>□ Please complete this form and submit it to Breakthrough</td>
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<td><strong>6. Academic Records</strong></td>
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<td>□ Please submit copies of your child’s Report Card and PSSA Scores</td>
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<td><strong>7. Teacher Reference Form</strong></td>
<td>Teacher who knows the student well</td>
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<td>□ Give these forms to one teacher who knows you well.</td>
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<td><strong>8. Personal Reference Form</strong></td>
<td>Unrelated adult who knows the student well</td>
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<td>□ Give these forms to an unrelated teacher, mentor, coach, or youth leader who knows you well.</td>
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<td><strong>9. Guidance Counselor or Principal Form</strong></td>
<td>Counselor or Principal</td>
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<td>□ Give these forms to the school counselor or principal.</td>
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Please mail applications to: Student Recruitment Breakthrough of Greater Philadelphia, 34 W. Coulter St, Philadelphia, PA 19144
Frequently Asked Questions:

What is Breakthrough of Greater Philadelphia?
Breakthrough of Greater Philadelphia is a tuition free, ten-year academic enrichment program for highly motivated, under-resourced middle and high school students who plan to attend a four-year college.

When should my student apply to Breakthrough?
Unfortunately, we cannot accept students prior to their 6th grade school-year. We may be able to accommodate older students on a wait-list basis into our older classes. Please talk to our recruitment team.

Who are Breakthrough students?
Breakthrough students are highly motivated and under-resourced students who have above-average grades, are good citizens in their schools, and are committed to attend a four-year college. Breakthrough students embrace hard work, challenging tasks, and honest feedback. They support and encourage their peers, are excited to explore and learn new things, and set goals and meet them.

What is the commitment?
Breakthrough is a ten-year commitment and families are expected to participate actively in the program starting the summer before seventh grade and continue through the end of their student’s senior year in high school. The program consists of school-year Saturday programs at least twelve times throughout the school year and a six-week, intensive summer session, before a student’s seventh, eighth, and ninth grade years. After middle school, high school students participate in sessions that include college access and success knowledge, college-bound mentoring, college trips, and much more. Your personal and family commitments should be scheduled around Breakthrough summer and Saturday programs.

Is it okay to miss a few days of the summer program for a vacation?
Attendance in the summer program is mandatory, except in cases of illness. With a limited number of days in the summer program, students who are absent will fall behind quickly and miss valuable instruction. If your family is planning an extended vacation and your student will miss more than three academic days, you should not apply to the program.

After our family submits an application, what’s next?
Within two weeks of the submission deadline, you will know if you are invited for an interview. Applications received by the priority deadline may be invited to an interview in January or February. Applications received by the regular deadline will be interviewed throughout March and April. After interviews, final decision letters will be mailed by March 1 for priority deadline and April 30 for all other applicants.

Where is Breakthrough of Greater Philadelphia?
Breakthrough offices are located at Germantown Friends School, 34 W. Coulter St., Philadelphia, PA 19144. We hold program activities at our two sites: Germantown Friends School and Drexel University.
Is transportation provided?
We are able to provide support for transportation costs via SEPTA for the summer program and Super Saturday program on a financial aid application basis. Students who are unable to take SEPTA will need to be responsible for their own transportation to and from their program site.

When is the application due?
Priority deadline applications are due November 30, 2018. Priority applicants will find out by mid-February whether or not they have moved to the second round of the admissions process. The regular deadline is February 1 and applicants will find out by mid-March whether they have moved to the next round. Any application received after February 25th will be put on a waitlist. The earlier you complete your application, the better.

Any important advice?
Breakthrough of Greater Philadelphia is a highly selective program which means that there are many strong applicants who submit applications and only 30-35 students are selected for each site per year. While you may or may not be admitted, this will be a great learning process for you regardless. Put in your best effort. Be yourself and have fun!
1. STUDENT STATEMENT

Students, please use a pen to fill out the application in YOUR OWN HANDWRITING. Remember to print clearly. Thank you!

