Bell County Alternative School
"Academic" Alternative Educational Program (AAEP)
Admission Process and Checklist

1. **The home campus designee shall call Jana Warren about the student's pending AAEP placement.**
   a. Principal and/or Counselor of the referring district will call Mrs. Warren first.
   b. Once the placement is approved by BCAS and the home campus:
      i. The home campus will provide a "Parent/Student AAEP Orientation Packet" to the parent/student.
      ii. Encourage the parent to bring the completed packet to the Placement Orientation.
      iii. The parent/guardian of the student will call Mrs. Warren for orientation meeting date and time. AAEP students DO NOT attend pre-scheduled Discipline Orientations.
      iv. The student and parent/guardian must be present at the "Placement Orientation" meeting before a student can be enrolled in the AAEP.
2. Scan & email, or transport the following Required Information for AAEP Placement: jana.warren@academyisd.net
   a. AAEP Placement Check Sheet (page 2 of 4)
   b. Student's Class Schedule (or page 4 of 4 that is provided)
   c. Copy of Student's Official Transcript
   d. Student's Current Grades
   e. Student's STAAR Scores
   f. Copy of Medical Action Plan (or N/A)
   g. Copies of the student's "Special Services" (or N/A):
      i. Classroom Accommodation Sheet
      ii. Behavior intervention plan (BIP)
      iii. Psychological
      iv. STAAR modifications/accommodations
   h. Copy of the (Snapshot) "PEIMS Eligibility Statement" (Free, Reduced, or Regular Price meals).
   i. The student will not be allowed to attend BCAS until all paperwork is completed and received.

The student's start date will be the school day of the placement orientation if he/she is in dress code and all paperwork is completed.

Academic (AAEP) Placement Check Sheet for Bell County Alternative School

_____   _____   _____   _____
Student's Name   Social Security #   Home School / District   Grade

Home Campus Data Check Boxes :

❏ "Academic" AEP Start Date:

    ❏ _____

❏ Student Class Schedule

❏ Student Transcript

❏ Student's Current Grades

❏ Student's STAAR scores

❏ Copy of Medical
    ❏ Action Plan or ___NA
    ❏ Medication or ___NA

❏ Special Services
    ❏ ___Sp. Ed. ___504 ___ESL
    ❏ ___NA

❏ Copy of Special Services or ___NA
    ❏ Classroom Accommodations
    ❏ BIP
    ❏ Psychological
    ❏ STAAR Accommodations

❏ Copy of PEIMS Snapshot of Student

    Eligibility –
    ❏ Free
    ❏ Reduce Price

❏ Regular Price

Parent and Student information BCAS Check Boxes:

❏ Student Application

❏ Release of Information

❏ Admission / Dismissal & Handbook Acknowledgment

❏ School Calendar and Truancy Information

❏ Medicine Consent Form

❏ Food Allergy Information

❏ Counseling (BCAS)

❏ Trespass Warning

❏ Acceptable Use of Technology

❏ Dress Code Check Sheet

Special Instructions:

Updated for 2022-2023 School Year

Student Placement Information

STUDENT NAME: _____   **DOB** ___/___/_____

HOME SCHOOL DISTRICT: _____ **HOME CAMPUS:** _____   **GRADE LEVEL:** _____

REASON FOR ASSIGNMENT: _____

_____

_____

"ACADEMIC" AEP BEGIN DATE: ___/___/_____

HANDICAPPING CONDITIONS: _____ N/A

                              _____ESL

                              _____SPED (type)_____ Date of Manifest _____

                              _____504

                              _____Other _____

PARENT/GUARDIAN NAME: _____

2nd PARENT/GUARDIAN NAME: _____

    PARENT PHONE: _____-_____-_____   2nd PARENT PHONE: _____-_____-_____

PARENT WK PHONE: _____-_____-_____   2nd PARENT WK PHONE: _____-_____-_____

SCAN and EMAIL All DOCUMENTS Prior to the parent calling Mrs. Warren to schedule an AEP orientation meeting.

Reminder: NO STUDENT ENROLLMENT PRIOR to ALL PAPERWORK ARRIVING at BCAS.

Updated for 2022-2023 School Year

Student Name: _____ S.S.# _____-___-_____

Date of Birth: ___/___/_____ Grade Level: ___ Home School: _____

Academic Educational Placement **(AAEP)**

Start Date of Assignment: ___/___/___

Special Services (circle): **Sp. Ed**., **504**, **ESL**. **Date of placement ARD**; ___/___/___

STAAR Information (Please indicate whether the student will be required to take the STAAR Test this year. If the student has taken the Exit Test previously, please indicate if the areas were mastered.)**:**

To be tested this year	Test Mastery
E.L.A. 1 ___Yes ___No	___Yes ___No ___N/A
E.L.A. 2 ___Yes ___No	___Yes ___No ___N/A
Alg. 1 ___Yes ___No	___Yes ___No ___N/A
Bio. ___Yes ___No	___Yes ___No ___N/A
US Hist. ___Yes ___No	___Yes ___No ___N/A

STUDENT'S COURSE ASSIGNMENTS:

	COURSE	SEM NEEDED	FORM of INSTRUCTION/GRADE
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____
6.	_____	_____	_____
7.	_____	_____	_____

This student is on the (circle one) **Minimum**, **Recommended**, **Distinguished**, or **Foundation** Graduation Plan.

Always include a copy of the student's most recent **transcript** and **STAAR results**.

_____ Date: ___/___/_____

Signature of the Coordinator