



ORINDA ACADEMY

19 Altarinda Road, Orinda, CA 94563 • (925) 254-7553; FAX (925) 254-4768
www.orindaacademy.org • info@orindaacademy.org

2012 - 13 ADMISSION APPLICATION

Courtesy Filing Deadline: December 1, 2011

Grades 6th through 12th

Final Filing Deadline: January 12, 2012

Application Fee: \$75

APPLICANT INFORMATION:

Applicant Name: *(first, middle, last)* _____ Male Female

Applying for Grade: 6th 7th 8th 9th 10th 11th 12th Begin enrollment in : _____

Applicant's Primary Address _____

City _____ State _____ Zip _____ Home Phone _____

BirthDate (month/day/year) _____ Place of Birth (country name) _____ Country of Citizenship _____

What language is spoken at home? _____

If a citizen of country other than United States, will I-20 Immigration Form be needed? Yes No

If applicant visa based on I-20 not needed, what form of visa will applicant use to enter the U.S.? _____

Social Security number of applicant, if available _____

Has student applied before for admission? Yes No To enter what grade? _____

FAMILY INFORMATION:

Parent/Guardian 1

Parent/Guardian 2

Name in Full *(include Dr., Mr.)* _____

Name in Full *(include Dr., Mrs., Ms.)* _____

Home Address *(if different from above)* _____

Home Address *(if different from above)* _____

City _____ ST _____ Zip _____

City _____ ST _____ Zip _____

Home Phone _____

Home Phone _____

Cell Phone _____

Cell Phone _____

Occupation _____

Occupation _____

Employer _____

Employer _____

Work Phone _____

Work Phone _____

Email _____

Email _____

Fax _____

Fax _____

Parents' Marital Status: Married Separated Divorced

If separated or divorced, with whom does the applicant reside? _____

Person(s) financially responsible for the applicant? _____

Please indicate who should receive all correspondence/report cards for this applicant. Father Mother Both

GUIDANCE AND ADMISSION DATA:

List each school the applicant has attended for the past three years.

School Name	School Name
Address	Address
City ST Zip	City ST Zip
Dates of Attendance _____	Dates of Attendance _____
Grade(s) finished or in progress _____	Grade(s) finished or in progress _____

If applicant has a disability and would like to request accommodations in the admissions process, please explain here. Documents from a qualified professional should either be enclosed with this application or sent directly to the Admissions Office. _____

Please indicate applicant's approximate recent academic grade average: _____

Has applicant skipped a grade? Yes No If yes, which grade? _____

Has applicant repeated a grade? Yes No If yes, which grade? _____

Has applicant ever been referred for or received professional, psychological or educational testing, or personal counseling?
 Yes No
 If yes, please provide the Admissions Office with a copy of the test results or consultation report and describe below.

Has applicant ever been dismissed from any school for any reason? Yes No

Suspended? Yes No

Asked to withdraw? Yes No

Received severe disciplinary censure? Yes No

If "Yes" to above questions, please attach full details, including name of school, year, and contact person for further details.

Is the applicant interested in participating in organized sports? Yes No Please indicate the applicant's athletic interests, current team participation and other interests or talents? _____

How did you learn about Orinda Academy? _____

Do you wish to receive information about Orinda Academy's financial aid program based on family need? Yes No
 Have you already received the appropriate materials? Yes No

CONFIDENTIALITY

I certify that the information contained in this application is true and accurate, to the best of my knowledge. I understand that failure to share all requested information may jeopardize my child's continuance at Orinda Academy if he/she is accepted. I hereby authorize Orinda Academy to contact schools and other sources to obtain information to support this application and I will not seek access to confidential recommendation and evaluation materials before or after my/our child's/ward admission. The undersigned releases every person and institution from any and all liability resulting from or pertaining to the furnishing of records, documents and other information provided to Orinda Academy for that purpose.

Parent's Signature	Date
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