

ACT Prep Program

Presented by Pulaski County Youth Services

- The ACT Prep Program is a training program designed to provide assistance and exposure to Pulaski County youth in preparation for the ACT. The program is conducted over 5 Saturdays, once per semester, in preparation for the October ACT and the April ACT.
- The goal of the ACT Prep Program is to help students avoid remediation courses during their first year of college. 58% of Pulaski County students that attended state-supported higher education institutions in 2007 were enrolled in at least one remedial course. A composite score of 19 is needed to avoid remediation courses at state-supported institutions in Arkansas.
- The ACT Prep Program uses “Cracking the ACT” as its instruction manual. All students will be provided with a free workbook and can keep it after the program concludes.
- Teachers certified in English, Math, Reading, and Science are recruited to conduct the program.
- More than 750 students have completed the ACT Prep Program since its inception in the fall of 2006.
- The average scores have risen from 17.9 on the pre-test to 19.2 on the post-test. Additionally, many students have earned scores of 23 and higher that led to academic scholarships to various colleges and universities.
- The ACT Prep Program is usually conducted at local colleges and universities in an effort to expose youth to a higher education environment.
- Pulaski County Youth Services pays the regular \$32.00 ACT registration fee for the exam immediately following the program for all students who meet attendance requirements.

For more information, please call (501) 340-8250



<input type="checkbox"/> Our Club	<input type="checkbox"/> Youth Leadership
<input checked="" type="checkbox"/> ACT	<input type="checkbox"/> Public Service Internship
<input type="checkbox"/> Youthonomics	<input type="checkbox"/> Family Literacy Night
<input type="checkbox"/> Math Night	<input type="checkbox"/> Week of the Arts
<input type="checkbox"/> Cooking for the College Bound	

Enrollment Form

Client Information Male Female

Date of Enrollment: _____ ID # (Office use only) _____

*Last Name: _____ First Name: _____ MI: _____

SSN: _____ *DOB: _____ AGE: _____
(Optional)

*Address 1: _____

*City: _____ State: _____ Zip: _____

Address 2: _____ *Phone: _____

Race (optional): CAUC AFRI-AMER ASIAN HISPANIC NATIVE AMER OTHER _____

Lives with: Both Parents Mother Only Father Only Mom / Step Dad / Step Grandparent

Relative: _____ Other: _____

Parent/Guardian Information

*Last Name: _____ First Name: _____ MI: _____

Spouse Last Name: _____ First Name: _____

*Home Phone: _____ * Work Phone: _____ Cell Phone: _____

Place of Employment: _____

Annual Income: 0-\$20,000 \$ 20,000-\$30,000 \$30,000-\$40,000 \$40,000-\$50,000 Over \$50,000

Number in Household: _____

Marital Status: Married Single Divorced Widow/er Separated Other:

Highest Level of Education Received (Father) _____

Highest Level of Education Received (Mother) _____

School Information

Grade: _____

*School: _____

School District: LRSD PCSSD NLRSD Private Home School Other

School Counselor: _____

*** Required Information must be filled out by parent in order to participate in program.**

*Chronic Health Problem: _____

*List All Medications Taken: _____

*List All Food/Medications Allergies: _____

Have you participated in the Pulaski County Youth Services ACT Prep Program before? _____

Have you previously applied to the program and were not accepted? _____

Would you, or a parent, like to be added to our monthly e-mail blast to be notified of special events and programs? If so, please provide us with an e-mail address: _____

ALL APPLICANTS -

Please read the following statements before signing below:

1. *I hereby certify that my application contains no false information and is complete, truthful, and accurate to the best of my ability.*
2. *I understand that applications for this program, sponsored by Pulaski County Youth Services, are accepted without regards to sex, race, color, national origin, physical/mental disability, religion, or political affiliation.*
3. *I understand that Pulaski County Youth Services may wish to take photographs of students engaged in the program for future promotion.*
4. *I release Pulaski County from all liability that may occur in the event of injuries, accidents, or death that may arise while my child is participating in the program.*
5. *I give consent for Pulaski County to collect information that may be used for evaluation and/or reporting purposes.*
6. *I understand that all information enclosed in this application will remain confidential.*
7. *I authorize any emergency medical treatment for my child should it be deemed necessary.*

Printed Name of Parent Guardian

Date

Signature of Parent/Guardian

Date

Frequently Asked Questions

1) Who's eligible for the program?

