



Cultivating a Curiosity for Education

In a Small School Environment

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STUDENT APPLICATION MIDDLE AND UPPER SCHOOLS (6-12)

Application Checklist

- Completed Application Form
- Application Fee (\$250)
- Current School Official Transcript
- Two(2) Teacher Recommendations

(see Application Steps for Explanation)

Complete the application packet and return by mail to

Pacific Academy Encinitas
Admissions Office

679 Encinitas Blvd, #205
Encinitas, CA 92024

Application Fee

Enclosed with this application is a one-time new student application fee of \$250 which will be used to process my child's record. I understand that this fee is non-refundable.

Applying for Grade _____ Cashier's Check/Bank Draft (Check # _____)
Academic Year _____ Parent's Initial _____ Date _____

Student's General Information

Student's Full Name _____

Student's date of birth (M/D/Y) _____

Place of birth _____

Gender: Male Female Student Age _____

Student's Social Security Number _____

Home Address

City _____ State _____

Zip or postal Code _____ Country _____

Home phone(____) _____

Cell phone(____) _____ Email _____

A Recent Photograph

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Parent/Guardian Information

Are both parents living No Yes

If deceased, which? _____

Student lives with (check all that apply):

Mother Father Stepfather Stepmother Other(s): _____

Father's first name _____ Last name _____ Middle name _____

Father's employer and position _____ Father's education _____

Father's Full Address _____

Father's Work Number _____ Cell Phone _____ Email _____

Mother's first name _____ Last name _____ Middle name _____

Mother's Full Address _____

Mother's Work Number _____ Cell Phone _____ Email _____

Mother's employer and position _____ Mother's education _____

If your parents are deceased or separated, who is your legal guardian? _____

Student's Brothers and Sisters Information

Name _____ Age _____ School _____

Name _____ Age _____ School _____

Name _____ Age _____ School _____

Financial Responsibility

Financial responsibility for the student's tuition will be assumed by _____

Health

Describe the student's general health _____

Does he/she have any physical handicaps or allergies that would limit his/her participation in the full range of school activities? _____

Has the student ever suffered any serious injury or illness? _____

Is the student under the care of a physician, psychiatrist or psychologist? If so, please describe briefly: _____

School

Student's Present School _____ Enrolled Since _____ Grades Attended _____

Address _____

School Office Phone _____ Teacher or Adviser _____

Previous School _____ City/State _____ Grades Attended _____ Years Attended _____

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Our primary goal in the admission process is to try to find the right fit between schools, student and family. Please answer the following questions to help us get a better sense of your son or daughter as a unique individual and the values around which you have built your family.

How did you hear about PA? Internet Postcard Newspaper Friends, by _____

Name and relationship of relatives and/or friends who are applying to Pacific Academy _____

Has the applicant had any form of achievement, intelligence or psychological testing done during the last 3 years? Name of the Test _____ Administered By _____

What is it about PA that appeals to you? Why do you think it would make a good choice for your child?

What are your immediate goals for your child? _____

Do you see your son or daughter as a fairly self-motivated and independent learner, or do you sense that he/she needs close supervision to stay on task? _____

What responsibilities does your son/daughter have at this stage in his/her life around your home ?

Describe your child's social style in terms of relationships to others (peers, adults, family) in new settings and familiar situations.

Does your child have specific interests or hobbies? _____

Language spoken at home _____

How would you describe your son or daughter's learning style? _____

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Has your son or daughter had any previous difficulties in school? If so, what supports have you or his/her school provided? _____

What would else you like the Admissions Committee to know about your child? _____

A non-refundable fee of \$250.00 along with a copy of your child's transcripts must accompany this application. Your application is regarded as a formal request for consideration of your son and daughter as a potential student at PA, and as authorization to our office to obtain transcripts and recommendations from previous schools.

Parent Agreement

I certify that all information given in the application process is complete and accurate. I understand that failure to discuss information about the applicant's medical, educational or emotional history may affect the school's admissions decision and that the school reserves the right to reverse an admissions decision, even after acceptance and enrollment, if such information has been withheld from the school. I further understand acceptance is based on approval of credit and that I may be subject to a credit check by Pacific Academy (GTA).

Print Parent/Guardian's Name: _____

Parent/Guardian's Signature: _____ Date ____ / ____ / ____

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