



FREE SUMMER PROGRAM APPLICATION

Instructions:

- Please complete one application per child. Completing this application does not guarantee your child a spot in the program. After applications are reviewed, you will be notified via mail and/or email of our decision.
Submit your application via email at admissions@aimhigh.org, by mail at P.O Box 410715, San Francisco, CA 94141-0715 or apply online at aimhigh.org/apply.

Table with 3 columns: Region, Program Dates, and Site Location. It lists application timelines for various regions like East Bay, San Jose, San Francisco, Napa, North Bay, and Tahoe/Truckee, along with specific school locations for each.

Student Information - Please PRINT clearly.

Form fields for student information including: Student's FIRST Name, Student's LAST Name, Student's Preferred Name, Mailing Address, City, Date of Birth, Primary Phone, Student Cell Phone, Primary Email, Student's Email, Did you attend Aim High last summer?, Have you applied to Aim High before?, Current Grade, and Current School.

**(English)**

**Family Information** – Please **PRINT** clearly.

**First Parent/Guardian**

Full Name: \_\_\_\_\_

Relationship to Child: \_\_\_\_\_

Cell #: \_\_\_\_\_

Parent/Guardian Email: \_\_\_\_\_

Occupation: \_\_\_\_\_

**Second Parent/Guardian**

Full Name: \_\_\_\_\_

Relationship to Child: \_\_\_\_\_

Cell #: \_\_\_\_\_

Parent/Guardian Email: \_\_\_\_\_

Occupation: \_\_\_\_\_

Home Address (if different than student’s mailing address): \_\_\_\_\_

**Demographic Information** – Aim High collects this information to report to funders, and it allows us to offer our program for free. Incomplete applications will not be considered.

(1) Does this student have any siblings who are attending or who **GRADUATED** Aim High?  Yes  No

Sibling’s name(s) \_\_\_\_\_ & Aim High site name: \_\_\_\_\_

(2) Does this student have any relatives applying to Aim High this summer?  Yes  No

If “**yes**,” write their full name, relation, & locations they are applying to: \_\_\_\_\_

(3) Does your child receive services for any of the following?

*If your child receives school-based support through an IEP or 504 plan, please share documents related to the plans at (admissions@aimhigh.org). Once received we will reach out to you to discuss further.*

Unsure  IEP  ELL/ELD  
 No  504 Plan  Newcomer Program

(4) How did you learn about Aim High?

- Aim High Website
- Aim High Billboard
- Canal Alliance
- Community Center
- Crossroads
- First Graduate
- Friend/Relative
- Migrant Ed
- Oakland Reach
- On the Move
- Presentation at my school
- Social Media
- Teacher/Counselor
- The Basic Fund
- The SMART Program
- Other (please specify) \_\_\_\_\_

(5) What is the highest level of education achieved by a parent or guardian of this student?

- Middle school or before
- Some high school
- High school graduate
- Some college
- College graduate
- Advanced Degree (Masters, PhD, etc.)

(6) Are any of this student’s older siblings **CURRENTLY** attending college?  Yes  No

(7) Have any of this student’s older siblings **GRADUATED** from college?  Yes  No

(8) Does your child receive OR qualify for free or reduced lunch at their school?  Yes  No  Unsure

(9) Please indicate your family’s **primary** language spoken in your home:

- ASL
- Amharic
- Arabic
- Chinese – Cantonese
- Chinese – Mandarin
- English
- Hindi
- Korean
- Mam
- Spanish
- Tagalog
- Tygrinya
- Urdu
- Vietnamese
- Yoruba
- Other (specify): \_\_\_\_\_

**(English)**

(10) Using the categories listed below; specify the ethnic background of this student.

