



Miami-Dade County Public Schools

giving our students the world

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March 4, 2024

Dear Parent/Legal Guardian:

Congratulations! You have taken the first steps to enroll your son in Young Men's Preparatory Academy's Leadership Magnet Program, for the 2024-2025 school year. Our professional educators and staff are eager and prepared to provide your son with a nurturing, dynamic, safe, encouraging and challenging teaching and learning environment. At Young Men's Preparatory Academy, we embolden our young men to sharpen and apply positive, expressive communication. We encourage the question, ponder and seek knowledge, and nurture their interpersonal skills. We challenge our young men by providing rigorous learning opportunities and guide them to become the scholars and leaders of tomorrow.

As you know, a strong home / school partnership is essential for student success. During the year, there are many opportunities for parents to be involved in school committees, meetings and special events. I encourage you to be take part in these in any way you are able, as it will help strengthen our Y.M.P.A. family.

Your next step is to access our school website at <https://ympacademy.org/> and click on the "Admissions" tab, and then the "2024-2025 Magnet Acceptance Packet" button on the homepage, to access all pertinent magnet acceptance forms. Proceed to complete and upload, as applicable, the following information:

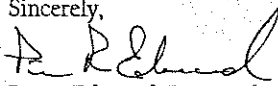
Note: All required forms must be submitted via email at pr7056@dadeschools.net, a NON-REPLY email, to finalize your child's registration. Please include the student's first and last initials and the Miami-Dade County Public Schools (M-DCPS) Student ID number as the "Subject" of the email (i.e. J.D. - ID#: 0700000). If your child does not have a M-DCPS Student ID number, include the student's first and last initials and the temporary MD number assigned on his magnet application (i.e. JD - ID#: MD070000). ALL REGISTRATION DOCUMENTS MUST BE SUBMITTED NO LATER THAN May 14, 2024.

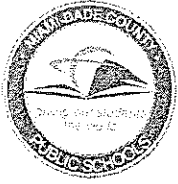
1. For all M-DCPS students entering with an existing M-DCPS Student ID number, parent must submit the following fillable pdf forms via email at pr7056@dadeschools.net, or fill and return to the school, the printed forms included here to finalize your child's registration:
 - Declaration of Acceptance (fillable pdf)
 - Magnet Enrollment Agreement - Form (A) - (fillable pdf)
 - Uniform Policy and Guidelines (fillable pdf)
2. For all students entering from a private school, without a M-DCPS Student ID number, parent must submit the following fillable pdf forms and copies of the indicated documents listed below via email at pr7056@dadeschools.net to finalize your child's registration:
 - Declaration of Acceptance (fillable pdf)
 - Magnet Enrollment Agreement - Form (A) - (fillable pdf)
 - Registration Forms (2024-2025 YMPA Registration Form, Emergency Student Data Form, Home Language Survey, Disclosure at Time of Registration, Project Up-Start Student Eligibility Questionnaire, Statement of Bonafide Residence) - (fillable pdf)
 - Copy of student's birth certificate
 - Copy of immunization and health forms from the student's pediatrician. Please make sure to complete the back of the health form as indicated.
 - Copy of a driver's license (parent or guardian)
 - Copy of two (2) address verifications (Lease or Deed and a copy of the FPL billing receipt).

Should you have any registration questions and/or need additional assistance, please contact Mr. Troy Howard, Lead Teacher, via email at thoward@dadeschools.net.

Thank you for your cooperation and promptness assisting in making the registration process seamless. We are excited, encouraged and prepared for a productive and engaging 2024-2025 school year!

Sincerely,


Pierre Edouard, Principal



MAGNET SCHOOLS

GIVING OUR STUDENTS A WORLD OF CHOICES

2024-2025 SCHOOL YEAR DECLARATION OF ACCEPTANCE

As Parent/Legal Guardian of _____ ("the student"), I/we accept the

Magnet enrollment at **Young Men's Preparatory Academy / 7056** (school name of acceptance) for the **Leadership**

_____ (program name of acceptance) for the **2024-2025** school

year. I understand that by accepting this school program, the other schools to which the student was accepted will

be declined. The student will remain on the random selection list for the schools to which they are currently wait-

listed. **Important Notes for Accepted Students:**

- Parents must contact the school directly for registration/enrollment deadlines and individual school forms and/or information.
- Failure to comply with school/program requirements in a timely manner could result in forfeiting your seat.
- Acceptance is provisional and contingent on meeting and maintaining entrance eligibility requirements for the remainder of the current school year.
- Once registered, students must continue to maintain standards set forth in the Magnet Student Contract.
- Accepted students must be enrolled as full-time students in the accepted Magnet School/Program.
- Parents must contact schools directly to determine if transportation is available.