STUDENT INFORMATION:

FIRST NAME: ___________________ MIDDLE NAME: ______________ LAST NAME: ___________________

DATE OF BIRTH: (month/day/year) ______________________________ GENDER: ______________________

STREET ADDRESS: _________________________________________________

CITY: ___________________________ STATE: ______________ ZIP CODE: ______________

NEIGHBORHOOD: ________________________ RACE/ETHNICITY: ________________________

MAIN PHONE: ___________________ STUDENT EMAIL ADDRESS: _________________________

NAME OF CURRENT SCHOOL: __________________ GRADE: __________

School District of Philadelphia Students: SCHOOLNET/LUNCH ID #: ________________________

Please list the names of the one teacher, one personal reference from a school or non-school activity, and the name of the counselor or principal who will give reference forms.

1. TEACHER’S NAME: ___________________________________________ SUBJECT: __________________________

2. PERSONAL REFERENCE NAME: _______________________________ SUBJECT: __________________________

3. GUIDANCE COUNSELOR/PRINCIPAL NAME: ______________________________

SURVEY:

1. How much time on average do you spend on homework each night? __________________________

2. Do you find work at school (circle one): too easy  too hard  about right

SHORT-ANSWERS: Please write 3-4 full sentences to answer each question.

1. Breakthrough students attend a six-week summer program and up to twelve days of the Super Saturday program throughout the school year. Students commit to participating until the end of high school. This is a big commitment. Explain why you want to spend your summers and occasional Saturdays at Breakthrough for many years. What are you hoping to gain?

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

2. Of the books you read in the past year, which one made the biggest impression on you and why?

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________________________________________________________________________

________________________________________________________________________

________________________________________________________________________
STUDENT’S NAME: ________________________________     ________________________________
First                                                     Last

3. What are your future goals? How is attending college going to help you reach these goals?

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4. Tell us about a time when you were confronted with a difficult academic challenge. How did you deal with it?

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5. What attributes or characteristics will you bring to Breakthrough? How will you demonstrate these qualities in the Breakthrough community?

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STUDENT STATEMENT OF UNDERSTANDING:
I understand that Breakthrough of Greater Philadelphia is a tuition-free academic enrichment program that requires a ten-year commitment from both me and my family. I understand that if I am accepted into the program, I will be expected to attend six week summer sessions the summers before my 7th, 8th, and 9th grade years from 8:30 a.m. – 3:45 p.m., Monday – Friday. I agree to participate enthusiastically in classes and other program events and do approximately two hours of homework per night. I understand that throughout the school year of 7th and 8th grade, I will be expected to attend up to twelve sessions of Breakthrough’s Saturday program. I also understand that Breakthrough requires that I enroll in academically rigorous classes during the school year whenever possible. Upon successful completion of the Middle School Program, I agree to fulfill all commitments required of the High School Program. In exchange for this commitment, I will be challenged, I will have fun, I will be taught by college and high school students, I will make new friends, and I will become well informed about the exciting high school – and eventually college – opportunities that await me. Throughout high school I will actively participate in the college-bound programs and commit to graduating high school and attending a four-year college or university.

Student Signature: ____________________________________________     Date: __________________________
STUDENT’S NAME: ____________________________  ____________________________  

First  Last

CREATIVITY BOX:
Use this box to tell us about yourself. Fill it up! Use your creativity. Put anything here; pictures, drawings, poetry, math equations, a rap, a collage, or whatever else shows us more about who you are! **Whatever you do, keep it in the box. No attachments will be eligible.**
OPINION ESSAY:

Choose one of the following essay prompts:

a. Consider a community of which you are part of (e.g., neighborhood, school, or church) and reflect on one challenge faced by that community. How can you help solve this challenge?

b. Describe a time in your life when you were told that you could not participate in or achieve something that you wanted to do or believed you could achieve. How did you react? What ultimately happened?

