

Sponsored by the Virginia Department of Education
Richmond, Virginia

**APPLICATION PACKET
2010 GOVERNOR'S LATIN ACADEMY**

<http://www.doe.virginia.gov/VDOE/Instruction/Language/GAindex.html>

READ CAREFULLY

The 2010 student application has been revised from previous years, and the school submission process has changed since 2007. Please read the 2010 *Guide for Students and Parents/Guardians* or 2010 *Guide for School Personnel* before proceeding. These and all materials relating to the Academies are available from the Web site above.

Included in the *Guide for Students and Parents/Guardians*:

- Timeline for Submission of Application Documents
- Introduction
- Academic Programs and Dates
- Program Descriptions
- Nomination Criteria for Applicants
- Student Selection Process
- Standards of Conduct
- Frequently Asked Questions
- Helpful Hints

Included in the *Guide for School Personnel*:

- Academic Programs and Dates
- Timeline for Submission of Application Documents
- Dissemination of Information
- Criteria for Eligibility
- Schools' Selection Process
- Testing
- Schools' Nominee Submission Process
- VDOE's Selection Process
- VDOE's Notification Process
- Payment Process

Directions for assembling and mailing the student applications are detailed on page 3 of this application packet, as well as in the *Guide for School Personnel*, referenced above. **All materials must be assembled in the order indicated on the checklist and must be postmarked by 5 p.m. on Friday, January 22, 2010. Submit original completed applications to the appropriate address below:**

U.S. MAIL

Helen Small
Specialist for Foreign Languages
Virginia Department of Education
P.O. Box 2120
Richmond, Virginia 23218-2120

FEDEX/UPS

Helen Small
Specialist for Foreign Languages
Virginia Department of Education
James Monroe Building – 23rd Floor
101 North Fourteenth Street
Richmond, Virginia 23219

(Schools shipping applications by a carrier other than U.S. mail must use the street address.)

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**APPLICATION PACKET
2010 GOVERNOR'S LATIN ACADEMY**

<http://www.doe.virginia.gov/VDOE/Instruction/Language/GAindex.html>

1. Copies of this application are available only from the Department of Education's Web site. The following two versions of the application are available at <http://www.doe.virginia.gov/VDOE/Instruction/Language/GAdates.html#Applications>:
 - A form-protected Word file that can be downloaded and completed using Microsoft Word
 - A .pdf file that can be printed and completed by hand
2. **Please note that applications do not include the necessary materials for preparing (1) the Latin grammar test and (2) the essay.** Parents/guardians and students may not request the test and essay topics. The foreign language department chairperson for each school may obtain an order form for these items on the Internet at <http://www.doe.virginia.gov/VDOE/Instruction/Language/order.doc> and should **order testing materials by December 15, 2009.**
3. Please do not use staples to assemble the application packet.
4. Submit only the original application, one original transcript, the grammar test, the original essay, and one copy of the essay.
5. To assist with more efficient data entry, please transfer certain information from various parts of the application to the COVER SHEET (Page 5).
6. Funding for the Governor's Foreign Language Academies will be shared between the local school division or the private school and the Virginia Department of Education. In order for your superintendent or headmaster to plan appropriately, please report the names of Academy applicants to the **local gifted administrator** or designee who handles funding for this program as soon as they are determined and no later than January 14, 2010.
7. The availability of the 2010 Governor's Foreign Language Academies – in part or *in toto* – is dependent on available funding.

Application Deadline: January 22, 2010

The Virginia Department of Education does not discriminate on the basis of race, sex, color, national origin, religion, sexual orientation, age, political affiliation, veteran status, or against otherwise qualified persons with disabilities in its programs and activities. The following position has been designated to handle inquiries regarding the Department's non-discrimination policies: Superintendent of Public Instruction, Virginia Department of Education, P.O. Box 2120, Richmond, VA 23218-2120, (804) 225-2023.

For further information on Federal nondiscrimination regulations, contact the Office for Civil Rights at OCR.DC@ed.gov or call 1 (800) 421-3481.

