



ENROLLMENT APPLICATION

Part A – To be completed by the Parent (please print clearly):

Name of Student _____ Nickname _____

Date of Birth _____ Age _____ Place of Birth _____

Applying for:

10-month program

12-month program

English as a second Language (ESL)

Tutoring program

Summer Session

Source of Referral:

Friend

Magazine

Yellow Pages

Explain: _____

Newspaper

Flyer

Other

Last 2 schools attended: (List most recent school first)

Name of School _____ Phone Number _____

Address _____ Dates Attended _____

Name of School _____ Phone Number _____

Address _____ Dates Attended _____

Last Grade Completed _____

Has your child ever attended an Applied Scholastics™ School before? (____) yes (____) no

If yes, which one? _____ When? _____

Please attach a recent photograph



The student fills out this page. Parents only help as needed.

1. Which subjects are you most interested in? Why?

2. What do you want to do in life?

3. Are there any subjects you feel you need help in? If so, which ones and what do you feel is causing the difficulty?

4. What would you like to accomplish at the school? (Please be specific.)

5. Do you work during the school year or vacations? If so, what are your responsibilities?

6. Have you ever skipped or repeated a grade or educational program? (____) yes (____) no.

Explain _____

7. Please check (☐) the appropriate boxes to indicate your talents and interests. Also place an X by any area in which you have received an award or honor:

	Very Interested	Interested	Not Interested	Would Like to Try
Reading				
Math				
Science				
Writing				
History				
Leadership				
Drama				
Music				
Art				
Computers				
Sports				
Other				



9. Writing Sample:

Please choose one of the following topics to write about. On a *separate sheet of paper*, write about it as much as you like. We would like you to write 100 words or more (younger students may write as much as they are able).

- A. If you could take a month out of the year to do whatever you wanted, describe in detail what you would do and why.
- B. Tell us about a favorite book, piece of music, film or hobby, what you enjoy about it and why.
- C. Write about a current world event in detail, covering what you feel is important about it and why.

10. Please write a few sentences in your own words that show that you have read and understood the CODE OF CONDUCT and agree to abide by it. (Younger students should show that they have gone over the CODE OF CONDUCT with an adult, understand these important points and agree to them.)

Signature of Student

Date

Witness

Date



Part B – Parental Questionnaire

FAMILY INFORMATION

FATHER

Name: _____

Home Address: _____

_____ Zip _____

Home Phone: (____) _____

Cell Phone: (____) _____

Work Address: _____

_____ Zip _____

Work Phone: (____) _____

Occupation: _____

Age: _____

Highest Education Level: _____

Income Bracket: _____

Email Address: _____

MOTHER

Name: _____

Home Address: _____

_____ Zip _____

Home Phone: (____) _____

Cell Phone: (____) _____

Work Address: _____

_____ Zip _____

Work Phone: (____) _____

Occupation: _____

Age: _____

Highest Education Level: _____

Income Bracket: _____

Email Address: _____

If parents are separated or divorced, who does the student live with? _____

Who has legal custody? _____

Student's brothers and sisters:

Name: _____ Age: _____ Name: _____ Age: _____

Name: _____ Age: _____ Name: _____ Age: _____

1. What would you like to see your child accomplish through his or her education?

2. How does your child usually spend his or her free time?



3. Is there an area of potential in your child that you would especially like developed further?

4. Are there any academic areas or areas of personal development in which you would particularly like to see your child improve?

5. What types of things upset your child?

6. Describe briefly the relationship of your child to each parent.

If the answer to any of the following questions is *yes*, please explain in full detail on a separate sheet of paper.

7. Has your child ever had physical, mental, emotional, scholastic or disciplinary difficulties?
(___) yes (___) no

8. Are there any restrictions regarding his or her physical activities? (___) yes (___) no

I certify that the above information is complete and true and hereby make application for enrollment. I understand this application is subject to acceptance by the school.

Signature of Parent or Guardian with Legal Custody

Date

Signature of Parent or Guardian with Legal Custody

Date

