



MEMPHIS JUNIOR ACADEMY

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APPLICATION FOR ADMISSION

STUDENT INFORMATION

1ST TIME APPLICANTS-- SUBMIT WITH \$10 NON-REFUNDABLE FEE

LAST		FIRST		MIDDLE	NAME YOU GO BY
ENROLLING FOR SCHOOL YEAR		EXPECTED GRADE <input type="checkbox"/> PK <input type="checkbox"/> K <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10		SOCIAL SECURITY NUMBER	GENDER <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE
HOME ADDRESS				CITY, STATE, ZIP	
HOME PHONE		CELL PHONE		EMAIL	
BIRTH DATE (MM/DD/YYYY)		BIRTH PLACE		ETHNICITY <input type="checkbox"/> AFRICAN AMERICAN/AFRICAN DESCENT <input type="checkbox"/> ASIAN <input type="checkbox"/> CAUCASIAN <input type="checkbox"/> HISPANIC <input type="checkbox"/> TWO OR MORE RACES <input type="checkbox"/> DECLINE TO ANSWER <input type="checkbox"/> OTHER:	
APPLICANT'S SIBLINGS NUMBER OF SISTERS:		NUMBER OF BROTHERS:			
COUNTRY OF CITIZENSHIP <input type="checkbox"/> USA <input type="checkbox"/> OTHER:			BAPTIZED SDA? <input type="checkbox"/> YES, DATE:		RELIGIOUS AFFILIATION/DENOMINATION <input type="checkbox"/> SDA <input type="checkbox"/> OTHER:
NON-US CITIZEN LEGAL STATUS <input type="checkbox"/> PERMANENT RESIDENT <input type="checkbox"/> VISA (TYPE) :			CHURCH WHERE YOU HOLD MEMBERSHIP		

PARENT INFORMATION

LAST		FIRST		RELATIONSHIP TO STUDENT <input type="checkbox"/> FATHER <input type="checkbox"/> MOTHER <input type="checkbox"/> OTHER:
SPOUSE'S NAME				
HOME PHONE		CELL PHONE		EMAIL
HOME ADDRESS				CITY, STATE, ZIP
EMPLOYER		WORK PHONE	WORK ADDRESS	
OCCUPATION		HIGHEST EDUCATION LEVEL <input type="checkbox"/> ELEMENTARY <input type="checkbox"/> HIGH SCHOOL <input type="checkbox"/> BACHELOR'S DEGREE <input type="checkbox"/> POST GRADUATE		
COUNTRY OF CITIZENSHIP <input type="checkbox"/> USA <input type="checkbox"/> OTHER:		RELIGIOUS DENOMINATION <input type="checkbox"/> SDA <input type="checkbox"/> OTHER:		CHURCH WHERE YOU HOLD MEMBERSHIP
SEND BILL <input type="checkbox"/> YES <input type="checkbox"/> NO	RESPONSIBLE FOR BILL <input type="checkbox"/> YES <input type="checkbox"/> NO	APPLICANT LIVES WITH <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SPLIT CUSTODY		<input type="checkbox"/> MARRIED, TOGETHER <input type="checkbox"/> SEPARATED <input type="checkbox"/> DIVORCED NEITHER REMARRIED <input type="checkbox"/> DIVORCED, AT LEAST ONE REMARRIED <input type="checkbox"/> OTHER:

PARENT INFORMATION

LAST		FIRST		RELATIONSHIP TO STUDENT <input type="checkbox"/> FATHER <input type="checkbox"/> MOTHER <input type="checkbox"/> OTHER:
SPOUSE'S NAME				
HOME PHONE		CELL PHONE		EMAIL
HOME ADDRESS				CITY, STATE, ZIP
EMPLOYER		WORK PHONE	WORK ADDRESS	
OCCUPATION		HIGHEST EDUCATION LEVEL <input type="checkbox"/> ELEMENTARY <input type="checkbox"/> HIGH SCHOOL <input type="checkbox"/> BACHELOR'S DEGREE <input type="checkbox"/> POST GRADUATE		
COUNTRY OF CITIZENSHIP <input type="checkbox"/> USA <input type="checkbox"/> OTHER:		RELIGIOUS DENOMINATION <input type="checkbox"/> SDA <input type="checkbox"/> OTHER:		CHURCH WHERE YOU HOLD MEMBERSHIP
SEND BILL <input type="checkbox"/> YES <input type="checkbox"/> NO	RESPONSIBLE FOR BILL <input type="checkbox"/> YES <input type="checkbox"/> NO	APPLICANT LIVES WITH <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SPLIT CUSTODY		<input type="checkbox"/> MARRIED, TOGETHER <input type="checkbox"/> SEPARATED <input type="checkbox"/> DIVORCED NEITHER REMARRIED <input type="checkbox"/> DIVORCED, AT LEAST ONE REMARRIED <input type="checkbox"/> OTHER:

PHOTO & INFORMATION RELEASE

I HEREBY GIVE PERMISSION FOR MEMPHIS JUNIOR ACADEMY TO (PLEASE INITIAL IF ALLOWED)