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Black/African American      | <input type="checkbox"/> Asian – Khmer/Cambodia                     | <input type="checkbox"/> Native American                          |
| <input type="checkbox"/> Other Black (specify below) | <input type="checkbox"/> Asian – Other (specify below)              | <input type="checkbox"/> Native Alaskan                           |
| <input type="checkbox"/> Asian – Chinese             | <input type="checkbox"/> Hispanic/Latino – Mexican/Mexican American | <input type="checkbox"/> Pacific Islander – Guamanian             |
| <input type="checkbox"/> Asian – Filipino            | <input type="checkbox"/> Hispanic/Latino – Central American         | <input type="checkbox"/> Pacific Islander – Hawaiian              |
| <input type="checkbox"/> Asian – Indian              | <input type="checkbox"/> Hispanic/Latino – South American           | <input type="checkbox"/> Pacific Islander – Tongan                |
| <input type="checkbox"/> Asian – Japanese            | <input type="checkbox"/> Hispanic/Latino – Caribbean                | <input type="checkbox"/> Pacific Islander – Samoan                |
| <input type="checkbox"/> Asian – Korean              | <input type="checkbox"/> Hispanic/Latino – Other (specify in other) | <input type="checkbox"/> Pacific Islander – Other (specify below) |
| <input type="checkbox"/> Asian – Laotian             | <input type="checkbox"/> Middle Eastern – Arab                      | <input type="checkbox"/> White (non-Hispanic)                     |
| <input type="checkbox"/> Asian – Thai                | <input type="checkbox"/> Middle Eastern – Iranian                   | <input type="checkbox"/> Two or More Races                        |
| <input type="checkbox"/> Asian – Vietnamese          | <input type="checkbox"/> Middle Eastern – Other (specify in other)  | <input type="checkbox"/> Other (specify below)                    |

Specify other: \_\_\_\_\_

(11) Please select your household income range to the best of your ability based on your 2024 tax returns.

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|--|--|--|--|---|
| <input type="checkbox"/> <\$15,000           | <input type="checkbox"/> \$30,000 – \$34,999 | <input type="checkbox"/> \$50,000 – \$59,999 | <input type="checkbox"/> \$90,000 – \$99,999   | <input type="checkbox"/> \$140,000 – \$159,999  |
| <input type="checkbox"/> \$15,000 – \$19,999 | <input type="checkbox"/> \$35,000 – \$39,999 | <input type="checkbox"/> \$60,000 – \$69,999 | <input type="checkbox"/> \$100,000 – \$119,999 | <input type="checkbox"/> \$160,000 – \$179,999  |
| <input type="checkbox"/> \$20,000 – \$24,999 | <input type="checkbox"/> \$40,000 – \$44,999 | <input type="checkbox"/> \$70,000 – \$79,999 | <input type="checkbox"/> \$120,000 – \$139,999 | <input type="checkbox"/> \$180,000 – \$200,000  |
| <input type="checkbox"/> \$25,000 – \$29,999 | <input type="checkbox"/> \$45,000 – \$49,999 | <input type="checkbox"/> \$80,000 – \$89,999 | <input type="checkbox"/> \$140,000 – \$159,999 | <input type="checkbox"/> Greater than \$200,000 |

(12) How many people (adults AND children) live in the household, including the applicant?

- 2    3    4    5    6    7    8    9    10    More than 10, specify: \_\_\_\_\_

**Parent/Guardian (or School Counselor) Short Answer Questions** – Please **PRINT** clearly.

(1) Please tell us anything that would help us better understand any academic and/or social emotional needs your child might have.

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(2) Please list and explain any summertime schedule conflicts (or write “none”):

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(3) Is there information you would like our staff to know before your child attends Aim High this summer?

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**Student Short Answer Questions – (Optional)** So that we can get to know you a little better, please answer the following questions. Please write **2–3 sentences** for each question and **PRINT** clearly.

(1) What will you be doing this summer if you did not go to Aim High?

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(2) What would you change in the world if you could? Why?

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**Student Support**

Guided by our CORE values Community, Opportunity, Respect and High Expectations, we aim to create an inclusive and supportive learning environment where every student can thrive. Our team will review any provided material and inform site leaders and site staff about accommodations needed for the purpose of creating an accessible, high-quality environment for all students.