Student Name – Print Name

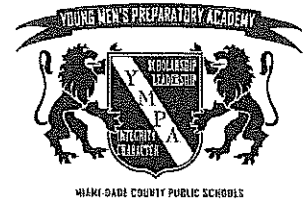
Student ID

Parent/Legal Guardian – Print Name

Parent/Legal Guardian – Signature

Date

YMPA MAGNET CONTRACT



By choosing to enroll your son in Young Men's Preparatory Academy, your son will be part of an exciting educational opportunity. Registration of your son indicates your continuing acceptance of the responsibility to provide the proper attention, encouragement, leadership and parenting to cultivate the best possible learning experiences for your son.

At Young Men's Preparatory Academy, parents and students are expected to comply with the requirements of the program. Failure to adhere to these expectations can result in the student's admission being revoked. Please read the following expectations carefully and sign the bottom of this contract indicating your understanding of these expectations and willingness to abide by the guidelines.

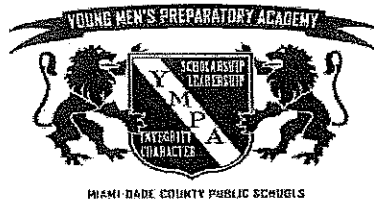
1. I understand that my son is expected to attend school every day, to arrive/leave on time, and to remain throughout the school day. Excessive tardies (20+) and/or absences (10+) will result in my son being placed on attendance probation and could lead to dismissal from Young Men's Preparatory Academy.
2. I consent to update parent contact information and emergency contact information within 10 days of changes. I understand that my son can only be released to the individuals on the emergency contact card and **verbal authorization will not be accepted.**
3. I understand that my son is to adhere to the student code of conduct, discipline policies, as well as the requirements for school sponsored events, i.e., field trips. Failure to follow school rules and requirements may result in my son receiving behavioral counseling, being placed on a behavior contract, and/or may result in dismissal from Young Men's Preparatory Academy.
4. I agree to be supportive of my son and his school. I understand that I am expected to attend parent conferences, performances, exhibitions and other activities sponsored by the school.
5. I understand that the academic program is challenging and that my son must maintain adequate academic progress and good quality work habits. To remain enrolled at Young Men's Preparatory Academy my son **must maintain a minimum of a 2.50 Grade Point Average.** If my son fails to meet the academic expectations, he will be subject to academic probation and/or dismissal from Young Men's Preparatory Academy.
6. I understand that it is my responsibility to review, sign and return all written communications when requested.
7. I understand that my son is to adhere to a strict uniform policy, including jackets, sweaters and shoes. Repeated offenses will result in dismissal from Young Men's Preparatory Academy.

Parent/Guardian Signature

Date

(Please print)

Students Name



YOUNG MEN'S PREPARATORY ACADEMY UNIFORM POLICY & GUIDELINES

Uniform Policy

The Young Men's Preparatory Academy Community believes uniforms help create an environment in which students can demonstrate their individuality while eliminating peer pressures associated with physical appearance and the commercial appeal of attire. We believe uniforms display respect for authority, respect for self, individual discipline, and prepare students for the professional work place.

Uniform Guidelines

- Young men are expected to wear the appropriate uniform daily.
- Khaki slacks or dress pants must be worn daily and must be worn at the waistline.
- Jeans, cargo pants, joggers, sweatpants, and shorts are not permitted.
- Light blue long or short sleeved logo dress shirt must be worn Monday through Thursday.
- The YMPA tie must be worn Monday through Thursday.
- Navy or maroon logo polo may be worn on Fridays.
- If student does not wear school polo on Friday, they must wear their blue dress shirt and tie.
- Shirts must be tucked in at all times.
- Long sleeve under shirts are not permitted under short sleeve dress or polo shirts.
- Navy blue blazer with school logo is required on Wednesday.
- Blazers must be worn on picture days and at special events and ceremonies (including field trips).
- Hoodies, sweaters, sweater vests, sweatshirts, and jackets are not allowed.
- Shoes must be brown or black leather – no sneakers or athletic shoes.
- Socks – must be solid ~~dark blue~~, black, or brown.
- Belts - solid brown or black. No chains, studs, decorative buckles or other ornaments should hang from belts.
- Hats are not allowed.
- Jewelry is not allowed. Necklaces must be tucked inside of the shirt and out of sight.
- Uniforms must be clean and presentable. They must be the appropriate size and length.
- Students must be fully groomed and nails must be trimmed appropriately.
- All hairstyles should be neat and clean – in keeping with a preparatory school environment.
- Headphones must not be worn during the passing of classes.
- Students must be in full uniform when they arrive at school.
- Students must be in full uniform when leaving school for dismissal.
- Students must be in full uniform whenever they are on campus, including after school hours.
- Articles of clothing that are outside of the YMPA Uniform Policy & Guidelines are not allowed.