You may view Executive Order 1 (2006), (http://www.governor.virginia.gov/initiatives/ExecutiveOrders/2006/EO_1.cfm), which specifically prohibits discrimination on the basis of race, sex, color, national origin, religion, sexual orientation, age, political affiliation, or against otherwise qualified persons with disabilities. The policy permits appropriate employment preferences for veterans and specifically prohibits discrimination against veterans. You may obtain additional information at the Commonwealth of Virginia's official Web site (<http://www.virginia.gov/cmsportal2>) concerning this equal opportunity policy.

Application assembly and submission

All completed application forms and supporting materials must be postmarked by **Friday, January 22, 2010**, to be considered. No exceptions will be made. The individual at the school responsible for assembly and mailing should return the application to:

U.S. MAIL

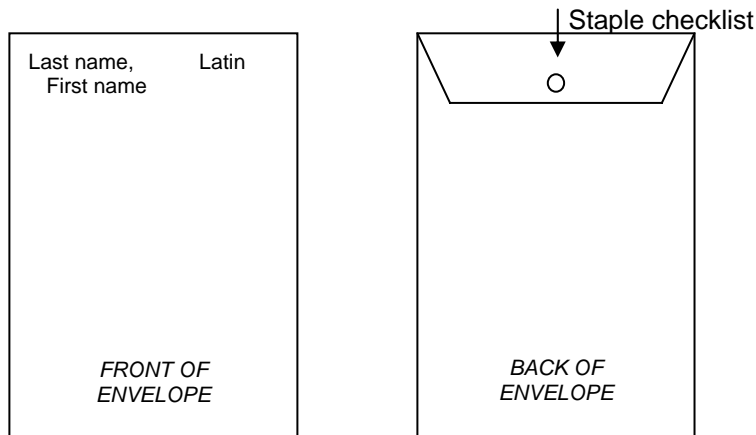
Helen Small
Specialist for Foreign Languages
Virginia Department of Education
P.O. Box 2120
Richmond, Virginia 23218-2120

FEDEX/UPS

Helen Small
Specialist for Foreign Languages
Virginia Department of Education
James Monroe Building – 23rd Floor
101 North Fourteenth Street
Richmond, Virginia 23219

Instructions for Assembly of Applications

- Use a separate manila envelope (approximately 9" x 12") for each student.
- Neatly label the **FRONT** of the envelope with a black marker as indicated below (see diagram):
 - Student's name (last name, first name) in the **UPPER LEFT HAND CORNER**
 - Language academy to which the student is applying in the **UPPER RIGHT HAND CORNER**
- Place **ALL** materials for that student into the envelope, except for the checklist.
 - Keep the checklist separate and use it to ensure that the application packet is complete.
 - Include all documents on the checklist (in order), including the cover sheet, transcript, sealed envelopes containing the grammar test and compositions, and optional reply card, as appropriate.
 - Do not use staples to keep any pages of the application together.
- Staple the checklist to the **BACK** of the sealed envelope as indicated below:



- Repeat the above process for each student.
- Place the labeled manila envelope(s) containing the assembled application(s) into a separate mailing envelope or box.
 - Please stack applications neatly and do not fold applications.
 - Address and seal the mailing envelope or box.
- Mail or hand-deliver to the address above.

It is recommended that schools keep a copy of each student application (except testing materials) on file until the close of the Academies.

CHECKLIST 2010 Governor's Latin Academy

NOTE: The individual responsible for assembling and submitting all materials must enclose the cover sheet and this checklist for each student nominated. Incomplete nomination packets will not be considered.

Please use this checklist while *assembling the application packet* to ensure that a complete application is submitted. Staple the checklist to the outside back of the manila envelope holding the individual student's application materials. Public schools should keep a copy of the cover sheet for data entry later. Please refer to the *Guide for School Personnel* for additional details and instructions.

