

ALPHA ACADEMY SCHOOL APPLICATION

(To be completed by Parents only)

Date of Application: _____ School year: _____ SS#: _____

Student's Name: _____ Sex: _____
Last First Middle

Mailing Address: _____ Phone: _____

Date of Birth: _____ Ethnicity (Race): _____ Grade Level: _____

Student Is Being Promoted To Grade ____ OR Student Is Being Retained in Grade ____

My child receives the following Special Education Services: (Please attach IEP)

___ Gifted ___ Talented in Visual Arts ___ Talented in Drama ___ Mild/Moderate
___ Other Health-Impaired (OHI) ___ Speech Therapy
___ Other (Please Describe) _____

Lunch Status (Check the applicable spaces) At this time students must bring their own lunch
(This information is required to received some federal funding)

___ Student Does Not Qualify for Free or Reduced Lunch

___ Student Qualifies for ___ Free Lunch or ___ Reduced Lunch

**** Student lunch status will be verified ****

Mother's Name: _____

Home Address: _____

Home Phone: _____ Work Phone: _____ Cell#: _____

Father's Name: _____

Home Address: _____

Home Phone: _____ Work Phone: _____ Cell#: _____

Emergency Contact other than Parent: _____
(Relationship)

Home Phone _____ Work Phone _____ Other Number _____

Name of Legal Guardian (if not Parent) _____
(Relationship)

Home Phone _____ Work Phone _____ Other Number _____

“PARENT APPLICATION”

Additional Student Information

1. List Previous Schools Student Has Attended.

<u>School (s)</u>	<u>Grades Attended</u>	<u>Location (if outside of Cumberland County)</u>
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2. Has your child been suspended from School? Yes or No (Circle One). If yes, how many times and describe the reasons.

3. Has your child been retained in a grade? Yes or No (Circle One). If yes, indicate which grade(s) and give the reason.

4. If your child has been absent often from school, please give the reasons.

5. List any special accomplishments by your child or any awards he/she has received.

“PARENT APPLICATION”

Please Answer the Following Questions: (Attach an additional sheet if you need more space)

- 1. May we publish your name, address, and phone number in the school directory? Yes or No**
- 2. Why have you chosen to send your child to Alpha Academy?**

- 3. Describe the types of activities that you have been involved in at your child’s school during the past year.**

Any student eligible to attend public school in North Carolina and who meets the age and grade requirements is eligible to attend Alpha Academy. Alpha Academy does not discriminate on the basis of race, ethnicity, national origin, gender, religion, or disability. I understand that submission of this application does not guarantee my child admission to the school, nor does admission of one of my children guarantee the admission of another.

I understand that in order for my child to be eligible for admission, my child and I, or another parent or guardian, must attend one of the information sessions. If we are unable to attend, I will contact the school at 223-7711 to make an appointment.

I also understand that Alpha Academy has only a limited number of openings and base on space availability and requirements all students who apply for admission may not be accepted. If my child is accepted I agree to comply, to the best of my ability, with all that is required of my child and me.

Parent’s Signature

Date