We suggest you do a practice or rough draft first, and then, write your final draft below. Please remember to print clearly. Show us your best writing! Your essay should have several paragraphs that include a topic sentence, supporting ideas for your opinion and a conclusion. Please attach an additional sheet if more space is needed.

Essay should be three to five paragraphs in length with an introduction, supporting evidence, and a closing. Be sure to edit your first draft and ask an adult to check your spelling and grammar. The ideas and words of the essay should be yours.
2. Family Statement

STUDENT’S NAME: ____________________________  ____________________________  
First  Last

Family involvement is an essential part of Breakthrough. If your student is accepted to the program, you will be expected to make this program a priority for the next ten years.

1. What are your student’s interests and/or extracurricular commitments? Please list any special activities your student is involved in that are particularly important to you and him/her and identify the days and times the student attends.

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2. How do you actively participate in your student’s education? How do you anticipate supporting your child in Breakthrough?

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3. What are your dreams for your student? Where do you see your student in six and ten years? How do you think Breakthrough will help your student reach his or her goals?

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4. Breakthrough demands a dedicated commitment on behalf of both the student and the family. Your student will be challenged during his/her experience. How will you help your student to stay focused and committed throughout this rigorous program?

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5. What do you love about your student? What would you like us to know about them?

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6. Please explain a time when your student demonstrated extra effort? What motivated your student to do so?

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7. Think of a time where you disapproved of your student’s action (if you have not disapproved of their actions, imagine they engaged in a behavior of which you disapproved). What actions did you take, and how did your student respond?

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### FAMILY CONTACT INFORMATION:

**STUDENT’S NAME:**

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**PARENT/GUARDIAN 1:**

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**Relationship to Student:**
- □ Mother
- □ Father
- □ Stepmother
- □ Stepfather
- □ Guardian
- □ Other: __________________________

**Primary Caretaker:**
- □ Yes
- □ No

**Home Address:**
- □ Same as Student

<table>
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<tr>
<th>Street</th>
<th>City</th>
<th>State</th>
<th>Zip</th>
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**Home Telephone:** ______________________________

**Work Telephone:** ______________________________

**Cell Phone:** ______________________________

**Email Address:** ______________________________

**Preferred Method of Contact:**
- □ Home Phone
- □ Work Phone
- □ Cell Phone
- □ Text Message
- □ Email

**Occupation:** ______________________________

**Employed by:** ______________________________

**Race/Ethnic Background:**
- □ African American/Black
- □ Caucasian/White
- □ Asian American/Pacific Islander
- □ Latino
- □ Multiracial (please specify: ______________________________)
- □ Other (please specify: ______________________________)

**Completed Education:**
- □ High School/GED
- □ Associates
- □ Bachelor’s Degree
- □ Graduate Degree
- □ Doctorate Degree

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**PARENT/GUARDIAN 2:**

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**Relationship to Student:**
- □ Mother
- □ Father
- □ Stepmother
- □ Stepfather
- □ Guardian
- □ Other: __________________________

**Primary Caretaker:**
- □ Yes
- □ No

**Parent/Guardian 2 has same address as above:**
- □ Yes
- □ No

**Home Address:**

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<th>State</th>
<th>Zip</th>
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**Home Telephone:** ______________________________

**Work Telephone:** ______________________________

**Cell Phone:** ______________________________

**Email Address:** ______________________________

**Preferred Method of Contact:**
- □ Home Phone
- □ Work Phone
- □ Cell Phone
- □ Text Message
- □ Email

**Occupation:** ______________________________

**Employed by:** ______________________________

**Race/Ethnic Background:**
- □ African American/Black
- □ Caucasian/White
- □ Asian American/Pacific Islander
- □ Latino
- □ Multiracial (please specify: ______________________________)
- □ Other (please specify: ______________________________)