Enclosed in this packet are:

- A stamped and self-addressed acknowledgement postcard (optional)
- This checklist
- Cover sheet – [page 5](#) completed (attention to the following)
 - Number of points in designated areas for teacher recommendations entered
- ONE original application (please do not use staples to assemble) that includes:
 - Student section – [pages 6-9](#) + up to 4 pages of response from the student
 - Parent's or Guardian's Form – [pages 10-11](#)
 - Current or Most Recent Language Teacher's Form – [pages 12-13](#) + pages of response from language teacher
 - Second Teacher's/Counselor's/Sponsor's, etc., Form – [pages 14-15](#) + pages of response from second recommendation
 - Principal's or Headmaster's Form – [page 16](#)
- All of the above forms have requested original signatures on pages 7, 11, 13, 15, and 16 (actual page numbers may vary, depending on the amount of text entered)
- Student's transcript
- Sealed envelope (A) containing:
 - Grammar test
 - Completed and signed answer sheet for grammar test
 - Signed proctor grammar test instruction sheet
- Sealed envelope (B) containing:
 - Original essay
 - One Xeroxed copy of essay
 - Signed student and proctor essay instruction sheets
- Applicant's name has been reported to the local gifted education administrator and foreign language supervisor or contact person
- Please list name(s) and contact information for the following people:

Please complete	Gifted education administrator or contact person for school division: Phone number: () - ext.
	Foreign language supervisor or contact person for school division: Phone number: () - ext.
	Nominating teacher: Phone number: () - ext. E-mail:
	Person responsible for packaging/mailing: Phone number: () - ext.

2010 GOVERNOR'S LATIN ACADEMY

STUDENT'S APPLICATION FORM

Page 1

- Notes:**
1. Read the *Guide for Students and Parents/Guardians* and the entire packet before proceeding. The guide and all necessary application materials are available at <http://www.doe.virginia.gov/VDOE/Instruction/Language/GAindex.html>.
 2. Completion of all items is vital to the selection process.
 3. Applications must be postmarked by Friday, January 22, 2010.
 4. PLEASE TYPE OR PRINT CLEARLY. This application can be completed using a form-protected Word file found at the Web site above.
 5. Return this form to the person in the school responsible for the assembly and submission of the nomination materials. Please allow the school ample time to assemble and mail the packets by the deadline.

1. Your name:
(Last, first middle)
2. Name you prefer to be called (for nametag):
3. Name of public school division, if applicable:
4. Name of public or private school:
5. School telephone number, including area code: () -
6. Home mailing address:

7. Street address, if different:

8. Home telephone number, including area code: () -
9. Student's e-mail:
10. Current Grade Level: 10 11
11. Birth Date:
12. Current level of Latin:
13. Have you previously attended a Governor's Summer Residential Program?
 Yes No *If the answer is "yes," you are not eligible to attend another Governor's Academy and should not continue with the application.*
14. Are you applying to another Governor's Summer Residential Program for the summer of 2010?
 Yes No *If the answer is "yes," you are not eligible to apply to multiple Governor's Summer Residential Programs and/or Academies for the same year and should not continue with the application*

STUDENT'S APPLICATION FORM

Page 2

15. Consider very carefully the following questions:
- Can you survive in a highly structured, yet stimulating and challenging environment with rules and expectations governing your behavior? Yes No
 - Can you survive for three weeks knowing that you will have no telephone, e-mail or personal contact with family or friends? Yes No
 - Are you willing to take risks with your language skills in learning another language? Yes No
16. Please submit two reference forms – one from your current or most recent Latin teacher and a second from another teacher or counselor who is **not** a foreign language teacher but who knows you and your work. The forms are a part of this packet.
17. Under the supervision of a faculty or staff member **who is not a Latin teacher and has not studied Latin**, prepare a handwritten essay on the indicated topics in ink, and take a written grammar test using a #2 pencil. Information about providing testing accommodations is available in the *Guide for Students and Parents/Guardians* and the *Guide for School Personnel*. Instructions will be given to you in a sealed envelope for each of these activities, which are to be completed during a single two-hour block of time. Take several pens, #2 pencils, and sheets of lined notebook paper, but **no** dictionary, reference materials, etc.

Do not have your essay proofread or corrected by your teacher or anyone else. It must be your own work. **Please write your name on the upper right-hand corner of each page of the essay.** If it is determined that you have received assistance, you will not be considered for admission to the Academy.

18. Read and sign the statement below:

If selected, I will abide by all rules and expectations of the Academy, and I will be present at all times from the opening ceremony until the final event scheduled on the last day of the Academy. I am aware that this is an academic program, NOT a camp, and am willing to work to improve my language skills in challenging and fun activities.

