

Date App. Rec'd: \_\_\_\_\_

Date App. Fee Rec'd: \_\_\_\_\_



character • faith • knowledge

*A Classical Christian School educating K-8  
in Kokomo, IN*

### Application for Admission

Please send the completed form to E-mail: [acacia@acaciaacademy.org](mailto:acacia@acaciaacademy.org) or

Address: 830 South Main Street, Kokomo, IN 46901 (765-457-5545)

#### Student Information:

Student's Legal Name \_\_\_\_\_

Home Address \_\_\_\_\_

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Current Age \_\_\_\_\_ Female \_\_\_\_ Male \_\_\_\_

Citizenship \_\_\_\_\_ Grade Level Requested \_\_\_\_\_

Church attended, if any \_\_\_\_\_

Name of Legal Guardian \_\_\_\_\_

#### Parent/Guardian Information:

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

Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Email \_\_\_\_\_

Marital Status \_\_\_\_\_

Occupation and Position \_\_\_\_\_

Business Name, Address, Work Phone \_\_\_\_\_

Church attended, if any \_\_\_\_\_

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

Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Email \_\_\_\_\_

Marital Status: \_\_\_\_\_

Occupation and Position \_\_\_\_\_

Business Name, Address, Work Phone \_\_\_\_\_

Church attended, if any \_\_\_\_\_

Please list all persons living in the household and their relationship to the student:

\_\_\_\_\_  
\_\_\_\_\_

Who is responsible for the financial support of the student?

\_\_\_\_\_

**School Information:**

School district in which you reside \_\_\_\_\_

Present School \_\_\_\_\_

School Address \_\_\_\_\_ Telephone \_\_\_\_\_

Grades Attended \_\_\_\_\_ Dates Attended \_\_\_\_\_

Please list all past schools attended.

School Address \_\_\_\_\_ Telephone \_\_\_\_\_

Grades Attended \_\_\_\_\_ Dates Attended \_\_\_\_\_

Reason for withdrawing \_\_\_\_\_

School Address \_\_\_\_\_ Telephone \_\_\_\_\_

Grades Attended \_\_\_\_\_ Dates Attended \_\_\_\_\_

Reason for withdrawing \_\_\_\_\_

If the answer is "yes" to any of the following questions, please provide additional information below.

- Has the student received any special honors or awards for scholastic achievement? Yes No
- Has the student ever had any remedial or accelerated instruction (or been recommended for such)? Yes No
- Has the student ever skipped (been moved forward) a grade? Yes No
- Has the student ever repeated (been held back) a grade? Yes No
- Has the student ever had an Individualized Education Program (IEP)? Yes No
- Has the student ever been recommended for or given diagnostic testing? Yes No
- Has the student ever received special help or tutoring? Yes No
- Does the student have any special learning needs or learning disabilities? (ADHD, dyslexia, etc.) Yes No
- Does the student have any physical, emotional, or other problems that may affect school behavior or attendance? Yes No
- Does the student have any record of school disciplinary problems? Yes No
- Has the student ever been suspended or expelled from any school? Yes No
- Has the student ever been involved in legal problems or been arrested? Yes No

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