



NEW STUDENT APPLICATION

I. Student Information

Student Name: _____
last *middle* *first* (*preferred*)

Grade 2019-2020 _____ Date of birth: _____ Soc. Security # _____

Address: _____

City: _____ State: _____ Zip: _____

II. Parent Information

Father's Name: _____

Address: (if different from above) _____

City: _____ State: _____ Zip: _____

Cell Phone: _____ Other phone (work or home) _____

Email: _____

Occupation: _____ Position/Title: _____

Mother's Name: _____

Address: (if different from above) _____

City: _____ State: _____ Zip: _____

Cell Phone: _____ Other phone (work or home) _____

Email: _____

Occupation: _____ Position/Title: _____

Student lives with: _____ **Mother/Father** _____ **Mother** _____ **Father** _____ **Guardian**

III. School Information

School currently attending: _____ Grades attended _____

School address: _____

List any other schools attended: _____

Reason for leaving current school: _____

Has your child ever been dismissed or suspended from school? ____ yes ____ no

Does your child have an IEP or any diagnosed learning challenges or difficulties? ____ yes ____ no

Briefly share why you would like your child to attend The Oaks School?

Describe your child's greatest strengths. _____

Describe your child's interests and extracurricular activities. _____

IV. Church Affiliation

What church do you currently attend? _____

Please email completed application to admin@theoaksschool.org or mail to The Oaks School, 2201 Executive Park Dr., Opelika, AL 36801.

Include the application fee of \$125/family if submitted by Feb. 15, 2019 or \$200/family if submitted by April 1, 2019.