



Office Use Only  
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## Journey School of Choice - Student Application

Name: \_\_\_\_\_ Today's Date \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Target Graduation Date: \_\_\_\_\_

Last School Attended: \_\_\_\_\_ Referred by: \_\_\_\_\_

### Parent/Guardian Information

Name #1: \_\_\_\_\_ Name #2: \_\_\_\_\_

Relationship: \_\_\_\_\_ Relationship: \_\_\_\_\_

**\*Submit a reference letter from two teachers that you have had this school year, or if it is a summer application, teachers that you had the year you just completed.**

**\*Please submit answers to the following questions in complete sentences and on a separate sheet of paper.**

1. Why do you want to attend the school of choice?
2. What do you see as your role as a student at the school of choice, (i.e., leadership, positive attitude, work ethic, etc.)?
3. What are your biggest obstacles to overcome to be a successful student?
4. What changes do you need to make to overcome these obstacles?
5. What are your plans for the future after you earn your diploma?

Student signature: \_\_\_\_\_ Date: \_\_\_\_\_

Return to: **Journey School of Choice, Attn: Mrs. Rena Duewel**  
2540 Junction Road, Kansas City, Kansas 66106  
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duewelr@turnerusd202.org