I understand that I may be dismissed for misconduct, including unauthorized use or possession of a telephone. Misconduct leading to dismissal will be reported to my school and may result in additional disciplinary action by my school division.

I certify that the information on this form is accurate and that I have received no assistance in the preparation of the essay or completion of the grammar test. I further certify that I have read and understand all the information contained in the *Guide for Students and Parents/Guardians*.

Date: _____ Signature of Applicant: _____

STUDENT'S APPLICATION FORM
Page 3

Please answer fully questions 19-32. You may use the fill-in forms of the Word version of this document, which expand automatically, or answer the questions on your own paper and attach them to this application form. Include your name on the upper right corner of each page. Your responses to all questions *may not exceed a total of four single-spaced typed pages*. Please restate the question in bold type above each response if using your own paper.

19. **What have you liked the most about your study of the Latin language?**
20. **What have you liked the least about your study of the Latin language?**
21. **List hobbies, sports, extracurricular and leisure-time activities, and service projects in which you have participated. Be sure to include current or recent work experience and summer activities.**
22. **List any honors you have received that you feel are relevant to the Academy.**

Questions 23-32 will not impact selection consideration, but will be helpful to the director in planning and organizing the program.

23. **Do you work well with others? Please give specific examples. Explain how you adapt to challenges.**
24. **What topics or kinds of activities would you like to see as a part of the Academy program? If you were planning it, what kinds of things would you include?**
25. **Do you play a musical instrument, sing, dance, play a sport, or have any other particular talent that might be an asset to the Academy activities? Yes? No? If yes, please elaborate.**

(Continued on next page)

STUDENT'S APPLICATION FORM

Page 4

26. **The Academy requires your presence for the entire length of the program, from opening day to closing day. Do you anticipate any other summer activities that might interfere with your uninterrupted attendance for the entire duration of the Academy? Yes? No? If the answer is yes, please explain.**

27. **Are you flexible enough to live in an environment where food choices are very limited? Yes? No?**

28. **Do you have the necessary physical stamina to live on a college campus, which requires extensive movement outdoors among the residence hall, classrooms, dining hall, recreation fields, and other locations throughout the day? Yes? No?**

29. **Have you ever spent an extended period of time (a week or more) away from your family? Yes? No? If the answer is yes, please describe the circumstances.**

30. **If you were to experience homesickness, how would you deal with it?**

31. **Describe your ideal roommate.**

32. **List ten adjectives that you think describe you.**

2010 GOVERNOR'S LATIN ACADEMY

PARENT'S OR GUARDIAN'S FORM
(To be completed by the parent or guardian)
Page 1

- Notes:**
1. Read the *Guide for Students and Parents/Guardians* and the entire packet before proceeding. The guide and all necessary application materials are available at <http://www.doe.virginia.gov/VDOE/Instruction/Language/GAindex.html>.
 2. Applications must be postmarked by Friday, January 22, 2010.
 3. If it is not appropriate to give information for both father and mother, please make appropriate adjustments.
 4. **PLEASE TYPE OR PRINT CLEARLY.** This application can be completed using a form-protected Word file found at the Web site above.
 5. Return this form to the person in the school responsible for the assembly and submission of the nomination materials. Please allow the school ample time to assemble and mail the packets by the deadline.

1. Father's name:

Home mailing address:

Telephone numbers, including area code:

Home: () -

Work: () - ext.

E-mail:

2. Mother's name:

Home mailing address:

Telephone numbers, including area code:

Home: () -

Work: () - ext.

E-mail:

3. City/County in which applicant resides:

4. Please identify a secondary contact, in case it should be necessary to contact you in an emergency and neither of the persons identified above is available.

Name:

Telephone numbers (including area code):

Home: () -

Address:

Work: () - ext.

