2020 STUDENT APPLICATION
DEADLINE DECEMBER 20, 2019

Student Full Name_____________________________________
School________________________________________________


ABOUT US

Breakthrough Greater Boston is a year-round, academic enrichment program for Cambridge students offered at no cost to students and their families. We offer an exciting curriculum and small classes taught by trained college students. Students must apply during sixth grade and make a six-year commitment through middle and high school.

OUR COMMITMENT TO DIVERSITY

Breakthrough Greater Boston increases educational equity by closing opportunity gaps for students and diversifying the teaching force. We strive continually to make Breakthrough a welcoming and inclusive community for people of all identities, backgrounds and beliefs.

MIDDLE SCHOOL PROGRAM

SIX-WEEK SUMMER PROGRAM

Academics

During the summer, students take five classes: Literature, Math, Science, Social Studies, and Writing. Each class is aligned to what students will be learning in the next grade. Students participate in hands-on activities, complete thoughtful homework assignments, and summarize their learning in final projects.

Student Growth in Math and Reading

Most students lose about two months of learning in Math or Reading over the summer. Breakthrough students consistently make gains over the summer.

In Summer 2019, Breakthrough students saw two to three months of growth in Math and Reading in just six weeks.
Special Events
Throughout the summer, Breakthrough hosts several Special Events that add to what students are learning in the classroom. Students are challenged to work together, to think critically, and most of all - to have fun. Here are some examples of our Special Events below:

Math Olympics
The Math Olympics are a series of hands-on, competitive activities designed to reinforce important math skills. Students are challenged to work together and practice their problem-solving skills.

College Challenge Day
On College Challenge Day, students participate in challenges that encourage excitement about college and the college application process. 9th Grade students go on a field trip to visit a local college/university.

Camping Trip
The Camping Trip is a fun opportunity for the Breakthrough community to experience the outdoors, unplug from technology, and learn more about ourselves and each other. During the Camping Trip students enjoy a Talent Show, Scary Stories & S’Mores, and structured team-building activities.

Community Novel
Each summer, Breakthrough staff, teachers, and students join together to read a great novel as a community. Here are some of our previous Community Novels:

• *Shadowshaper* by Daniel José Older
• *57 Bus* by Dashka Slater
• *Patina* by Jason Reynolds
• *Dear Martin* by Nic Stone

SCHOOL YEAR PROGRAM

After School Program
During 7th and 8th grade, Breakthrough Greater Boston students attend our once-a-week After School Program where we offer homework support, hands-on academic workshops, and community building activities.

Advocacy
Throughout the school year, we have frequent communication with families, classroom teachers, and administrators. We are focused on the academic, social, and emotional growth of every student. Each family will have a check-in with Breakthrough staff to share ideas and concerns and set goals.
Additional Academic Support

Breakthrough Greater Boston works directly with students and families to create individual plans to help students who are looking for additional academic support build study skills, get organized, and improve their academic performance. Supports include individual or small group tutoring and connecting with school and neighborhood-based academic resources.

TEACHING FELLOWS

Talented and diverse college and high school students serve as teachers in our Summer Program and After School Program as part of our unique students teaching students model. Teaching fellows receive 500 hours of training and classroom experience in one Breakthrough summer.

Over 70% of our teaching fellow alumni go on to pursue a career in education.

HIGH SCHOOL PROGRAM

Breakthrough has a lot to offer in high school once students complete the Middle School Program, they become a part of our High School Program where they continue to receive academic support.

In 9th and 10th grade, students attend regular programming and explore career interests.

In 11th and 12th grade, students and families will receive support with college and scholarship applications as well as financial aid forms.

Below are some of the colleges and universities our students have matriculated to:

<table>
<thead>
<tr>
<th>Bucknell University</th>
<th>College of the Holy Cross</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hampton University</td>
<td>Northeastern University</td>
</tr>
<tr>
<td>Rochester Institute of Technology</td>
<td>University of Hartford</td>
</tr>
<tr>
<td>University of Massachusetts - Amherst, Boston, and Lowell</td>
<td>Tufts University</td>
</tr>
<tr>
<td>Wellesley College</td>
<td>Yale University</td>
</tr>
</tbody>
</table>
APPLYING TO BREAKTHROUGH

ADMISSIONS TIMELINE

Phase 1 Application Deadline
All applications are due by Friday, December 20. You can turn your application in to the 6th grade team or directly to the Breakthrough office. All sections of the application must be complete in order to be considered for admission.

Phase 2: Student and Family Interviews
Our team will reach out to schedule an interview with you and your child in January and February. Interviews must be complete in order to be considered for admission to Breakthrough.

Phase 3: Admissions Decisions
You will receive a letter from Breakthrough by the end of March notifying you of your admissions status.

