

HERITAGE ACADEMY
7216 U.S. 42, FLORENCE, KY 41042
PHONE: (859) 525-0213
ADMISSIONS APPLICATION

Official use only:

1. Date received _____
2. Grade _____
3. Immunization records _____
4. Medical Exam _____
5. Authorization for Emergency Treatment _____
6. T. B. Certificate _____
7. Birth Certificate _____
8. Social Security Number _____
9. Transcript Received _____

NOTE: Your enrollment fees must accompany this form in order for your student's name to go on the class list. If your student's name is on the class list and you change your mind, your enrollment fees are non-refundable. Heritage Academy reserves the right to alter class selection based on our final enrollment.

A. NONDISCRIMINATION POLICY: Heritage Academy admits students of any race, color, national, and ethnic origin to all rights, privileges, programs, and activities made available to students at the school. It does not discriminate on the basis of race, color, national and ethnic origin in the administration of its educational policies, admissions policies, athletic and other school administered programs.

B. GENERAL RECORD: Check one New Student Returning Student Yr. Last Attended

Student _____
(Last Name) (First Name) (Middle Name)

Application for Grade _____ Sex _____ Date of Birth _____ Age _____
Month Day Year

Student Phone _____ Social Security Number _____ - _____ - _____
Area Number

E-mail Address _____

Address _____
Street City State Zip

Name of Parent/Guardian: _____
First Name Last Name

Doctor's Name: _____ Phone _____

Emergency Contact Name: _____ Phone _____

Mother's Name: _____ Phone _____

Employer's Name: _____ Phone _____

Father's Name: _____ Phone _____

Employer's Name: _____ Phone _____

Will you need transportation? _____ Bus _____ Car Pool _____ Other _____

Resides with (Check one) _____ Mother/Father _____ Mother only _____ Father only _____ Guardian _____ Others.

Name of Person(s) authorized to pick up student: _____

Telephone: _____ Relationship: _____

Were you ever denied admission to any school? _____ Why? _____

Were you ever suspended or expelled from school? _____ Why? _____

A. FINANCIAL RECORD:

COMBINED INCOME RANGE:

_____ Less than 15,000

_____ 15,000 to 19,999

_____ 20,000 to 29,999

_____ 30,000 to 39,000

_____ 40,000 +

Name of Bank _____

Is there any reason why you would not be able to make your tuition payments? _____

B. CHILD'S SPIRITUAL RECORD:

Home Church _____

Denomination _____

Church now attending _____ Pastor _____

Have you accepted Jesus Christ as your Lord and Saviour? _____ Year _____

Do you attend one service per week at your church? _____ Yes _____ No

AFFIRMATION:

I hereby affirm that all of the information contained in this application is true and accurate to the best of my knowledge. I understand that providing any false information would be sufficient reason for the rejection of this application. I further understand that I may be asked for additional written information concerning such items as academic records and financial income.

In making application for my child, it is my desire to have him/her complete the school year. It is also my understanding that by enrolling my child/children I am responsible for the full year's tuition. If I choose to leave for any reason other than loss of job, or transfer out of the area, I am still obligated to finish paying a full year's tuition.

I give permission for my child/children to take part in all school activities, including school sponsored trips away from school premises, and absolve Heritage Academy and its staff from any and all liability to me or my child/children because of such school activity.

Date: _____

Parent or Legal Guardian Signature _____