Relationship to applicant:

PARENT'S OR GUARDIAN'S FORM
Page 2

5. Please read and sign the statement below:

I, the parent (guardian) of _____, permit him/her to be nominated to participate in the 2010 Governor's Latin Academy. If selected, I understand that he or she must be present at all times from the opening ceremony until the end of the closing ceremony on the last day of the Academy. I understand that for public school students, all expenses of room, board, and tuition will be paid by local and state funds. If my child is a private school student, I have confirmed how payment will be made for the local share of the tuition. I also understand that transportation to and from the Academy, an activity fee of \$30, an optional t-shirt fee of \$20, and money for personal expenses must be provided by the participants.

I understand that if selected for the Academy, my son or daughter will live in a dormitory and will abide by the rules and expectations set forth for the Academy, including no leave of absence except in cases of medical and/or family emergency, as described in the *Guide for Students and Parents/Guardians*. I understand that failure to participate in the academic and activity programs or infraction of the rules and expectations, including unauthorized possession or use of a telephone, will be just cause for dismissal, and that I shall be responsible for arranging transportation or for assuming the costs of transportation arranged by the Academy director. I also understand that misconduct leading to dismissal will be reported to my child's school and may result in additional disciplinary action by the school division.

I am aware that this is an academic program, not a camp, and that students must be willing to work to improve their language skills in challenging and fun activities. I understand that security and health services are provided for participants by the host site, as described in the *Guide for Students and Parents/Guardians*. I grant permission for a transcript of my son's or daughter's secondary school record and a copy of the Individualized Education Program (IEP) plan to verify any needed accommodations, if appropriate, to be sent as part of the application packet.

I have evaluated my child's abilities and have determined that he/she has the maturity to participate in the rigorous requirements of the Academy and exercise appropriate judgment when away from home, and can survive a highly structured and challenging environment with rules and expectations governing his/her behavior.

Date: _____ Signature of Parent/Guardian: _____

2010 GOVERNOR'S LATIN ACADEMY

CURRENT OR MOST RECENT LATIN TEACHER'S FORM

Page 1

- Notes:**
1. Read the *Guide for School Personnel* and the complete packet before proceeding. The guide and all necessary application materials are available at <http://www.doe.virginia.gov/VDOE/Instruction/Language/GAindex.html>.
 2. Applications must be postmarked by Friday, January 22, 2010.
 3. Complete all items.
 4. PLEASE TYPE OR PRINT CLEARLY. This application can be completed using a form-protected Word file found at the Web site above.
 5. Return this form to the person in the school responsible for the assembly and submission of the nomination materials. Please allow the school ample time to assemble and mail the packets by the deadline.

Student's name:

School name:

Your name:

Position/Title:

1. Which language course(s) has the student taken with you?
2. Please estimate the extent to which the student demonstrates the qualities listed below by placing an X in the appropriate boxes. Be sure to rate each attribute as accurately as possible. Accurate estimates better enable the faculty to tailor the program to the students' needs.

Attribute	Superior (4 points)	Good (3 points)	Fair (2 points)	Poor (1 point)
Interest in learning the language	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Initiative, self-direction	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Determination to succeed when faced with challenges	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emotional maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to get along with peers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to get along with teachers/adults	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Total Points				

3. Academy students must be adaptable "team players." They may be shy or introverted, but they must not insulate themselves from others all of the time. Are you convinced that this student is sufficiently malleable to enjoy an extended period of group living? Yes No

CURRENT OR MOST RECENT LATIN TEACHER'S FORM

Page 2

4. How would you rank this student among the foreign language students that you have taught?
In the top: 2% 5% 10% 15% 20% below top 20%
5. How many years have you taught Latin?
6. What is the student's current or most recent grade in your Latin class?
7. Students are selected for the Governor's Foreign Language Academies based on a variety of criteria. The degree of success that they experience is directly related to their motivation to excel.

Please write and sign a letter of recommendation using school letterhead. Comment on this student's ability to meet the requirements listed below and cite some examples to support your comments. **Please be sure to focus on the items below.** Include the student's name on the upper right corner of each page.

- Ability to adapt to challenges
- Ability to maintain a positive attitude
- Ability to adapt to living away from home, family and friends
- Ability to adhere to rules and expectations of the program
- Motivation to succeed and desire to learn Latin
- Ability to get along well with other young people and adults in a pleasant but intensive environment

8. Please read and sign the statement below:

I certify that to my knowledge the information provided above is accurate and that I have given this student no assistance in the preparation of either the Latin test or the essay.

