

# Gateway Academy

## Application for Admission/Enrollment

### Student Information

Full Name  
(First, Middle, Last): \_\_\_\_\_

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

SSN \_\_\_\_\_ Sex: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

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

Current Grade: \_\_\_\_\_

**The following items are necessary to complete the application process:**

- **Completed Application for Admission**
- **\$250 Application Fee**  
Check # \_\_\_\_\_
- **Most recent academic or psychological testing which must include an I.Q. test and achievement tests for both math and reading**
- **Parent Description of Child**
- **Small Photograph of Child**
- **Student Record Release**
- **Teacher Recommendation Form (submitted separately by current teacher)**

### Parent Information

*PLEASE FILL OUT INFORMATION FOR EACH PARENT INDIVIDUALLY*

	Custodial Parent Check One	Custodial Parent Check One	Non-Custodial Parent Check One	Non-Custodial Parent Check One
	<input type="checkbox"/> Mother <input type="checkbox"/> Step Mother <input type="checkbox"/> Father <input type="checkbox"/> Step Father	<input type="checkbox"/> Mother <input type="checkbox"/> Step Mother <input type="checkbox"/> Father <input type="checkbox"/> Step Father	<input type="checkbox"/> Mother <input type="checkbox"/> Step Mother <input type="checkbox"/> Father <input type="checkbox"/> Step Father	<input type="checkbox"/> Mother <input type="checkbox"/> Step Mother <input type="checkbox"/> Father <input type="checkbox"/> Step Father
Name				
Address				
City, State, Zip				
Home Phone				
Employer				
Occupation/ Title				
Work Phone				
Email Address				
Cell Phone				
Other Contact #				

**Family Information**

Other Family/Household Members	Relation to Applicant	Date of Birth	School

**Former School Information**

Dates Attended (most recent first)	Age/Grade of Student	School Name

**Miscellaneous Information**

	If any questions require further explanation than the space provided, attach a separate page.
Has the child ever repeated a grade?	
Has the child ever been suspended or expelled from school?	
Has the child ever been asked to withdraw from school?	
Is a language other than English regularly spoken at home?	

**Collaboration Release**

I hereby give my permission for Gateway Academy faculty and staff to communicate with the following outside professionals who are involved in the care and education of my child. Please consider providing information on current teachers, speech therapists, occupational therapists, physical therapists, psychologists, tutors and diagnosticians.

Name	Title	Phone

**Authorization for Emergency Medical Attention**

In the event that I cannot be reached to arrange for emergency medical attention, I authorize the faculty and staff members of Gateway Academy to either contact emergency services via 911, or to transport my child to one of the following:

Name of Physician	Location/Address	Phone Number
Name of Clinic or Hospital	Location/Address	Phone Number

**I hereby give my consent for necessary emergency treatment when my child is in the care of the above physician, clinic, or hospital, or 911 emergency personnel.**

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

### Financial Information

Name of Person Financially Responsible for Student:	
Does the family plan to apply for financial aid?	

This information included in this enrollment form is accurate of today's date.

\_\_\_\_\_  
**Parent Signature**

\_\_\_\_\_  
**Date**

### Parent Description

The Admissions Committee will carefully review all submitted testing and reports. However, it is important to us that we have a personal, as well as clinical, perspective on each student considered for admission. On a separate page, please answer the following, providing as much detail as possible.

1. Describe your child in terms of personality, character, and interests.
2. Give a history of your child's school or pre-school experience.
3. Provide a timeline of events leading to your decision to apply at the Gateway Academy.
4. Share your hopes/dreams for your child as related to his/her attendance at the Gateway Academy.
5. Describe any major events that may have affected your child's life in school. (i.e. divorce, death in family, etc.)
6. If not already addressed, detail health, behavioral, or miscellaneous information requiring explanation.

The Gateway Academy admits students of any race, color, national and ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students or employees of the school. The Gateway Academy hires personnel of any race, color, national or ethnic origin. It does not discriminate on the basis of gender, race, color, national or ethnic origin, religion, age, or sexual orientation in administration of its hiring policies, educational policies, admissions policies, scholarship programs, or other school-administered programs.