

2018-19 Application for Admission

This form does not ensure final enrollment, but provides information upon which a decision will be based.

Kindergarten – Grade 12

A \$25 application/testing fee must accompany this form and is non-refundable. You will be notified about a suitable time for an interview of both you and your child as well as the administration of a placement test.

Grade entering: _____

Information Concerning the Student:

Date: _____

Student's full name: _____

Student's Social Security Number: _____ () Male () Female Age: _____

Present Address: _____

Home Phone: _____ Work Phone: _____

E-mail address: _____

Do you require bus transportation? () Yes () No Miles from the School: _____

Special Physical Disabilities: _____

School Last Attended (if applicable): _____

Has the child repeated any grade? () Yes () No If so, state grade and reason: _____

Has the child had any disciplinary issues in school? () Yes () No If so, briefly explain: _____

Family Information – Father or Guardian

Family information – Mother or Guardian

Name

Name

Home address (if different from applicant)

Home address (if different from applicant)

City State Zip

City State Zip

Work phone Cell phone

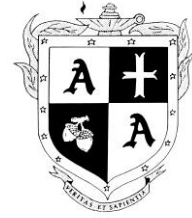
Work phone Cell phone

Business address

Business address

City State Zip

City State Zip



Application for Admission, Continued . . .

Check all that apply:

- Father deceased Mother deceased Parents divorced Parents separated

Applicant resides with:

- Father Mother Stepfather Stepmother Guardian

If applicable, please provide legal documents regarding custody

Name and age of siblings: _____

Explain how you heard about Amelia Academy: _____

Explain why you want your child to attend Amelia Academy: _____

Amelia Academy admits students of any race, color, religion, national or ethnic origin, to all the rights, privileges, programs, and activities generally accorded or made available to the students at the Academy. Amelia Academy reserves the right to dismiss any student in the event that he/she or members of his/her family engage in conduct deemed detrimental to the learning environment or reputation of the Academy.

Signature of Parent/Guardian

Date

**OFFICE USE ONLY
IDENTITY VERIFICATION**

If proof of identity is required and a copy is not kept, please fill out the following.

Place of Birth	Birth Date	Birth Certificate Number	Date Issued
Other Form of Proof		Date Documentation Reviewed	Person Viewing Documentation