Students are expected to abide by the Uniform Guidelines. Students who are out of compliance will be required to contact a parent or legal guardian to bring the appropriate attire to the school.

Daily dress code reviews will be conducted and appropriate disciplinary measures will be implemented for non-compliance. A progressive discipline plan will be followed. Disciplinary actions will include, but are not limited to, the following: Verbal Warnings, Referrals, Detentions, Exclusion from Extra-Curricular Activities, Probation and Dismissal from the program.

Parent / Guardian Signature: _____

Student Name: _____ (please print)



**Young Men's Preparatory Academy
2024-2025
Subject Selection Form**

**6th
Grade**

Last Name _____ First Name _____

Required Courses

Subject	Code	
I. English		
Advanced Language Arts I	A60	X
Intensive Reading, I	R60	
II. Mathematics		
M/J Accelerated Mathematics Grade 6	B60	
M/J Foundational Skills in Mathematics 6	B65	
III. Science		
M/J Comprehensive Science 1, Advanced	C60	X
IV. Social Sciences		
M/J United States History, Advanced	D60	X
V. Required Electives		
M/J Personal, Career, School Development Skills 1	E60	X
M/J Fitness & Comp. Physical Ed. Grade 6	P60/P61	X

FAST Score is a level 1/2

BEST Score is a level 1/2

Electives Courses

Subject	Code	1-5
Band 1	M01	
Band 2	M02	
Band 3*	M03	
Jaz Ensemble 1*	M21	
Drum Line /YMU	M84	
Gaming & Simulation Design Level 1	E21	
Gaming & Simulation Design Level 2	E22	
Introduction to Arts, A/V Technology and Communication / Fundamentals of Telecommunications	E61/E62	
Foundations of Robotics	G11	
Robotics Design	G12	
Computer Application	G81/G82	
Comp. Science & Dis	G93	
M/J Computer Science Discoveries	G87	

Needs Approval
Needs Approval

Remember to #1-5 to pick your top choices.



**Young Men's Preparatory Academy
2024-2025
Subject Selection Form**

**6th
Grade**

LAST NAME: _____ FIRST NAME: _____

Previous School: _____ MDCPS ID# _____

Instructions for completing this form.

Your subject selection is not completed until this form is signed and received by the registration office at Young Men's Preparatory Academy. If the subject selection is incomplete or missing, courses will be selected by the Academy.

*Please Note that (X indicates a Required YMPA Course) also, for the electives number 1-5 to be able to pick your TOP 5 choices.

Statement of Understanding

I, _____ parent/ guardian of _____ am aware my child may not be eligible for transportation. If my child is not eligible for transportation, I accept the responsibility for getting my child to school on time. I understand my son must maintain a 2.5 average in all subjects and a minimum of a "C" in conduct. Students who do not maintain the above standard or have excessive absences/ tardies or have continuous violations of the Code of Student Conduct will be placed on probation and may be subject to withdrawal from Young Men's Preparatory Academy. Once a student is withdrawn from Young Men's Preparatory Academy, they will not be re-admitted.

_____/_____
Parent Signature Date

_____/_____
Student Signature Date



MIAMI-DADE COUNTY PUBLIC SCHOOLS

HOME LANGUAGE SURVEY

To Be Completed By Parent or Guardian

Student I.D. No. _____

Student Name _____ Last _____ First _____ Middle _____

Date of Birth ____/____/____ Grade ____ Parent Language _____ Student Language _____
Month Day Year

Date Entered U.S. School: ____/____/____ Ethnic _____ (Check all that apply) Race: White Black Asian
Month Day Year Hispanic ____ (Y/N) American Indian Native Pacific Islander

If the answer is "YES" to any of these questions, the student must be tested for English proficiency.

- 1. Is a language other than English used in the home? Yes No
- 2. Did the student have a first language other than English? Yes No
- 3. Does the student most frequently speak a language other than English? Yes No

School _____ Date _____ Parent/Guardian Signature _____

ESCUELAS PUBLICAS DEL CONDADO DE MIAMI-DADE
ENCUESTA SOBRE EL IDIOMA HABLADO EN EL HOGAR

Debe ser completado por el/la padre/madre o tutor/a

No. De I.D. _____

Nombre del Estudiante _____ Apellido _____ Nombre _____ Inicial _____

Fecha de Nacimiento ____/____/____ Grado ____ Lengua Paterna _____ Idioma del Estudiante _____
Mes Día Año Origen Etnico (Marque todo lo pertinente) Raza: Blanco Negro

Fecha de Entrada a la Escuela de los Estados Unidos: ____/____/____ Hispano ____ (S/N) Asiático Indígena de los EEUU Oriundo de las Islas del Pacífico
Mes Día Año

Si responde "Si" a alguna de estas preguntas, el estudiante debe tomar un examen para saber cual es su conocimiento del Inglés.

