

# APPLICATION FOR ADMITTANCE

Kindergarten through Eighth (8<sup>TH</sup>) Grades

School Year: 2008-2009



Today's Date: \_\_\_\_\_

Students Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Present Age: \_\_\_\_\_ Present Grade: \_\_\_\_\_

**The following documents are required for admission:**

\_\_\_\_\_ Application

\_\_\_\_\_ Child Information Form

\_\_\_\_\_ Birth Certificate

\_\_\_\_\_ Health Appraisal: children entering kindergarten must also have an eye exam

\_\_\_\_\_ Up-to-date Immunization Records

\_\_\_\_\_ Recent Report Card

\_\_\_\_\_ Individual Education Plan (IEP), where applicable

\_\_\_\_\_ Test Scores (MAT, MEAP, Terra Nova, etc.)

Date Complete/Initial of Intake Staff: \_\_\_\_\_

Official Date of Enrollment: \_\_\_\_\_

District of Residence: \_\_\_\_\_

**Timbuktu Academy of Science and Technology**

10800 E. Canfield / Detroit, MI 48214 / (313) 823-6000 / Fax (313) 823-9748

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## STUDENT BACKGROUND

Today's Date: \_\_\_\_\_

Name of Student: \_\_\_\_\_

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

City of Birth: \_\_\_\_\_ Child Lives With: \_\_\_\_\_

Home Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Last grade completed: \_\_\_\_\_ Last School Attended: \_\_\_\_\_

School address: \_\_\_\_\_

Special talents or attributes your child exhibits: \_\_\_\_\_

Special interests or hobbies: \_\_\_\_\_

Has your child received any special awards? \_\_\_\_\_ Yes \_\_\_\_\_ No

If so, what has she/he received? \_\_\_\_\_

Was your child... \_\_\_\_\_ Full-term \_\_\_\_\_ Premature

Age she/he began to walk: \_\_\_\_\_

Health status: \_\_\_\_\_ Excellent \_\_\_\_\_ Fair \_\_\_\_\_ Poor

Current medication or treatment: \_\_\_\_\_

Does she/he have allergies? \_\_\_\_\_ Yes \_\_\_\_\_ No Explain: \_\_\_\_\_

How many hours of sleep does she/he receive each night? \_\_\_\_\_

Is she/he receiving counseling? \_\_\_\_\_ Yes \_\_\_\_\_ No

Restrictions on Visitations: who is the child not allowed to see? \_\_\_\_\_

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## FAMILY BACKGROUND: PARENT OR LEGAL GUARDIAN

**Female Caregiver's Name:** \_\_\_\_\_

Relation to Child: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

Work Address: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Work Hours: \_\_\_\_\_

Education (check all that apply): \_\_\_\_\_ H.S. \_\_\_\_\_ College: \_\_\_\_\_ Post-Grad: \_\_\_\_\_

**Male Caregiver's Name:** \_\_\_\_\_

Relation to Child: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

Work Address: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Work Hours: \_\_\_\_\_

Education (check all that apply): \_\_\_\_\_ H.S. \_\_\_\_\_ College: \_\_\_\_\_ Post-Grad: \_\_\_\_\_

Marital Status of Parents: \_\_\_\_\_

Names & Ages of Other People in House: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Primary Language Spoken in Home: \_\_\_\_\_

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## PARENT INVOLVEMENT

Are parents/caregivers available to help with field trips?    Yes                      No

Do you have special interests you would like to share with students or staff? Please explain:

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Would it be possible to arrange a field trip at your place of employment?    Yes    No

If yes, what days/times are best? \_\_\_\_\_



## **FIELD TRIP INFORMATION**

I hereby give permission to Timbuktu Academy for my child to be transported in a vehicle and/or participate in field trips.

Signature of Parent/Guardian: \_\_\_\_\_

Date signed: \_\_\_\_\_



## **PERMISSION FOR USE OF MEDIA IMAGES**

I hereby give my permission to use photographs, reproductions and/or sound reproductions of my child for promotional purposes. Such activities may include advertising, publicity and promotion of school events (plays, open house, etc.)

Signature of Parent/Guardian: \_\_\_\_\_

Date signed: \_\_\_\_\_



## **EMERGENCY CONTACTS**

Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

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