

# The Academy

2722 Benvenue Ave  
Berkeley, CA 94705



## ADMISSION APPLICATION

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**Please fill out one application per student. There is a \$50.00 application fee due at the time of submission.**

Application Date: \_\_\_\_\_

Student Name: \_\_\_\_\_  
first middle last

Nickname/Preferred Name: \_\_\_\_\_ Primary language: \_\_\_\_\_

Age: \_\_\_\_\_ Birthdate: \_\_\_\_\_  Male  Female  Other

Applying for grade: \_\_\_\_\_ beginning in the  Fall  Spring Semester, 20\_\_\_\_\_

Student Address: \_\_\_\_\_  
street city state zip

Name of Parent or Guardian: \_\_\_\_\_

Address (if different): \_\_\_\_\_  
street city state zip

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Occupation: \_\_\_\_\_ Title: \_\_\_\_\_

Employer: \_\_\_\_\_

Business Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
street city

Name of Parent or Guardian: \_\_\_\_\_

Address (if different): \_\_\_\_\_  
street city state zip

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Occupation: \_\_\_\_\_ Title: \_\_\_\_\_

Employer: \_\_\_\_\_

Business Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
street city

Other children in the family (names, ages, and school):

name	age	school
_____	_____	_____
_____	_____	_____
_____	_____	_____

Current School: \_\_\_\_\_

Address: \_\_\_\_\_  
street city state zip

Phone: \_\_\_\_\_ Years at this school: \_\_\_\_\_ Grade completed: \_\_\_\_\_

Name of last teacher and principal to whom we may send our evaluation forms:

Teacher: \_\_\_\_\_  
name school phone

Principal: \_\_\_\_\_  
name school phone

Previous Schools:

_____	_____	_____	_____
name	years attended	name	years attended
_____	_____	_____	_____
name	years attended	name	years attended

Has the student ever been asked to withdraw from a school?  Yes  No If so, please explain:

Has the student ever skipped or repeated a grade?  Yes  No If so, give grade(s) and the circumstances:

Has the student ever had any special tutoring?  Yes  No If so, please indicate the subject(s) and grade(s) when the student was tutored and the circumstances:

Describe any special circumstances which have affected the student's performance in school (e.g., illness or physical handicaps, particular learning difficulties, or changes of homes or schools, etc.):

Describe any health conditions or restrictions the student may have:

Person financially responsible for this student: \_\_\_\_\_

Send tuition bills to: \_\_\_\_\_

Will you be applying for financial aid?  Yes  No

How did you hear about The Academy?

Tell us what appeals to you about The Academy:

Describe your child and his or her interests and activities (attach additional pages or documents if needed):

Statement of Good Standing:

\_\_\_\_\_ (*initial here*) I/We certify that we have left all previous schools in good standing including having met all contractual requirements related to academics, citizenship, and finances as parent(s) and as a student. Contractual requirements include meeting the obligations agreed to under the enrollment contract and any Student/Parent Handbooks. "Good standing" is defined by the previous school. (Please attach a separate explanation if you do not check this statement.)

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

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