



Family Application for Admission 2020-2021

We welcome you to the admissions process of Regents Academy. Only one family application is required per family. Please return this completed application and a new student application to the office prior to scheduling an interview with the administration. Along with an interview, testing of each student will be required. Each applicant's potential, scholastic motivation, and moral character will be taken into consideration.

Parents	1 st Parent or legal guardian: _____ Marital status: _____ <small>TITLE FIRST LAST</small>	
	Present address: _____ <small>STREET CITY STATE ZIP</small>	
	Phone: _____ e-mail: _____ <small>HOME CELL</small>	
	Employment: _____ <small>COMPANY OCCUPATION PHONE</small>	
	Employment address: _____ <small>STREET CITY STATE ZIP</small>	
Parents	2 nd Parent or legal guardian: _____ Marital status: _____ <small>TITLE FIRST LAST</small>	
	Present address: _____ <small>STREET <input type="checkbox"/> (Check if the same as 1st parent) CITY STATE ZIP</small>	
	Phone: _____ e-mail: _____ <small>HOME CELL</small>	
	Employment: _____ <small>COMPANY OCCUPATION PHONE</small>	
	Employment address: _____ <small>STREET CITY STATE ZIP</small>	
Parents	Applicant lives with: <input type="checkbox"/> Father <input type="checkbox"/> Stepfather (check all that apply) <input type="checkbox"/> Mother <input type="checkbox"/> Stepmother <input type="checkbox"/> Other _____	
	Name of custodial parent(s) (if applicable) _____	
	Check any that apply: <input type="checkbox"/> Father is deceased <input type="checkbox"/> Parents are divorced <input type="checkbox"/> Mother is deceased <input type="checkbox"/> Parents are separated <input type="checkbox"/> Father has custody <input type="checkbox"/> Mother has custody	
Contacts	Name of relatives or friends, if any, currently or previously at Regents: <input type="checkbox"/> Relative <input type="checkbox"/> Friend: _____ <input type="checkbox"/> Relative <input type="checkbox"/> Friend: _____	
Church	Family's church: _____ Address: _____ Pastor's name: _____ Phone: _____	Check all that apply: <input type="checkbox"/> Applicant attends church regularly <input type="checkbox"/> Applicant attends youth group <input type="checkbox"/> Applicant attends Sunday school <input type="checkbox"/> Parents attend church regularly <input type="checkbox"/> Other _____

Other Family	Please list names of all children in the family:		
	NAME	AGE	SCHOOL ATTENDING
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	Do you plan to enroll any of the above in Regents? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, when? _____		
Miscellaneous	How did you first learn about Regents Academy?		
	<input type="checkbox"/> Telephone book: _____ <input type="checkbox"/> Parents of Regents student <input type="checkbox"/> Student(s) currently enrolled		
	<input type="checkbox"/> Newspaper or magazine: _____ <input type="checkbox"/> Minister <input type="checkbox"/> Internet <input type="checkbox"/> Catalog on private schools		
	<input type="checkbox"/> Radio: _____ <input type="checkbox"/> Other _____		
	Briefly explain why you want to enroll your child(ren) at Regents Academy.		
	_____ _____ _____ _____ _____		
Signature	We have read the school's Statement of Faith and Educational Philosophy and are in agreement with their content. To the best of my knowledge the above information is correct.		
	_____ PARENT/GUARDIAN SIGNATURE		_____ DATE
	_____ PARENT/GUARDIAN SIGNATURE		_____ DATE

Regents Academy, a Christian and Classical School, admits students of any race, color, national and ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to other students at the school. Regents Academy does not discriminate on the basis of race, color, national or ethnic origin in administration of its educational policies, admissions policies, or other school-administered programs.