INITIAL:	Use pictures of this student in the school yearbook, newsletters, advertisements, adopt-a-student, etc.
INITIAL:	Use pictures of this student (names will not be attached) on the school's website & facebook page.
INITIAL:	Include student's information in a school directory to be distributed to parents, staff, and board members. To make this booklet useful to parents, in addition to the student name and grade, the following information will also be included: STUDENT'S BIRTHDAY (NOT YEAR), CELL PHONE, & EMAIL; PARENT NAMES, ADDRESS, HOME & CELL PHONE, EMAIL. ITEMS MAY ALSO BE INCLUDED IN THE SCHOOL YEARBOOK. IF YOU WOULD LIKE ANY OF THESE ITEMS EXCLUDED, PLEASE MARK THROUGH THEM

MEDICAL INFORMATION

NAME OF EMERGENCY DOCTOR	PHONE	DATE OF LAST PHYSICAL EXAM
FACTORS WHICH MAY INTERFERE WITH LEARNING: <input type="checkbox"/> HEARING <input type="checkbox"/> SIGHT <input type="checkbox"/> MALNUTRITION <input type="checkbox"/> HEART <input type="checkbox"/> NERVOUSNESS <input type="checkbox"/> EASILY FATIGUED <input type="checkbox"/> EMOTIONAL PROBLEMS <input type="checkbox"/> LANGUAGE OTHER THAN ENGLISH USED AT HOME		
ALLERGIES <input type="checkbox"/> YES <input type="checkbox"/> NO	FOOD ALLERGIES (MILD OR STRONG REACTION)	OTHER ALLERGIES (MILD OR STRONG REACTION)
EMERGENCY CONTACTS: Other than parents, please list three (3) contacts in case of emergency		
NAME	RELATIONSHIP	PHONE
NAME	RELATIONSHIP	PHONE
NAME	RELATIONSHIP	PHONE

AGREEMENT

MADE THIS _____ DAY OF _____, 20____,
 BY AND BETWEEN MEMPHIS JUNIOR ACADEMY, STUDENT, AND PARENT/GUARDIAN.

IN THE EVENT MEMPHIS JUNIOR ACADEMY AGREES TO ACCEPT THIS STUDENT, WE UNDERSTAND IT WILL BE UNDER THE FOLLOWING CONDITIONS: STUDENT AND PARENT/GUARDIAN ACKNOWLEDGE THE RECEIPT OF THE SCHOOL HANDBOOK AND AFFIRM THAT THEY TAKE RESPONSIBILITY TO READ AND SUPPORT ALL TERMS AND CONDITIONS OF SAID HANDBOOK. STUDENT AND PARENT/GUARDIAN CERTIFY THAT ALL STATEMENTS ON THIS FORM AND INFORMATION INCLUDED HEREIN ARE CORRECT AND COMPLETE. I, THE UNDERSIGNED PARENT/GUARDIAN, ACCEPT FINANCIAL RESPONSIBILITY FOR THIS STUDENT AND DO UNDERSTAND THAT THE STUDENT WILL NOT BE PERMITTED TO TAKE FIRST OR SECOND SEMESTER EXAMS, AND WILL NOT BE ABLE TO PARTICIPATE IN GRADUATION EXERCISES UNTIL THE STUDENT ACCOUNT IS CURRENT OR SATISFACTORY FINANCIAL ARRANGEMENTS HAVE BEEN MADE.

STUDENT SIGNATURE	DATE	PARENT SIGNATURE	DATE
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FOR NEW STUDENTS ONLY (RETURNING STUDENTS MAY SKIP THIS SECTION)

SCHOOL HISTORY: LIST BELOW LAST THREE SCHOOLS ATTENDED - LIST MOST RECENT ONE FIRST

GRADE(S)	SCHOOL	ADDRESS (Street/ City/ State/ Zip)	PHONE	YEARS ATTENDED

DISCIPLINE HISTORY: HAVE YOU EVER BEEN: <input type="checkbox"/> ASKED TO WITHDRAW <input type="checkbox"/> SUSPENDED <input type="checkbox"/> EXPELLED ...FROM ANY SCHOOL YOU HAVE ATTENDED? (EXPLAIN ANY CHECKED ANSWER)	FINANCIAL DISCLOSURE: Does the applicant have a bill at any previous school? <input type="checkbox"/> YES <input type="checkbox"/> NO If "YES" name of school _____ Amt. owed \$ _____ I acknowledge that I am the responsible party for said account and do hereby agree to make financial arrangements with said school, and have them contact Memphis Junior Academy in order for proper records and transcripts to be released. SIGNATURE: _____ DATE: _____
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REFERENCES: (GRADES 5-12 ONLY)
 PLEASE CHOOSE REFERENCES FROM PERSONS WHO KNOW YOU WELL, I.E. PRINCIPAL, TEACHER, PASTOR. AN APPLICATION CANNOT BE CONSIDERED UNTIL ALL REFERENCES ARE RECEIVED. REFERENCES FROM RELATIVES WILL NOT BE ACCEPTED. RECOMMENDATION FORMS ARE AVAILABLE FROM THE OFFICE, WEBSITE, AND WITH REGISTRATION PACKETS.

NAME OF REFERENCE	ADDRESS (Street/ City/ State/ Zip)	PHONE	RELATIONSHIP