

# BRIGHT ACADEMY

## Application for Enrollment

Attach photo here

Student's Full Name \_\_\_\_\_

Preferred Name \_\_\_\_\_ Male  Female  Race \_\_\_\_\_

Applying for School Year \_\_\_\_\_ Grade \_\_\_\_\_

Date of Birth \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Student Cell Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Student email \_\_\_\_\_

Mother's Name \_\_\_\_\_ Father's Name \_\_\_\_\_

\_\_\_\_ *Please check if there are NO Changes from the previous school year.*

Address \_\_\_\_\_ Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Home Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Home Email \_\_\_\_\_ Home Email \_\_\_\_\_

Work Email \_\_\_\_\_ Work Email \_\_\_\_\_

Employer \_\_\_\_\_ Employer \_\_\_\_\_

Occupation/Title \_\_\_\_\_ Occupation/Title \_\_\_\_\_

Work Address \_\_\_\_\_ Work Address \_\_\_\_\_

Are parents divorced? Yes  No  If yes, who is the student's legal guardian? \_\_\_\_\_

Student resides with \_\_\_\_\_

To whom should financial correspondence be sent?

Mr.  Ms.  Mrs.  Dr.

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_

CC email \_\_\_\_\_

### Maternal Grandparent(s)

Name \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_ Phone \_\_\_\_\_

### Paternal Grandparent(s)

Name \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_ Phone \_\_\_\_\_

**Siblings**

Name	Age	School / Current Grade
_____	_____	_____
_____	_____	_____
_____	_____	_____

Schools Previously Attended	Grades Attended	Reason for Leaving
_____	_____	_____
_____	_____	_____

What was your child's age when he/she entered first grade? \_\_\_\_\_

Has the student repeated any grades? Yes  No  If yes, which grade \_\_\_\_\_

Is the student currently receiving tutoring? Yes  No

Does the student have any physical disabilities, allergies, or regular medications? \_\_\_\_\_

Has your child had excessive or extended absences from school? If yes, please explain \_\_\_\_\_

**Other Services**

Pediatrician's Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Has the student been diagnosed with a specific language based learning disability by a qualified Psychologist? Yes  No

Psychologist Name \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_

Address \_\_\_\_\_

Full Report: Attached  Being Forwarded

Has the student had a cognitive assessment (IQ test)? Yes  No

Type: WISC  Stanford-Binet  Other  \_\_\_\_\_

Report: Attached  Being Forwarded

Other testing notes: \_\_\_\_\_

**Check the services that have been recommended for your child.**

Tutoring  Counseling  Speech/Language Therapy  Occupational Therapy  Medication

Please provide the following information about services your child is receiving or has received in the past.

Please attach a copy of all reports and evaluations.

Provider

Dates of Service Results/Diagnosis

Tutoring

Counseling

Speech/Language Therapy

Occupational Therapy

School Services

Other

Does your child have any special abilities, talents or hobbies? Please include any competitions or awards.

\_\_\_\_\_ Who referred you Bright Academy? \_\_\_\_\_

State your primary concern: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

When was this difficulty first noticed? \_\_\_\_\_

How did your child's school describe the difficulty? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What factors do you think might have contributed to the difficulty? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Does your child feel he/she has a problem? (If so, describe these feelings.) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The information provided on this application is correct and complete to the best of my/our knowledge.

\_\_\_\_\_  
Signature of Mother/Guardian Date

\_\_\_\_\_  
Signature of Father/Guardian Date

# BRIGHT ACADEMY

## TERMS AND CONDITIONS

Applications are made to the governing authority of Bright Academy which reserves the right to accept or reject any application.

Bright Academy admits students of any race, color, or national and ethnic origin to all rights, privileges, programs and activities generally accorded or made available to students of the school. Bright Academy does not discriminate on the basis of race, color, or national and ethnic origin in administration of its educational policies.

School policies are subject to change. Information on current policies will be made available at parent orientation meetings prior to enrollment.

Applicants agree to abide by all school policies, rules and regulations, including provisions for dress codes and discipline.

Applicants agree that their students will receive instruction in the Christian Faith and understand that the school will endeavor to be guided by a Christian worldview in all of its programs and activities.

The school has policies designed to meet a reasonable standard of care for students who become ill or have an emergency situation at school. Parents are required to sign a medical release form each year allowing emergency medical care to be obtained in the case parents cannot be reached. Parents understand the school is not an insurer of student health. The school procedures governing health care plans and the storage and administration of medications are available from the Administration.

g. The school's Tuition & Fee Schedule provides information about financial terms and obligations. It is updated annually. Students are enrolled for the entire year and the parent or guardian is responsible for the annual tuition payment upon accepting enrollment.

### VI. PARENT OR GUARDIAN AGREEMENT

I hereby certify that I have read this Student Application Form, including the Terms and Conditions Section. I do agree to comply with the terms and conditions stated therein and furthermore accept the conditions and requirements of all other official policies and procedures of Bright Academy, including the payment of all fees and charges according to the published schedule of the school. This application cannot be processed until the application fee is paid in full and the application is signed by the parents or guardian of the applicant.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_