



Odyssey Academy

5th Odyssey 6th Odyssey 7th Odyssey 8th Odyssey

(Please check the level for which you are applying.)

Part I - Student Information

Last Name: _____ First Name: _____ MI: _____

Student ID # _____ Current Grade: _____ Date of Birth: _____

Home Address: _____

City: _____ Zip Code: _____

Intermediate School Attendance Zone*: Jane Long Sam Rayburn

Middle School Attendance Zone*: SFA Davila

Why do you wish to attend the Odyssey Academy?

What are your academic areas of strength and how will they help you as an Odyssey student?

Part II – Parent/Guardian Information

Name: _____ Relationship to Student: _____

Phone 1: _____ Phone 2: _____

Email address: _____

What would you like to see as an outcome of your child's participation in the Odyssey Academy?

Applications are due by 3pm on March 2, 2018.

*(*Note: Student transfer applications must be submitted online by 5pm on March 9, 2018.)*

transfers.bryanisd.org

Part III – Teacher Recommendations (3)**

- One recommendation from current Math Teacher
- One recommendation from current Science Teacher
- One recommendation from current Social Studies or Language Arts Teacher
- (Give each recommending teacher a ticket attached to the last page.)

Math Teacher: _____ Campus _____

Science Teacher: _____ Campus _____

ELA or SS Teacher: _____ Campus _____ Subject: _____

****The Advanced Academics Office will send recommendation forms to the teachers selected.**

Student Signature _____ Date: _____

Parent Signature: _____ Date: _____

(Note: Student transfer applications must be submitted online by 5pm on March 9, 2018.)

For Office Use Only:

Application Receipt:

Date: _____ Time: _____ Staff: _____

Teacher Recommendations Sent:

Teacher 1- Date: _____ Staff: _____

Teacher 2- Date: _____ Staff: _____

Teacher 3- Date: _____ Staff: _____

Teacher Recommendations Received:

Teacher 1- Date: _____ Staff: _____

Teacher 2- Date: _____ Staff: _____

Teacher 3- Date: _____ Staff: _____

Acceptance into Odyssey Academy: YES NO

Date notified: _____

For those accepted:

Accepted Declined

Acceptance/Decline letter received by:

Staff: _____ Date: _____

Part IV - Tickets to Recommending Teachers

Write your name on each of the strips and give the three teachers listed above the following reference information slips so they can complete an online reference for you. Cut on the dotted lines and hand the slip to your teachers.

Student Name: _____

Thank you for agreeing to submit a recommendation form on behalf of this student. Please complete the recommendation form below by 3pm on Tuesday, March 6th 2018.

<https://tinyurl.com/oarecommendation>

If you have any questions please contact Naveen Cunha at naveen.cunha@bryanisd.org

Student Name: _____

Thank you for agreeing to submit a recommendation form on behalf of this student. Please complete the recommendation form below by 3pm on Tuesday, March 6th 2018.

<https://tinyurl.com/oarecommendation>

If you have any questions please contact Naveen Cunha at naveen.cunha@bryanisd.org

Student Name: _____

Thank you for agreeing to submit a recommendation form on behalf of this student. Please complete the recommendation form below by 3pm on Tuesday, March 6th 2018.

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If you have any questions please contact Naveen Cunha at naveen.cunha@bryanisd.org