- 1. ¿Usan en su casa algún otro idioma que no sea el Inglés? Sí No
- 2. ¿Tuvo el estudiante una lengua materna distinta al Inglés? Sí No
- 3. ¿Habla el estudiante frecuentemente otro idioma que no sea el Inglés? Sí No

Escuela _____ Fecha _____ Firma del Padre/Madre _____

MIAMI-DADE COUNTY PUBLIC SCHOOLS
SONDAJ SOU KI LANG TIMOUN NAN PALE

Pou paran oubyen moun ki responsab timoun nan ranpli

No. I.D. Elèv La _____

Non Elèv la _____ Non fanmi _____ Non _____

Dat Fèt li ____/____/____ Klas ____ Lang paran Yo _____ Lang Elèv La _____
Mwa Jou Ane Etnisite (Tcheke tout Espayòl ____ (W/N) sa ki aplike) Ras: Blan Nwa Azyatik

Dat ou Antre U.S. Lekòl: ____/____/____ Amriken Endyen Natif Il Pasifik
Mwa Jou Ane

Si repons lan se "Wi" pou nenpòt nan kesyon anba yo, elèv la dwe pran yon tès Anglè.

- 1. Eske yo sévi ak yon lang ki pa Anglè lakay li? Wi Non
- 2. Eske elèv la te genyen yon premye lang anvan Anglè? Wi Non
- 3. Eske elèv la abitye pale yon lang ki pa Anglè? Wi Non

Lekòl _____ Dat _____ Siyati Paran _____



MIAMI-DADE COUNTY PUBLIC SCHOOLS
MEDIA RELEASE PARENTAL CONSENT FORM
Physical Education and Health Literacy

(Date)

Dear Parent:

Please be advised that during the year your child may be photographed, video taped or interviewed at various school sponsored events. With your consent, the photograph, video or interview may be reproduced and released for use by the media, i.e., newspapers, brochures, videos, television and through the internet.

Please indicate your preference below.

(Student's Name)

___ Yes. My child's photograph/video/interview **may** be reproduced and released for use by the media.

___ No. My child's photograph/video/interview **may not** be reproduced and released for use by the media.

(Signature)

(Date)

Return this signed form to:

CONTACT PERSON: _____

SCHOOL NAME: _____

SCHOOL TELEPHONE: _____



MIAMI-DADE COUNTY PUBLIC SCHOOLS

DISCLOSURE AT TIME OF REGISTRATION

Chapter 1006.07 (1)(b), requires that any student seeking admission to a public school in the State of Florida will provide the following information at the time of initial registration:

1) **Has the student ever been expelled from any school, in or out of the State of Florida?**

YES NO

If your answer to question 1 is "YES", please list each and every instance for which the student was expelled.

2) **Please state whether the student has ever been arrested where the arrest resulted in the student being formally charged. If your answer is "YES", please list each and every arrest which resulted in a formal charge.**

3) **Please state whether the student has ever been involved as a party in a case before the Juvenile Justice System? If so, state each action taken by the Juvenile Justice System which involved the student.**

4) **Please state whether the student has any corresponding referrals to mental health services related to your answers to Questions 1, 2 and 3. If yes, please list them.**

Student's Name _____ ID. # _____

(Please Print)

Ethnic _____ (Check all that apply) Race: White Black Asian
Hispanic _____ (Y/N) American Indian Native Pacific Islander

Date of Birth _____ Parent's/Guardian's Name _____

Address _____

Signature (Parent/Guardian) _____

Signature (Student) _____ Date Signed _____



Miami-Dade County Public Schools

Directory Information Opt-Out Form

FOR REGISTRAR USE ONLY:	
1 - USM	5- USM/FAFSA
2 - IHE	6 - IHE/FAFSA
3 - FAFSA	7- USM/IHE/FAFSA
4 - USM/IHE	

Miami-Dade County Public Schools (M-DCPS) generally protects a student’s personally identifiable information¹ from disclosure without prior consent from parents or eligible students. However, unless the parent or eligible student specifically states in writing that they do not want this information provided, M-DCPS is required to provide senior high school students’ names, addresses, and telephone listings to military recruiters or institutions of higher education upon their request.²

Additionally, in a joint effort to increase the number of students applying for higher education financial aid, Miami-Dade County Public Schools and the United States Department of Education (USDOE) are participating in a Free Application for Federal Student Aid (FAFSA) Completion Project. Unless the parent or eligible student specifically states in writing that they do not want student information provided, M-DCPS may provide student information to the USDOE for this purpose. If you do **not** want your child’s information disclosed to any or all of these entities, check the space next to each entity listed below to which you do **not** want your child’s information disclosed.

