



VERITAS ACADEMY
CLASSICAL ▼ CHRISTIAN ▼ COVENANTAL

Application for NEW SIBLING Admission

(for NEW Siblings from RETURNING FAMILIES)

Date of Application: _____ School year for which you are applying: _____ -- _____

Do you intend to apply for financial assistance to help with your tuition expenses at Veritas? _____ Yes _____ No

I. Names of Siblings Applying for Admission. Please begin with the oldest sibling to the youngest. Please use full legal names.

IF YOU ARE APPLYING FOR PRE-KINDERGARTEN, PLEASE INDICATE 3-DAY OR 5-DAY.

	Full Legal Name	Preferred Name	Date of Birth	Sex	Grade Entering
1.	_____	_____	_____	_____	_____
2.	_____	_____	_____	_____	_____
3.	_____	_____	_____	_____	_____
4.	_____	_____	_____	_____	_____

(If additional space is needed, please answer on an additional sheet of paper.)

II. Family Information:

Street Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

Father's Name: _____ Father's Email: _____

Mother's Name: _____ Mother's Email: _____

Family's Preferred Email Address: _____

III. Student Information

Please list the schools this sibling has previously attended beginning with the most recent. If more space is needed, please provide the information on a separate sheet of paper.

Child	School Name	School Address Street & # or PO Box, City, State, Zip	Phone Number	Dates: From/To	Grade Completed
			()		
			()		
			()		

Veritas is not staffed to teach children with significant or serious learning disabilities or behavioral issues. We would appreciate your assistance in answering the following questions as candidly and honestly as possible. (If more than one sibling is applying, please note to which child you are referring.) Further elaboration on your answers may be requested if necessary.

1. Does this child have any special learning needs (ADD, ADHD, dyslexia, etc.) that would require regular or special attention in a traditional classroom setting? _____ If yes, please explain: _____

2. Has this child ever been referred for testing or placed in a special program? _____ If yes, please explain: _____

3. Has this child ever seen or been referred to a counselor/doctor/psychiatrist for any type of social, behavioral, emotional, or mental issue? _____
 If yes, briefly state the nature of the issue: _____

4. Has this child ever taken medication for a learning or behavioral issue? _____ If yes, please explain: _____

5. Has this child ever experienced any disciplinary problems at a previous school? (i.e. Has a teacher or administrator *EVER* contacted you regarding your child's behavior?) _____ If yes, please explain: _____

6. Has this child ever repeated a grade for any reason? _____ If yes, please explain: when and why? _____

7. Please describe any medical or health issues (*heart, hearing difficulties, speech impediments, asthma, etc.*) and any significant illnesses, diseases, conditions, allergies, injuries, surgeries, or hospitalizations. _____

8. Do you understand that before this child starts school at Veritas Academy, the parent(s) must submit a Georgia Immunization Certificate (form #3231) or a valid medical exemption or a valid affidavit of religious exemption? YES _____ NO _____

TO MAKE THIS APPLICATION COMPLETE, PLEASE INCLUDE THE FOLLOWING:

For ALL NEW Sibling Students:

- Completed Application for NEW Sibling Admission
- Two Letters of Recommendation must be completed by teachers and/or administrators from the most recent school attended (preferably one teacher and one administrator).

Additional documents for New Sibling applicants entering 1st grade or above (not required for Pre-K & K):

- A copy of the most recent standardized test scores for each student applying (e.g. Stanford Achievement Test or Iowa Test of Basic Skills, etc.)
- A copy of the report cards from the two most recent grading terms for each student applying.
- Samples of the student's recent academic work for each student applying (*Photocopies* of two recent math assignments, two recent writing assignments, and a list of recent books read).

YOUR APPLICATION WILL NOT BE PROCESSED UNTIL ALL OF THE ABOVE DOCUMENTS ARE RECEIVED. THANK YOU.

My signature below herein evidences that the information in this application is correct to the best of my understanding. I also state that I have read and understand the foundational documents of Veritas Academy (Mission, Foundational Commitments, Approach, Goals, Statement of Faith, and Statement on Sanctity of Life, Marriage, Gender, and Sexuality) and that I agree to have my children taught in accordance with these. My signature below also evidences that I have read the current Parent/Student Handbook and, if my child is admitted to Veritas Academy, agree to faithfully and fully abide by the policies of the school as stated therein.

Father's Signature: _____ Date: _____

Mother's Signature: _____ Date: _____

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.