Please note that Aim High is not equipped with a full SPED department at our summer program locations and is unable to provide 1:1 full day support for students at this time.

If you have questions or would like to discuss what support your child is currently receiving to determine if Aim High is the best fit summer program for your child please contact us at 415-551-2301 or admissions@aimhigh.org.

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**Aim High Cell Phone and Medication Policies**

**Cell Phone Policy - Away for the Day**

**Policy**  
Cell phones, headphones/earbuds, portable video games and other electronic devices may not be used while on campus. These devices must remain in the student's backpack or bag and **TURNED OFF** while at Aim High until the end of the closing circle/assembly. This policy is in effect throughout the Aim High day including lunch, recess and any other open time. Devices may only be used after the day ends while waiting for pick-up. Teachers may grant permission for educational use during class. (ie - kahoot, research, etc).

**On Campus Recording**  
Students may not use any personal electronic devices at Aim High to take pictures, film, or video of students or staff (including teachers, administration or staff) or otherwise infringe on the privacy rights of others, without the prior written consent of the student or staff person and permission from the Site Directors. Aim High will provide classes with cameras, voice recorders or other recording devices to use for instructional or promotional use only.

**Pre-Approved Necessity**  
Use of Electronic Devices for health reasons is permitted, if a parent, guardian, or caregiver of the child provides a written note from a licensed physician or surgeon indicating that such a device is essential for the health of the student.

- Failure** to follow these guidelines will result in the following:
- **1st Instance:** Student must hand over the device to the Staff member and student may pick it up from the Site Directors at the end of the day. (Staff members to call Site Directors to collect the device).
  - **2nd Instance:** Student must hand over the device to the staff member and a parent or guardian must pick it up from the Site Directors.
  - **3rd Instance:** Student must hand over the device to the staff member and a parent or guardian must have a meeting with the Site Directors to determine next steps.

**After 3 instances** the student may risk losing their spot at Aim High for the remainder of the summer with the option to return next summer following re-entry procedures.

Please sign to acknowledge Aim High's Cell Phone Policy.

**Parent signature:** \_\_\_\_\_

**Medication Policy**  
Aim High does not employ a nurse, health director or any other health administrator. As such, Aim High is not permitted to store/carry medication or administer any treatment or medication other than general first aid or CPR. If an Aim High student needs to take prescription medication during Aim High school hours, the student must adhere to the following guidelines:

Life-saving medication (EpiPen, inhaler, insulin, etc.) is permitted and must stay under the control of the student at all times. The student must be able to self-administer these medications. Aim High staff can provide assistance if necessary. Before the first day of program, the student's parent(s)/guardian(s) must inform Aim High and provide a written note stating that the student will be bringing in and taking medication during program hours and indicating if the student will need assistance. The medication requires a written note from the student's doctor that states: the medication, the dosage, and the period of time during which the medication is to be taken. Students should not bring any unapproved medications including Over-the-Counter (OTC) medications to Aim High. The Site Directors will keep a written record and will also inform the Regional Program Manager. The safety of all of our students is our first directive which is why we ask that every member of the Aim High community strictly adhere to these guidelines.

Please sign to acknowledge Aim High's medication policy.

**Parent signature:** \_\_\_\_\_

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**Medical Information**

Please list any medical information we should know: \_\_\_\_\_

**(English)**

**Emergency Contact Information**

Please list the first two adults who should be contacted in case of emergency.

Contact 1 Name:

Contact 1 Phone:

Contact 2 Name:

Contact 2 Phone:

**Aim High Permission Statement and Waiver/Release of Liability**

Please read and sign the permission statement below.

