

# IB Application

Student Name: \_\_\_\_\_ Student ID: \_\_\_\_\_

Parent Name: \_\_\_\_\_

Parent Email: \_\_\_\_\_ Parent Phone: \_\_\_\_\_

Preferred correspondence language: \_\_\_\_\_

## **Why do you want to be in IB?**

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## **What are your career goals? What do you want to change in the world?**

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## **What extracurricular activities are you involved in and what is the schedule for those activities?**

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Over Please.

Student Name: \_\_\_\_\_ Student ID: \_\_\_\_\_

What are the preferred days and times for your parent to have a meeting about your IB applications? Please indicate your 5 top preferred meeting days and times with an **X**. It is important to start each meeting on time. Please choose a time that will work for you. Thank you.

	<b>Monday</b>	<b>Tuesday</b>	<b>Wednesday</b>	<b>Thursday</b>	<b>Friday</b>
11:30-11:45					
11:45-12:00					
1:00-1:15					
1:15-1:30					
1:30-1:45					
1:45-2:00					
2:00-2:15					
2:15-2:30					
2:30-2:45					
2:45-3:00					
3:00-3:15					
3:15-3:30					
3:45-4:00					

Please have this form with your **transcript attached** return them to Mr. Colera.

You will need to have two teacher recommendations. Please use the IB recommendation form.