**Completed Education:**
- □ High School/GED
- □ Associates
- □ Bachelor’s Degree
- □ Graduate Degree
- □ Doctorate Degree
**STUDENT’S NAME:** ____________________________  ____________________________  ____________________________

### OTHER INFORMATION (Please complete ALL information):

**Status of student’s parents/guardians:**
- □ Married
- □ Separated
- □ Divorced
- □ Widowed
- □ Single

**If parents/guardians do not live together, who has primary (legal) custody of the student?**
- □ Parent/Guardian 1 (listed above)
- □ Parent/Guardian 2 (listed above)
- □ Both (joint custody)
- □ Other: Name and relationship to student: __________________________

**Who is financially responsible for the student?**
- □ Parent/Guardian 1 only (listed above)
- □ Parent/Guardian 2 only (listed above)
- □ Both
- □ Other: Name and relationship to student: __________________________

**With whom is the student currently living?**
- □ Parent/Guardian 1 (listed above)
- □ Parent/Guardian 2 (listed above)
- □ Both (joint custody)
- □ Other: Name and relationship to student: __________________________

**Languages (other than English) spoken in the student’s home: __________________________**
- Of these, which is the student’s primary language: __________________________

**Is your student eligible and/or do they receive free or reduced lunches?**
- □ Yes  □ No

**Does your student have a sibling who is a current or former Breakthrough Student?**
- □ Yes  □ No
  - If yes, please give the name(s) and current age(s) of the sibling(s): __________________________

**Please list names AND ages of other children in the student’s family:**

<table>
<thead>
<tr>
<th>Name</th>
<th>Age</th>
<th>School Name or Occupation</th>
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3. **Free or Reduced Lunch Application Form (Next Page):**

Breakthrough seeks to increase educational opportunities for highly-motivated middle and high school students. We ask about family income to help us assess whether your family might have access to other opportunities aside from our program. Breakthrough assesses the whole student, and your financial information is only one piece of the student profile. Your answers do not necessarily determine eligibility for the program.
Breakthrough of Greater Philadelphia considers factors beyond the free and reduced lunch application when assessing family need in applications.

a. Please complete the chart below regarding the students’ household. INCLUDE the student applicant in your counts.

<table>
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<tr>
<th>Total Number</th>
<th>Number of Adults (include college students)</th>
<th>Number of infants</th>
<th>Number of pre-school age children</th>
<th>Number of school age children</th>
<th># teenage children (including applicant)</th>
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b. What was the total annual household income last year? ____________________________

c. If your child is selected for an interview, we will need to verify your reported information with a copy of your most recent tax return. This information will be kept confidential. It is FREE to obtain a copy of your filed tax return online at [http://www.irs.gov/Individuals/Get-Transcript](http://www.irs.gov/Individuals/Get-Transcript). You may also choose to send it in at this time with this application.

If you need assistance with this portion of the application, please call us at 215-261-6705

Have there been any significant changes to the student’s household income since last year that you would like to discuss? Please explain.

________________________________________________________________________________________________

________________________________________________________________________________________________

________________________________________________________________________________________________

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________________________________________________________________________________________________
4. **Family Commitment Agreement:**

   **Student & Parent(s)/Guardian(s):** Please review the Family Commitment Agreement carefully. If you have any questions, comments, or concerns, please contact the Director of Academic Programs at 215-261-6703.

Breakthrough will provide academic support throughout each student’s program experience, so that he or she can be best prepared for high school and college. Students and parents recognize that participating in Breakthrough is a ten-year commitment with the goal of four-year college completion. Breakthrough expectations are outlined below.

**Middle School: Summer Program**

During summer before 7th, 8th, and 9th grade school year students attend the six-week program, Monday through Friday from 9:00 a.m. – 4:30 pm (with slight variations by site). During this time, it is expected that students complete up to two hours of homework per evening. **The ninth-grade program is optional only if students have other mandatory academic commitments** (i.e. high school orientation, high school scholarship programs, etc.).