I hereby give permission for my child to participate in the activities of Aim High and am in support of my child's participation. My child plans to participate in every day of Aim High. I understand attending all weeks of the program is expected. I will also attend the required Family Orientation which will be held the week before the start of the program. My child has permission to go off campus for field trips and other activities sponsored by Aim High during the summer program, as well as, optional events during the school year. As parent or guardian, I understand that participation in Aim High involves certain inherent risks of injury, despite all safety precautions taken by Aim High. Therefore, I will assume all risks, injury or illness, for my child that may occur during participation in any activities or use of facilities associated with Aim High. An authorized representative of Aim High has my permission to seek emergency medical treatment for my child if necessary. Aim High and its agents have permission to share videos, pictures, and work created and/or submitted by Aim High students, staff and vendors for Aim High promotional materials, newsletters, news stories, social media and the Aim High website or to be shared with funders and Aim High partners over time. As parent or guardian, Aim High has permission to access, use and share my child's academic behavioral records, including grades, attendance, social emotional learning survey data, course placement and test scores and number of suspensions and expulsions to support learning over time. Aim High will only share individual information with schools and organizations that also have permission to access My child's data. Other organizations will only see summaries. I also understand that my child will complete surveys at the beginning and end of the program for the organization to learn about student attitudes about school and learning and to find out what their perspectives and views are about Aim High.

**Assumption of Risk and Waiver of Liability Relating to COVID and any other communicable disease.**

I understand that COVID and any other communicable disease is extremely contagious and has been declared a worldwide pandemic by the World Health Organization. I understand that by participating in Aim High and utilizing the facilities associated with them, my child may knowingly or unknowingly transmit the virus to family, friends, classmates, and/or others my child may come into contact with. This may include young children, elderly persons, and/or those with pre-existing conditions that place them at higher risk for the virus. The risk of exposure also exists during field trips outside of the Aim High campus. I understand that while every attempt is made to minimize chances of exposure, there are no guarantees that can be made.

I agree to do my part to limit the exposure to and/or transmission of COVID and any other communicable disease by keeping my child at home if they are sick or experience symptoms related to COVID and any other communicable disease. I will report any possible COVID and any other communicable disease exposure or symptoms to the Site Director(s). If deemed necessary, the Site Director(s) will report to the Aim High Central Office staff in order to notify students and staff and to perform contact tracing.

**Participation Waiver and Release of Liability**

I voluntarily agree to assume all risks and accept sole responsibility for any injury and/or illness for my child. I hereby release, covenant not to sue, discharge, and hold harmless Aim High, their officers, officials, agents, volunteers, employees, other participants, sponsoring agencies, sponsors, advertisers ("Releasees"), with respect to any and all injury, illness, disability, loss or damage to person or property, expenses, and/or death arising out of or relating to participation in any and all activities, events and exposures, including contracting COVID or any other communicable disease, which occurs prior to, during or after my participation. I understand this release includes any claims based on the actions, omissions, or negligence of the Releasees, and whether a COVID and any other communicable disease infection occurs before, during or after participation.

The terms hereof shall serve as a release and assumption of risk for my heirs, estate, executor, administrator, assignees, and all members of my family.

At Aim High we strive to create an inclusive environment where staff and students feel they are part of something special and can be their true selves. Aim High has worked to implement restorative practices as a way to prevent as well as respond to conflict, harm and wrong-doing. Our behavior expectations and interventions are rooted in these practices. We uphold everyone to our CORE values of Community, Opportunity, Respect, and High Expectations. Aim High is committed to providing a multi-summer learning experience for students beginning in 5th grade through 8th grade. Students are expected to attend consecutive summers throughout middle school which demonstrates high school readiness and self-confidence to reach their full potential in high school and beyond.

We ask that students commit to the following community norms:

- Participate to the best of your ability in all classes and activities during the five weeks of program.
- Reach out and ask for help from Aim High teachers and staff, we want students to advocate for themselves throughout the program.
- Practice respect toward all students and teachers and commit to all class and community norms set during the program.

We ask that parents/guardians commit to the following community norms:

- Encourage your child to participate fully in all classes and activities.
- Reach out and ask for help from Aim High teachers/staff with any questions so that we may support you as best we can.
- Support your student to attend Aim High every day of the five week program.

**Both the student and parent/guardian sign below:**

Student Name: \_\_\_\_\_ Student Signature: \_\_\_\_\_

Guardian Name: \_\_\_\_\_ Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_