Date: _____

Signature: _____

2010 GOVERNOR'S LATIN ACADEMY

SECOND TEACHER'S RECOMMENDATION FORM

(or coach, sponsor, scout leader, etc., but **not** another foreign language teacher)

Page 1

- Notes:**
1. Read the *Guide for School Personnel* and the complete packet before proceeding. The guide and all necessary application materials are available at <http://www.doe.virginia.gov/VDOE/Instruction/Language/GAindex.html>.
 2. Applications must be postmarked by Friday, January 22, 2010.
 3. Complete all items.
 4. PLEASE TYPE OR PRINT CLEARLY. This application can be completed using a form-protected Word file found at the Web site above.
 5. Return this form to the person in the school responsible for the assembly and submission of the nomination materials. Please allow the school ample time to assemble and mail the packets by the deadline.

Student's name:

School name:

Your name:

Position/Title:

1. Please estimate the extent to which the student demonstrates the qualities listed below. Be sure to rate each attribute as accurately as possible. Accurate estimates better enable the faculty to tailor the program to the students' needs.

Attribute	Superior (4 points)	Good (3 points)	Fair (2 points)	Poor (1 point)
Initiative, self-direction	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Determination to succeed when faced with challenges	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emotional maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to get along with peers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to get along with teachers/adults	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Total Points				<input style="width: 50px; height: 20px;" type="text"/>

2. Academy students must be adaptable "team players." They may be shy or introverted, but they must not insulate themselves from others all of the time. Are you convinced that this student is sufficiently malleable to enjoy an extended period of group living? Yes No
3. In what way(s) have you worked with this student?

SECOND TEACHER'S RECOMMENDATION FORM
Page 2

4. Students are selected for the Governor's Foreign Language Academies based on a variety of criteria. The degree of success that they experience is directly related to their motivation to excel.

Please write and sign a letter of recommendation using school letterhead. Comment on this student's ability to meet the requirements listed below and cite some examples to support your comments. **Please be sure to focus on the items below.** Include the student's name on the upper right corner of each page.

- Ability to adapt to challenges
- Ability to maintain a positive attitude
- Ability to adapt to living away from home, family and friends
- Ability to adhere to rules and expectations of the program
- Motivation to succeed and desire to learn
- Ability to get along well with other young people and adults in a pleasant but intensive environment

5. Please read and sign the statement below:

I certify that to my knowledge the information provided above is accurate, and that I am not this student's foreign language teacher. I have given this student no assistance in the preparation of either the Latin grammar test or the essay.

Date: _____ **Signature:** _____

**2010 GOVERNOR'S LATIN ACADEMY
PRINCIPAL'S OR HEADMASTER'S FORM**

- Notes:**
1. Read the *Guide for School Personnel* and the complete packet before proceeding. The guide and all necessary application materials are available at <http://www.doe.virginia.gov/VDOE/Instruction/Language/GAindex.html>.
 2. Applications must be postmarked by Friday, January 22, 2010.
 3. Complete all items.
 4. PLEASE TYPE OR PRINT CLEARLY. This application can be completed using a form-protected Word file found at the Web site above.
 5. Return this form to the person in the school responsible for the assembly and submission of the nomination materials. Please allow the school ample time to assemble and mail the packets by the deadline.

Student's name:

Principal's or headmaster's name:

School name:

1. Applicant's actual or estimated rank in class:
 top 2% top 4% top 6% top 10% below top 10%
2. **IMPORTANT!** Attach a legible transcript of the applicant's high school record and a copy of the Individualized Education Program (IEP) plan to verify any needed accommodations, if appropriate.
3. List the names and positions of local school selection committee members, if there was one.
4. Do you have any comments about this student's strengths and weaknesses that you think would be helpful to the selection committee in evaluating his/her application?

Certification Statement

I hereby certify that _____ is qualified and is genuinely interested in attending the Governor's Latin Academy. I thereby recommend this applicant for consideration as a participant in the Academy.

Date

Signature of Principal/Headmaster or Designee

Printed Name and Title