*Do you see any possible conflicts with Summer Program attendance or completing homework?*

- No
- Yes

*If yes, please explain: ____________________________________________________________

**School-Year Program**

Students will attend approximately twelve half-day (10:00 a.m. – 2:00 p.m.) Saturday sessions during their 7th – 12th grade school years. It is expected that students attend all Saturday sessions. Students must share report cards regularly with Breakthrough staff to monitor progress and determine needs for additional supports.

*Do you see any possible conflicts with school-year program attendance or expectations?*

- No
- Yes

*If yes, please explain: ____________________________________________________________

**High School Program: 11th and 12th Grade**

Breakthrough will also offer individual college mentoring to support students in 11th and 12th grade in their college search and the application process, as well as support through understanding the Financial Aid Application process. Breakthrough students in 11th and 12th grades are strongly encouraged to participate in summer internships and college-bound academic programming.

*As of now, do you see any possible conflicts with 11th and 12th grade program involvement or expectations?*

- No
- Yes

*If yes, please explain: ____________________________________________________________
Family Involvement
Breakthrough is a successful program because everyone involved sets and meets high expectations. Families play an important role in the program and are instrumental in helping each student to be successful. This includes supporting your student in his or her academic endeavors, in addition to participating in Breakthrough events throughout the year.

Do you see any possible conflicts with the family commitment?

No            Yes

If yes, please explain: _________________________________________________________________________

Transportation
Breakthrough will be able to support with transportation costs via SEPTA for the summer and Super Saturday programs on a yearly financial aid basis. Financial aid funds are not guaranteed. Parents may also drop off and pick up their child from our program location.

Financial Contribution
While Breakthrough of Greater Philadelphia is a tuition-free program, each family is expected to contribute fees in support of program services for each child enrolled in the program each year. Standard yearly fees include a minimum $25 donation, as well as supply fees specific to your child that will vary by program.

Statement of Understanding
I/We understand that Breakthrough of Greater Philadelphia requires the entire family to make a ten-year commitment. I understand that if my student is accepted into the program I will be called upon to attend meetings, to provide transportation to or from program at times, to be active in the program by reading all correspondence from and communicating regularly with the administrators of Breakthrough, and to otherwise support my student as needed. In return for my effort, Breakthrough will provide stimulating and fun curricula designed and taught by talented college and high school students and will provide support and guidance for the high school – and eventually college – application process. I/ We give permission for my/our student to apply and we will make sure he/she is an active participant throughout the program.

Parent/Guardian Signature: ___________________________ Date________________
5. Release of Information Form

PARENT/GUARDIAN:
Please complete and sign this form and return it to Breakthrough along with the other required application materials.

Dear Principal/Counselor at ____________________________ School:

(Name of your student’s school)

I am pleased to inform you that ______________________________  ________________

(Name of student)  (School ID#)

is applying to Breakthrough of Greater Philadelphia, a tuition-free academic enrichment program for motivated, college-bound students who attend public and charter schools in Philadelphia. Hosted by Drexel University and Germantown Friends School, the program engages students for ten years and is highly selective. The application requires submission of original transcripts (including at least 5th and 6th grade information), most recent standardized test scores, and copies of all IEP, if applicable.

I hereby authorize release of my student’s records as identified above to Breakthrough’s office:

Breakthrough of Greater Philadelphia
34 West Coulter Street
Philadelphia, PA 19144
Phone: 215.951.6705
Fax: 215.951.2397

______________________________________    ____________________
Parent/Guardian Signature     Date

______________________________________
Parent/Guardian Printed Name
6. **Academic Records**

PARENT/GUARDIAN: Please attach the following related to your student’s academics:

- [ ] Final 5th grade report card
- [ ] 5th grade PSSA scores
- [ ] Most recent 6th grade report card (if applicable)

The application is not complete until these documents are received by Breakthrough.
7. Teacher Reference Form

Breakthrough of Greater Philadelphia is a tuition-free, academic enrichment program, which prepares academically motivated, but under-resourced middle-school students to enter and succeed in college-preparatory high school programs and matriculate to a four-year college. Operating under a ten-year model, programming for students and families begins the summer before seventh grade and continues during the school year and throughout high school. Breakthrough also prepares the next generation of educators by recruiting and training outstanding high school and college students to become Breakthrough teachers and encouraging them to pursue careers in education and youth-service.