HOW TO SUBMIT YOUR APPLICATION
You can submit your application by:

- Giving it to your child’s 6th grade teachers
- Emailing it to Valerie Coimbra, Director of Student Services, vcoimbra@btgbmail.org
- Dropping it off in the Breakthrough office at Cambridge Rindge and Latin School, 459 Broadway, Room 2403/2404

APPLICATION CHECKLIST

☑ General Student and Family Information
  Completed by Parent/Guardian.

☑ Parent/Guardian Information
  Completed by Parent/Guardian.

☑ Student Statement
  Completed by Student.

☐ Academic Release Form
  This form allows Breakthrough to receive grades and other relevant academic information from the school. This form must be signed and submitted in order to be considered for admission.
  Completed online by a member of the 6th grade team. Students are responsible for asking one of their current teachers to complete a recommendation by requesting the online link directly from Valerie.

CONTACT US
Valerie Coimbra, Director of Student Services
email: vcoimbra@btgbmail.org cell: 617-599-9827
**FREQUENTLY ASKED QUESTIONS**

**WHAT HAPPENS DURING OUR PROGRAM?**

During the Summer Program, located at Cambridge Rindge and Latin School, students take five classes: literature, math, social studies, science, and writing. Our social studies courses are electives designed by our teachers. Past examples have included Student Led Revolutions, Immigration in America, and Sports in Society. Every day includes time for fun activities, mentoring, homework help and an assembly called Community Meeting. Students also participate in Special Fridays or field trips every week, from camping in tents to doing a math scavenger hunt. During the After-School Program (also at CRLS), students participate in Science, Technology, Engineering, Arts and Math (STEAM) based workshops, attend field trips, and receive help on their homework.

**WHO IS BREAKTHROUGH LOOKING FOR?**

Breakthrough students want to achieve academically, plan to attend college, and are ready for a challenge! Breakthrough students are motivated, hard-working, positive community members, open to new ideas and experiences, and excited to make new friends. Breakthrough students also have a demonstrated area of need that may be an obstacle on the path to college. If this describes you, you might be a Breakthrough student!

**ARE FOOD AND TRANSPORTATION PROVIDED?**

Breakthrough provides breakfast, snack, and lunch every day during the summer and snacks during the school year. We also provide transportation for all students to and from the summer and after school program.

**WHAT IS THE COMMITMENT?**

Accepted students must make a commitment to the full six-year program. They are required to attend for six weeks during the summers before 7th, 8th and 9th grade, and one afternoon a week of after-school sessions throughout 7th and 8th grade. After completing these requirements, students enter the Breakthrough High School Program, where they receive academic support, connections to enrichment opportunities, and help with college applications.

Applying to Breakthrough is a very competitive process. Our team reviews and considers every part of a student’s application. While you may or may not be admitted, going through the application process will be a valuable experience. Only complete applications will be considered for admission to the program. If you have any questions about the application process, please contact Valerie Coimbra.
GENERAL STUDENT AND FAMILY INFORMATION

Student Full Name_____________________________________________ School__________________
Date of Birth_________________________ Gender________________________
Address__________________________________________________________
Student Cell Phone______________________________ Student Email_______________________

Race (Check all that apply) What is the primary language spoken at home?
☐ Black
☐ White
☐ Multiracial
☐ Latinx
☐ Asian
☐ Decline to Answer
☐ Other_____________________________

Ethnicity (ex: Salvadoran, Bengali, Dominican, etc.) ____________________________

HOUSEHOLD INFORMATION

How many children are currently living in the home with the student? _________________________
How many adults are currently living in the home with the student? __________________________
Does the student have any sibling(s) that have attended Breakthrough or Summerbridge?  
☐ Yes ☐ No
If yes, please write their name________________________________________

Does the student receive free or reduced-price lunch?  
☐ Free ☐ Reduced ☐ Neither

Household Income (Please check one)  
☐ Less than $10,000 ☐ $40,001 to $50,000
☐ $10,000 to $20,000 ☐ $50,001 to $60,000
☐ $20,001 to $30,000 ☐ $60,001 to $70,000
☐ $30,001 to $40,000 ☐ $70,001 and above
PARENT/GUARDIAN INFORMATION #1

Full Name__________________________________________________Gender____________________________________

Relationship to Applicant (Ex: mother, father, grandparent, legal guardian, etc.)
__________________________________________________________________________________________

Parent/guardian lives with the applicant? ☐ Yes ☐ No

Home Phone_________________________________ Cell Phone__________________________________________

Email_____________________________________________________________________________________

Preferred Means of Contact (please check one):
☐ Phone ☐ Email

Address_________________________ Street (please include Apt. #) ________________

City ______________________ State ______ Zip Code ______________________

Race (Check all that apply)
☐ Black
☐ White
☐ Multiracial
☐ Latinx
☐ Asian
☐ Decline to Answer
☐ Other: __________________________

