

Application for Admission

(for RE-enrollment of RETURNING FAMILIES)

PLEASE NOTE: A non-refundable application fee (\$100 per family) is due with this application. This payment, along with your application, is required to begin the admissions process for your child. Receipt of these items, however, does not guarantee the enrollment of your child. Please note that the application fee will be waived for applications for students from returning families submitted by March 1.

Date of Application:	Sc	hool year for v	vhich you are applying:			
Do you intend to apply for fir	nancial assistance to h	tuition expenses at Veritas	? Yes	No		
I. Names of Children Appl	ying For Admission	. Please begin	with the oldest child to the	youngest. Please	e use full le	gal names.
If you are applying for Pre	-Kindergarten, please	e indicate 2-day	or 5-day. If applying for K	Kindergarten, plea	se indicate	e 3-day or 5-day.
Full Legal Name			Preferred Name	Date of Birth	Sex	Grade Entering
1.			_			
2.			_			
3.			_			
4.						
5						
	State:			ne:		
			Home Pho			
			Father's Email:			
Street Address: (if different th	· -					
				Mobile Phone:		
Father's Employer:		Work Phone:				
Mother's Name:						
Street Address: (if different th	nan student)					
City:	State:	Zip:	Mobile Pho	ne:		
Mother's Employer:		Work Phone:				
Family's Preferred Email Addr	'ess:					
f the child's parents are not n whether the non-custodial parrangements for the child an	parent should receiv	e information	about the child's progre			
Are you a member of a local c	:hurch? Nam	e of your churc	h:			
Do you attend your church re	gularly (at least three	Sunday mornin	ngs per month)?			

Veritas Academy does not discriminate on the basis of race, color, national or ethnic origin in any employment practice, educational program, or any other Academy-administered program, activity or service, nor does it discriminate on the basis of race, color, national or ethnic origin, in administration of its educational policies, admissions policies, scholarship and financial aid programs, and athletic and other school-administered programs.

Mailing Address: PO Box 8332, Savannah, GA 31412 • Street Address: 25 West Oglethorpe Lane, Savannah, GA

	Phone: (912) 238-1222 • Fax: (912) 234-0566 • www.VeritasSavannah.org • info@VeritasSavannah.org
III.	Student Health Information
۱.	Is your child currently under a physician's care or receiving medication for any reason? If yes, please explain:
2.	Please describe any medical or health issues (heart, hearing difficulties, speech impediments, asthma, etc.) and any significant illnesses,
	diseases, conditions, allergies, injuries or hospitalizations.
V. I	Family Commitments
1.	Have you read the current Veritas Academy Parent/Student Handbook (available on our website or from the school office)? YESNO
2.	Are there any points in our policies, mission, philosophy, or approach to education which are inconsistent with your beliefs? YES NO
	If yes, please explain:
3.	Do you understand that the Westminster Confession of Faith, with its Larger and Shorter Catechism (linked on our website), is the doctrinal
	foundation of Veritas Academy and that classical Protestantism <u>provides the perspective from which the entire curriculum will be taught?</u>
	YES NO
	Do you understand that as parents of full-curriculum students, you are expected to provide 10-15 minutes of daily home chapel/family
	devotions and Bible instruction for your children and agree to fulfill this requirement? YESNO
5. I	Do you understand that as parents of full-curriculum students, you are expected to read aloud to your child(ren) 15-30 minutes/day from
	the book-lists and schedules provided by Veritas Academy and agree to fulfill this requirement? YES NO
6.	Do you understand that as parents of full-curriculum students you are expected to set aside a reading hour each day devoted exclusively
	to your child's reading and agree to fulfill this requirement? YESNO
7.	Do you understand that Veritas is a home school learning center that operates on a condensed day schedule and that parents of all
	students enrolled at Veritas (K-12) are required by law to register as a homeschooler and submit a Declaration of Intent form to the
	Georgia State Department of Education by September 1 of each school year? YESNO
ha Sta	y signature below herein evidences that the information in this application is correct to the best of my understanding. I also state that I we read and understand the foundational documents of Veritas Academy (Mission, Foundational Commitments, Approach, Goals, atement of Faith, and Statement on Sanctity of Life, Marriage, Gender, and Sexuality) and that I agree to have my children taught in cordance with these. My signature below also evidences that I have read the current Parent/Student Handbook and, if my child is remitted to Veritas Academy, agree to faithfully and fully abide by the policies of the school as stated therein.
Fa	ther's Signature: Date:

Date:

Mother's Signature: