

The Academy of Coastal Carolina

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New Student Application 2015-2016

Instructions: Please fill out COMPLETELY. An incomplete form will delay enrollment

SECTION 1 STUDENT INFORMATION	APPLYING FOR GRADE: _____
Applicant's Name [Last] _____, First] _____ [Middle] _____	
Preferred Name _____	Date of Birth _____ []Female [] Male
Primary Address: _____	City _____ State _____ Zip _____
Home Phone () _____	Student Cell Phone: () _____
Primary E-Mail _____	Secondary E-Mail _____
Last School Attended _____	Location _____ Phone No. _____

SECTION 2 FAMILY INFORMATION	
Father: Last Name _____ First Name _____ *Address _____ *City _____ State _____ Zip _____ <i>*If different from student.</i> Marital Status [] Married [] Widower [] Separated [] Divorced [] Remarried Employer _____ Occupation _____ Work Phone _____ Cell Phone _____ Lives with Student [] Yes [] No Receives Mail/Billing [] Yes [] No Church Attendance [] Regular [] Seldom [] Never Church Affiliation _____	Mother: Last Name _____ First Name _____ *Address _____ *City _____ State _____ Zip _____ <i>*If different from student.</i> Marital Status [] Married [] Widower [] Separated [] Divorced [] Remarried Employer _____ Occupation _____ Work Phone _____ Cell Phone _____ Lives with Student [] Yes [] No Receives Mail/Billing [] Yes [] No Church Attendance [] Regular [] Seldom [] Never Church Affiliation _____

Names, ages, grades and school name for all children in the family			
Name _____	Age _____	Grade _____	School _____
Name _____	Age _____	Grade _____	School _____
Name _____	Age _____	Grade _____	School _____
Paternal Grandparents Name _____		E-Mail _____	
Mailing Address _____		City _____	State _____ Zip _____
Maternal Grandparents Name _____		E-Mail _____	
Mailing Address _____		City _____	State _____ Zip _____

SECTION 3 EMERGENCY INFORMATION	
Family Physician _____	Phone _____
Emergency Contact #1 _____	Relationship _____ Phone _____
Emergency Contact #2 _____	Relationship _____ Phone _____

SECTION 4**PARENT QUESTIONNAIRE**

Who recommended ACC to you? _____

1. What are your academic goals for your child? _____

2. How do you anticipate your child will benefit from being at The Academy of Coastal Carolina?

3. What do you anticipate your child's academic challenges will be? _____
4. What do you anticipate your child's social challenges will be: _____
5. Describe your child's strengths: _____
6. List all previous schools your child has attended: _____
Dates _____
Dates _____
Dates _____
7. Has your child ever repeated a grade? Yes No
8. If yes, please explain: _____
9. Has your child had disciplinary problems in school? Yes No If yes, please explain: _____

SECTION 5**HEALTH INFORMATION**

The following important medical information will help The Academy better serve your child.

- Yes No Pre-mature birth
- Yes No Asthma
- Yes No Food Allergies _____
- Yes No Medical Allergies _____
- Yes No Normal Vision Date of last eye exam _____ Where? _____
- Yes No Normal Hearing
- Yes No Diagnosed for ADD or ADHD If yes, please attach a copy of the diagnosis.
- Yes No Medicated for ADD or ADHD If yes, identify type of medication _____
- Yes No Immunizations up-to-date
- Yes No Hospitalized in the last 12 months? If yes, briefly explain _____
- Yes No Diagnosed for depression or other emotional conditions. If yes, briefly explain _____

SECTION 6 PARENT/GUARDIAN AGREEMENT

Parent/Guardian Name (Please Print) _____

By signing below I/we acknowledge and agree to cooperate and support the following:

- The policies and procedures stated in the current Parent/Student Handbook
- The administration and teachers by respects and verbal support, voluntary efforts for school functions and fervent prayer.
- The academic success of my child by insuring that he/she remains current in all class requirements including but not limited to: class attendance with minimal absences, class participation, daily homework assignments and thorough preparation for tests/quizzes and class projects.
- The compliance of my child to the student dress code and code of conduct outlined in the current Parent/Student Handbook.
- The use of my child’s picture for official school publications, including the school website, FaceBook Page, brochures, newspaper ads and press releases and the school newsletter.
- The inclusion of our name, phone number and e-mail address in a school directory.
- The timely payment of all fees and tuition as stated in this application and the current Parent/Student Handbook. I understand and accept all tuition, fees payments and penalties as stated in this application packet.

Parent Signature _____ Date _____

Financially Responsible Party (if different from parent) _____

Please select one of the following payment schedules:

- _____ Annual Payment in Full Due July 1, 2015
- _____ Semi-Annual Payments Due July 1, 2015 and January 15, 2016
- _____ 10 Installment Payments (FACTS*) Payments Begin in August, 2015: \$43.00 Annual Fee
FACTS Information and Enrollment at www.theacademyedu.com

\$500.00 Deposit	Due May 15th
Curriculum Fees	Due May 15th
Late Enrollment	Begins June 2

SECTION 7 STUDENT COVENANT

Student Name (Please Print) _____

By signing below I acknowledge and agree to fully cooperate in the following areas:

- I will follow the policies and procedures stated in the current Parent/Student Handbook including dress code, attendance and discipline policies.
- I will demonstrate respect for my parent(s)/guardian(s), the school administration and teachers and my fellow students in thought, word and deed.
- I will strive to achieve self-discipline in my studies by practicing good study habits at school and at home. I will complete all class and homework assignments on time and will enthusiastically participate and contribute in class. I will write own assignments and to make up any missed assignments according to my teachers requirements. I will discuss with my teachers any assignments that I do not understand so that I will be able to complete them in a timely manner.
- I understand that the object of The Academy of Coastal Carolina is to help train me and with my fellow students both spiritually and academically, and therefore I commit myself to my studies.
- I will practice good stewardship by guarding against abuse or misuse of any school property.
- I will act responsibly and respectfully when I am away from school, being ever mindful that I represent my school in all that I do and all that I say.
- I agree that God loves me and He empowers me to live a Godly life. – Galatians 5:16

Student Signature _____ Date _____