Ethnicity (ex: Ethiopian, Bengali, Dominican, etc.)
____________________________________

Preferred Language for Communication

Verbal Communication (Please check one):
☐ English
☐ Haitian Creole
☐ Portuguese
☐ Spanish
☐ Other: __________________________

Written Communication (Please check one):
☐ English
☐ Haitian Creole
☐ Portuguese
☐ Spanish
☐ Other: __________________________

Highest Level of Education Completed
☐ Grade school
☐ High school or GED
☐ Some college
☐ Associate’s degree
☐ Bachelor’s degree
☐ Master’s degree
☐ Doctoral degree

Other (please specify):________________________

Marital Status
☐ Single
☐ Married
☐ Divorced
☐ Widowed
☐ Partnered
PARENT/GUARDIAN INFORMATION #2

Full Name__________________________________________________Gender__________________________________

Relationship to Applicant (Ex: mother, father, grandparent, legal guardian, etc.) ____________________________________________________________

Parent/guardian lives with the applicant?  Yes   No

Home Phone_________________________________  Cell Phone___________________________________________

Email_____________________________________________________________________________________

Preferred Means of Contact (please check one):

☐ Phone  ☐ Email

Address__________________________________________________________

Street (please include Apt. #)  City  State  Zip Code

Race (Check all that apply)
☐ Black
☐ White
☐ Multiracial
☐ Latinx
☐ Asian
☐ Decline to Answer
☐ Other: __________________________

Ethnicity (ex: Ethiopian, Bengali, Dominican, etc.) ________________________________________________

Preferred Language for Communication

Verbal Communication (Please check one):
☐ English
☐ Haitian Creole
☐ Portuguese
☐ Spanish
☐ Other: __________________________

Written Communication (Please check one):
☐ English
☐ Haitian Creole
☐ Portuguese
☐ Spanish
☐ Other: __________________________

Highest Level of Education Completed

☐ Grade school
☐ High school or GED
☐ Some college
☐ Associate’s degree
☐ Bachelor’s degree
☐ Master’s degree
☐ Doctoral degree

Other (please specify):___________________________

Marital Status

☐ Single
☐ Married
☐ Divorced
☐ Widowed
☐ Partnered
PARENT/GUARDIAN STATEMENT

Name of Parent/Guardian completing this form ______________________________

Please complete the questions below to the best of your ability.

1. Why do you want your child to be part of Breakthrough?
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

2. Why do you feel that your child is a good match for Breakthrough?
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

3. Is your family willing and able to make the full six-year commitment to Breakthrough? Why?
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

4. Are you and your family willing and able to commit to regular communication with Breakthrough staff and attendance at program events? Why?
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

5. Do you foresee any schedule conflicts with our summer or after school program?
   □ Yes
   □ No

If yes, please explain why.
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
6. Please describe any significant stress your child has experienced in their life (for example, the death or serious illness of a parent, guardian, or sibling; the deportation or incarceration of a parent, guardian, or sibling).

________________________________________________________________________________________________

________________________________________________________________________________________________

________________________________________________________________________________________________

________________________________________________________________________________________________

7. Is there anything else you would like us to know about you and/or your child? (Optional)

________________________________________________________________________________________________

________________________________________________________________________________________________

________________________________________________________________________________________________

________________________________________________________________________________________________

By signing below, I signify that I understand that my child’s attendance during the all parts of the program is mandatory. I also understand that my attendance at all scheduled family events is mandatory. I agree to schedule all appointments, family events, trips, and any other activities around these dates to ensure my child’s full participation in the program.

__________________________________________________________

Parent or Legal Guardian Signature

Date
Dear Prospective Breakthrough Student,

Breakthrough is a serious commitment. If you are admitted, you are expected to participate **for all six years of the program.**

This includes...

- Six-week Summer Program during the summers before 7th, 8th and 9th grade
- Once-a-week After School Program during 7th and 8th grade
- Weekly Study Hall during 9th and 10th grade
- College Access Program workshops and meetings in 11th and 12th grade
- Following the Breakthrough Code of Conduct
- Attending all required Breakthrough events

**By signing below, you signify that you understand the expectations Breakthrough has for your participation and agree to do your best to meet them.**

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**Student Signature**

**Date**

**Directions for Completing the Student Statement**

- Complete all questions **independently.** You may brainstorm your answers with a teacher, but all answers must be your own work.
- Write in complete sentences and do your best to **fill in all of the lines** for each question. Breakthrough wants to see your best writing!
- Write this statement clearly in blue or black ink. Please do not use pencil.
- You can type your responses and attach a separate page if you prefer.
- You can attach additional pages if you need more space for your essay.