I **DO NOT CONSENT TO DISCLOSURE** of my child’s name, address, telephone listing, or birth date to the following (check all that apply):

- United States Military (Army, Navy, Air Force, Marines, Coast Guard, etc.)
- Institutions of Higher Education
- USDOE for FAFSA Completion Project

Student’s Name: _____ Date of Birth: _____ ID#: _____

I understand that by checking the spaces above and submitting this form to the person indicated below, M-DCPS will restrict the disclosure of personally identifiable student information from my child’s educational records to the entities that I have selected.

I further understand that if I do not complete and return this form, M-DCPS will release the information to the above-mentioned entities upon request by the entity and has no further obligation to contact me on a case-by-case basis to request my consent for the disclosure of directory information to these entities.

Parent/Guardian Name

Signature

Date

To prohibit disclosure to the above-listed entities, return this form to your child’s school within the next 30 days to:

¹ The *Family Educational Rights and Privacy Act* (20 U.S.C. § 1232g; 34 C.F.R., Pt. 99) governs the confidentiality of student educational records.

² See 20 U.S.C. § 7908.



Miami-Dade County Public Schools
 Department of Title I Administration
 Project UP-START Program



2022-2023 Project UP-START Student Eligibility Questionnaire

This questionnaire is intended to help determine eligibility of services under the federal McKinney-Vento Act. Florida Statute 837.06 provides that who whoever knowingly makes a false statement in writing with the intent to mislead a public servant in the performance of his official duty shall be guilty of a misdemeanor of second degree.

Project UP-START Services are confidential and this form is not to be shared with outside agencies.

QUESTION 1: WHAT IS YOUR FAMILY CURRENT NIGHTTIME RESIDENCE? (SELECT ONE OPTION)

- Shelter (A) Doubled-up/Sharing the home of others (B) Car/Park/Trailer/Substandard Housing (e.g., no water, no electricity, mold infestation) [D]
- Hotel/Motel/Airbnb (E) Rent home Own home

SKIP QUESTION #2 IF YOU SELECT RENT HOME/OWN HOME

QUESTION 2: WHAT IS THE REASON YOUR FAMILY DOES NOT HAVE A PERMANENT NIGHTTIME RESIDENCE? (SELECT ONE OPTION)

- Pandemic (P) Hurricane (H) Flooding (F) Lack of affordable housing/eviction, domestic violence, mental illness, unemployment (O)
- Man-Made Disaster/Fire (D) Mortgage Foreclosure (M) Tropical Storm (S) Tornado (T) Other/Unknown (U)

QUESTION 3: WHO IS/ARE THE STUDENT(S) FOR WHOM YOU ARE COMPLETING THIS FORM?

Student First & Last Name	Student ID Number	Date of Birth	Grade Level	School Name/Location #

PARENT/GUARDIAN CONTACT INFORMATION (DO NOT COMPLETE QUESTIONS 4 AND 5)

Current Address: City: Zip Code:

Parent Name: Phone Number:

Parent/Guardian Signature: Date:

QUESTION 4 AND 5: TO BE COMPLETED BY UNACCOMPANIED YOUTH ONLY (SELECT ONE OPTION)*

- 4) Are you living alone without an adult? 5) Are you living alone with an adult that is NOT a parent/guardian?

Caregiver's Name: Date:

Unaccompanied Youth Signature:

*Please ask your caregiver to complete the Caregiver's Authorization Form (FM-7402), and submit it with this form.

FOR SCHOOL/AGENCY USE ONLY

School/Agency Name: Location #:

School Contact Name:

Contact Number/Ext: Email Address:

Please fax the completed forms to 305 579-0370, or via email at projectupstart@dadeschools.net or send forms to the respective location site, to the attention of Project UP-START: South - Loc #7021; Central - Loc #8005, & North - Loc #9571.
 THIS FORM DOES NOT TRIGGER A CALL TO THE FAMILY. FOR MORE SERVICES, FM-7404 AND/OR FM-7405 MUST BE SUBMITTED.

Transportation Area

The red shape represents the 2-mile area.
Students that live within the 2-mile walk area are not entitled to transportation.