We would appreciate your candid responses, which will be kept confidential. If you have any questions regarding the program, please call the Director of Academic Programs at 215-261-6703.

Please mail this form no later than February 1, 2019 to:

BREAKTHROUGH OF GREATER PHILADELPHIA
ATTN: Student Recruitment
34 W. Coulter St
Philadelphia, PA 19144

Thank you for your help with this process!

Student's Name: ____________________________ School: ____________________________

Teacher's Name: ____________________________ Subject(s): ____________________________

Breakthrough students are asked to commit to a ten-year rigorous academic enrichment program that will challenge them to maintain a high standard of excellence. Please comment on this student and family’s ability to commit to such a program.

____________________________________________________________________________________________________________
____________________________________________________________________________________________________________
____________________________________________________________________________________________________________
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____________________________________________________________________________________________________________

Teacher Signature ____________________________ Date ____________________________

Work phone number ____________________________ Work email address ____________________________
Please circle the response that best suits the student in relation to the other students you teach.

**KEY**

1 = NO BASIS FOR JUDGMENT  2 = BELOW AVERAGE  3 = AVERAGE  4 = ABOVE AVERAGE  5 = EXCELLENT

Student’s skill level in your class:  □ Very Advanced  □ Advanced  □ Proficient  □ Other ________________

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<td>Supports and encourages peers</td>
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<td>Adapts to new challenges</td>
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<td>Demonstrates humility</td>
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<td>Embraces honest feedback</td>
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<td>Open to new ideas and change</td>
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<td>Thinks through challenging tasks</td>
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<td>Has motivation to go above and beyond</td>
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</tr>
<tr>
<td>Seeks ways to help self and community</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Communicates respectfully with adults and peers</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Takes positive risks/steps outside comfort zone</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

I recommend this student to the BREAKTHROUGH OF GREATER PHILADELPHIA program

□ with great enthusiasm  □ with confidence  □ with some confidence  □ with reservation  □ I do not recommend

Please comment on your response: ___________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________ 

What additional information should we know about this student or family before we make this decision?

_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

Be an Instructional Coach! - Professional Development Opportunity
Breakthrough instructional coaches (ICs) provide intensive training, coaching and support to our teaching fellows — top college and high school students from across the country who compete for our prestigious teaching residency. Together, teaching fellows and instructional coaches provide transformative summer learning experiences for under-resourced students, the majority of whom will be the first in their families to graduate from four-year colleges.

For more information about expectations, qualifications, and compensation, please visit our national affiliate site, https://www.breakthroughcollaborative.org/coach.
Personal Reference Form

Breakthrough of Greater Philadelphia is a tuition-free, academic enrichment program, which prepares academically motivated, but under-resourced middle-school students to enter and succeed in college-preparatory high school programs and matriculate to a four-year college. Operating under a ten-year model, programming for students and families begins the summer before seventh grade and continues during the school year and throughout high school. Breakthrough also prepares the next generation of educators by recruiting and training outstanding high school and college students to become Breakthrough teachers and encouraging them to pursue careers in education and youth-service.

We would appreciate your candid responses, which will be kept confidential. If you have any questions regarding the program, please call the Director of Academic Programs at 215-261-6703.

Please mail this form no later than February 1, 2019 to:

BREAKTHROUGH OF GREATER PHILADELPHIA
ATTN: Student Recruitment
34 W. Coulter St
Philadelphia, PA 19144

Thank you for your help with this process!