Any young person who is enrolled in the 10th, 11th, or 12th grades who has a Pulaski County address (or attends schools in Pulaski County) and turns in an application before the October 5th deadline.

2) When are the deadlines?

The deadline is Monday, October 5th by 4:30 pm. Applications accepted after 4:30 pm may not be considered.

3) What happens after I turn in my application?

The date it was received will be stamped on it and the information will be entered into a database. Since there are limited spaces available, applications will be graded on a point system to determine who is selected to participate. Points are given for application completeness, strength of essay, timeliness, inclusion of previous scores, and student's grade level.

4) What is included in a completed application?

Each student should turn in a completed application which includes an enrollment form, an essay that explains the student's educational and professional goals, one letter of recommendation, and a copy of the student's most recent ACT scores, if applicable. If the student has not previously taken the ACT, please include a note indicating so.

5) When will I be notified?

All applicants will be notified, by mail, no later than October 19, 2009.

6) When do we start? How long is the program?

The first prep session will be on October 31, 2009. We will begin promptly at 9:00 am. Students should arrive at least 15 minutes early for the first session. The first session will consist of a pre-test and will conclude at 1:00 p.m. The next four sessions (11/7, 11/14, 11/21, 12/5) will be subject-specific (English, Reading, Science Reasoning, and Math) and will take place from 9:00-12:30. There will be no session on November 28th due to the Thanksgiving holiday weekend. This program prepares students for the December 12th test. If you cannot take the December 12th ACT exam, please do not apply for this program.

7) Where will this program be held?

The location will be disclosed to all participants that have been accepted into the program. Previous sessions have been held at the William Bowen School of Law, the University of Arkansas at Little Rock, and Pulaski Technical College. Our intent is to host classes in both Little Rock AND North Little Rock. Generally, all students with a Little Rock address will be enrolled in Little Rock classes and all other students will be enrolled in North Little Rock classes. If you would like to request otherwise, please put a noticeable note on your application indicating so.

8) Can I fax you my application?

No. We need the original application. You can mail it or bring it by the office. *Faxed applications will not be accepted.*

9) What will I need if I am accepted into the program?

Since PCYS pays for the regular \$32 ACT exam, accepted students will need a registration packet (available from your school counselor) at the first session. PCYS also has a limited number of these packets available. Students will also need pen, paper, and a calculator.

10) Who can write my recommendation letters?

Recommendation letters can be written by any adult that knows the capabilities of the applicant (*i.e., neighbor, teacher, former employer*). The recommendation letters must come from adults that are not related to the applicant.

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Application Checklist:

Pulaski County Youth Services will need the following information to aid in its selection process for this program.

- A one-page written essay stating your educational and professional goals**
- One letter of recommendation** (*letters can come from any adult that knows the applicant; no letters can be written by a relative*)
- A copy of your latest ACT test scores. If you have not previously taken the ACT exam before, please include a sheet of paper indicating that.** We will use this information to place the students in the appropriate class levels.

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Additional Points to Consider:

1. The purpose of the study is to better understand how well the ACT test preparation classes help students prepare for the ACT test. This research will help Pulaski County officials to better understand how to plan test-preparation courses for students wanting to take the ACT assessment.
2. Participating in this study authorizes Pulaski County Youth Services to contact the applicant's high school to obtain a copy of their ACT score or the applicant may submit copies of their ACT score.
3. By enrolling in this program, the applicant must take the ACT on December 12, 2009. **Failure to appear on this test dates will result in a reimbursement of all test fees to Pulaski County Youth Services.**

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If you have any additional questions about the ACT Prep Program, please contact Pulaski County Youth Services at 501-340-8250.

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Please return completed applications to:

Pulaski County Youth Services
RE: ACT Program
201 South Broadway, Suite 220
Little Rock, AR 72201

Faxed applications will not be accepted!!