

Student Application for 20 _____ / 20 ____ School Year

Student Information: Student Name: first, middle, last ______ Date of Birth: _____ Gender: Male Female _____ Home Address: Student's Cell: _____Student's Email: _____ **Parent Information:** Father / Guardian Name Phone Number : _____ Email: _____ Mother / Guardian Name_____ _____ Email:_ Phone Number: Step Parent(s) Name Phone Number : _____ Email: _____ Resides with: _____ Both Parents _____ Father ____ Mother ____ Other **Educational Background:** Name(s) of ALL public / private school(s), cyber and / or homeschool curriculum(s) the child has attended (include grades with each): Most Recent Grade Completed School District of Residence

Has your child ever been suspended or expelled from a school? If yes, please explain the circumstances and resulting action plan.

If previously homeschooled: evaluator's name, email, phone number:

List one educational reference that we may contact (ex: homeschool evaluator, co-op director, guidance counselor, teacher). Include name, position and phone number:

Has your child ever been diagnosed with or exhibit symptoms of any of the following:

Hearing Impairment	Oppositional Defiant Disorder (ODD)
Autism	Depression and / or extreme anxiety
Physically handicap	Asperger's Syndrome
Visual Impairment	Emotional Disturbances
Obsessive Compulsive Disorder (OCD)	Behavioral Disorder
Dyslexia, Dysgraphia, or Dyscalculla	Brain Injury
Speech or Language Issues	Attention Deficit Disorder (ADD)
Other (please specify):	Attention Deficit Disorder with hyperactivity (ADHD)

Allergies:				
Please comment on any checked diagnosis' above:				
Has your child ever had an IEP or 504 plan? If yes, please explain:				
Has your child ever had a psychological evaluation? Date:				

Does your child have any special needs or accommodations that we should know about to help facilitate learning for him or her? If yes, please explain.

In what academic .	areas is your child most successful ? Explain.					
In what academic areas does your child experience the most frustrations? Explain. List specific hobbies / extracurricular / community service / sports / church activities:						
Student's shirt size for spiritwear: Youth Size XS-XL / Adult Size XS-XXL						
Preference for tuition payment, please check one:						
Payment	Payment in full (due August 1st)					
Bi-annua	Bi-annual Payment (due August 1st and January 1st)					
Quarterly	Quarterly Tuition Payment (August 1st, November 1st, January 1st and March 1st)					
Parast O' t		D. I.				
Parent Signature Date						
Office use only	Date received	Check Number				

- Crossroads reserves the right to review the information stated above with the given evaluator.
- Crossroads Admissions does not discriminate on the basis of race, gender, nationality, ethnic origin, family status, parental employment or association with a board member or employee. However, Crossroads is an independent, tax exempt 501(c)(3) education led by a board of trustees. As such, we reserve the right to make admissions on the basis of religious commitment of faith.
 - Please fill out all forms. Incomplete forms will not be accepted.
 - Please note Crossroads is not prepared to meet the needs of students with moderate to severe learning, emotional or behavioral difficulties.
 - Completion of application does not guarantee acceptance into Crossroads. Admission to the program is subject to board approval and current openings.