Student's Name: ____________________________ How Known: ____________________________

Reference’s Name: ____________________________ Year(s) Known: ____________________________

Breakthrough students are asked to commit to a ten-year rigorous academic enrichment program that will challenge them to maintain a high standard of excellence. Please comment on this student and family’s ability to commit to such a program.

____________________________________________________________________________________________________________

____________________________________________________________________________________________________________

____________________________________________________________________________________________________________

____________________________________________________________________________________________________________

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____________________________________________________________________________________________________________

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____________________________________________________________________________________________________________

Reference’s Signature ____________________________ Date ____________________________

Work phone number ____________________________ Work email address ____________________________

DUE: February 1, 2019

Breakthrough of Greater Philadelphia • 34 W. Coulter St, Philadelphia, PA 19144 • 215.261.6705

info@breakthroughphilly.org • www.breakthroughphilly.org • fax: 215.951.2397
Please circle the response that best suits the student in relation to the other students you teach.

<table>
<thead>
<tr>
<th>Supports and encourages peers</th>
<th>Key</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adapts to new challenges</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>Demonstrates humility</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>Embraces honest feedback</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>Open to new ideas and change</td>
<td>1 2 3 4 5</td>
</tr>
</tbody>
</table>

I recommend this student to the BREAKTHROUGH OF GREATER PHILADELPHIA program:

- [ ] with great enthusiasm
- [ ] with confidence
- [ ] with some confidence
- [ ] with reservation
- [ ] I do not recommend

Please comment on your response:
__________________________________________________________
_________________________________________________________________
_________________________________________________________________
_________________________________________________________________

What additional information should we know about this student or family before we make this decision?
__________________________________________________________
_________________________________________________________________
_________________________________________________________________
_________________________________________________________________
8. **Guidance Counselor/Principal Form**

Breakthrough of Greater Philadelphia is a tuition-free, academic enrichment program, which prepares academically motivated, but under-resourced middle-school students to enter and succeed in college-preparatory high school programs and matriculate to a four-year college. Operating under a ten-year model, programming for students and families begins the summer before seventh grade and continues during the school year and throughout high school. Breakthrough also prepares the next generation of educators by recruiting and training outstanding high school and college students to become Breakthrough teachers and encouraging them to pursue careers in education and youth-service.

**STUDENT’S NAME:**

First    Middle    Last

**NAME OF COUNSELOR/PRINCIPAL:**

______________________________

**SCHOOL NAME:**

Please mail this form no later than February 1, 2019 to:

**BREAKTHROUGH OF GREATER PHILADELPHIA**

**ATTN: Student Recruitment**

34 W. Coulter St

Philadelphia, PA 19144

**PLEASE PROVIDE THE FOLLOWING INFORMATION:**

- Is the student eligible and/or do they receive free or reduced lunches?
  - □ yes
  - □ no
  - □ unknown

- Does the student participate in advanced or honors classes?
  - □ yes
  - □ no

- Does the student participate in a Gifted and Talented Program?
  - □ yes
  - □ no

- Does the student have an IEP and/or receive in-school learning support?
  - □ yes
  - □ no

- Does the student have a 504 Plan and/or receive in-school learning support?
  - □ yes
  - □ no

If yes, please explain:

________________________________________________________________________________________________________

________________________________________________________________________________________________________

________________________________________________________________________________________________________

________________________________________________________________________________________________________

Breakthrough students are asked to commit to a ten-year rigorous academic enrichment program that will challenge them to maintain a high standard of excellence. Please comment on this student and family’s ability to commit to such a program.

________________________________________________________________________________________________________

________________________________________________________________________________________________________

________________________________________________________________________________________________________

________________________________________________________________________________________________________

Thank you for your help in this process!

Breakthrough of Greater Philadelphia • 34 W. Coulter St, Philadelphia, PA 19144 • 215.261.6705

info@breakthroughphilly.org • www.breakthroughphilly.org • fax: 215.951.2397