1. What is your favorite subject in school? Why?

____________________________________________________________________________________________________________

____________________________________________________________________________________________________________

____________________________________________________________________________________________________________

____________________________________________________________________________________________________________

____________________________________________________________________________________________________________
2. What is something that you struggle with or that is challenging for you in school? Why?
____________________________________________________________________________________________________________
____________________________________________________________________________________________________________
____________________________________________________________________________________________________________
____________________________________________________________________________________________________________
____________________________________________________________________________________________________________
____________________________________________________________________________________________________________
3. What is the most interesting thing you have learned about, inside or outside of school, in the last year?
____________________________________________________________________________________________________________
____________________________________________________________________________________________________________
____________________________________________________________________________________________________________
____________________________________________________________________________________________________________
____________________________________________________________________________________________________________
____________________________________________________________________________________________________________
4. What is your favorite book? Why?
____________________________________________________________________________________________________________
____________________________________________________________________________________________________________
____________________________________________________________________________________________________________
____________________________________________________________________________________________________________
____________________________________________________________________________________________________________
____________________________________________________________________________________________________________
5. Describe a time when you did something difficult or outside of your “comfort zone.” What was the outcome? What did you learn from the experience?
____________________________________________________________________________________________________________
____________________________________________________________________________________________________________
____________________________________________________________________________________________________________
____________________________________________________________________________________________________________
____________________________________________________________________________________________________________
____________________________________________________________________________________________________________
____________________________________________________________________________________________________________

6. How much time do you usually spend on homework each night? ________________________________

7. My homework at school is (please check one):
   - [ ] too easy
   - [ ] too hard
   - [ ] just right

8. Breakthrough students take classes and are required to complete up to 2 hours of homework during the summer program. Explain why you are willing to do academic work during the summer.
____________________________________________________________________________________________________________
____________________________________________________________________________________________________________
____________________________________________________________________________________________________________
____________________________________________________________________________________________________________
____________________________________________________________________________________________________________
____________________________________________________________________________________________________________
____________________________________________________________________________________________________________
____________________________________________________________________________________________________________
____________________________________________________________________________________________________________
____________________________________________________________________________________________________________
9. What will you be doing in 15 years? How will a good education help you get there?

__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

10. Breakthrough teachers invent their own Social Studies courses to teach at our summer program. Invent a class that you would like to take at Breakthrough. Come up with a creative title and write a three-sentence description.

Examples from past summers:

- Women’s History
- What is “Fake News”?
- Black Lives Matter in Social Media
- Where Does Food Come From?

Course Title
____________________________________________________________

Description
____________________________________________________________
____________________________________________________________

11. Is there anything else we should know about you? (Optional)

__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
ESSAY

In **3-5 paragraphs**, tell us why you want to come to Breakthrough. Please answer all three of the following questions:

- Why do you want to be a Breakthrough student?
- What are your goals and how will Breakthrough help you achieve them?
- What will be your greatest challenge in attending Breakthrough?

*Remember: This should be your best work! We encourage you to write a first draft or an outline on a different piece of paper and then write your final draft below. You can continue on another piece of lined paper if you need more space.*
ACADEMIC RELEASE FORM

This form is REQUIRED to be considered for admission. Please read carefully and sign below.

Student Full Name ____________________________________________________________

Current School __________________________________________________________________

I hereby give my permission for my child to participate in all activities of Breakthrough Greater Boston, and I agree to support the administrative rules of Breakthrough Greater Boston and to cooperate with staff to the fullest extent.

For advocacy and tracking purposes, I give Breakthrough Greater Boston permission to receive from my child’s school district and school copies of my child’s cumulative academic records, including report cards, progress reports, behavioral records, standardized test scores, special needs assessments and accommodation plans, demographic data, attendance, courses and programs, instructional language and parent/guardian and emergency contact information during each of his or her middle and high school years until they have graduated from both middle school and high school or left the Breakthrough Greater Boston program. I also give Breakthrough Greater Boston permission to access my child’s real-time student records using any internet-based records systems employed by the school or district. Additionally, I give permission for Breakthrough Greater Boston to confidentially discuss my child’s academic and behavioral records with his or her teachers and school officials. Finally, I give permission to Breakthrough Greater Boston to conduct classroom observations and provide in classroom support during the school hours.

By signing this Release Form and granting permission as stated herein, I am releasing my child’s school district and school and their respective officers, directors, agents and/or employees from and against all claims arising out of the release of my child’s student record information and any subsequent use of this information by Breakthrough Greater Boston and its respective officers, directors, agents and/or employees. I have read this Release Form and understand its terms. I sign it voluntarily and with full knowledge of its significance.

________________________________________  ______________________________
Parent/Guardian Signature                        Date