

**Ava White Academy**

**Application for Admission**

578 S. Enota Drive N.E,  
Gainesville, Ga. 30501  
Phone 770-536-6898 Fax: 770-536-6898  
E-mail: [whiteavatutor885@bellsouth.net](mailto:whiteavatutor885@bellsouth.net)

Date Applied: \_\_\_\_\_

**Student Information:**

Student's Full Name \_\_\_\_\_ Preferred Name \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Birthdate \_\_\_\_\_ Age \_\_\_\_\_ Sex \_\_\_\_\_ Social Sec # \_\_\_\_\_

Address: \_\_\_\_\_

Street Address \_\_\_\_\_ County: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Applying for admissions into the \_\_\_\_\_ grade at Ava White Academy. My child has currently completed the \_\_\_\_\_ grade at \_\_\_\_\_ school (give school name, address & phone number)

**Parent/Guardian Information:**

Parent/Guardian Name(s): \_\_\_ Mr. & Mrs. \_\_\_ Mrs. \_\_\_ Mr. \_\_\_ Dr. \_\_\_ Other \_\_\_\_\_

Relationship to Applicant: \_\_\_\_\_

Marital Status: \_\_\_\_\_ If divorced, who has custody? \_\_\_\_\_

Does Ava White Academy have permission to provide records and reports to the parent not living in the home? \_\_\_ Yes \_\_\_ No

Applicant resides with: \_\_\_ Parents \_\_\_ Mother \_\_\_ Father \_\_\_ Other \_\_\_\_\_

Person responsible for fees \_\_\_ Parents \_\_\_ Mother \_\_\_ Father \_\_\_ Other \_\_\_\_\_

Send Official Correspondence to \_\_\_ Parents \_\_\_ Mother \_\_\_ Father \_\_\_ Other \_\_\_\_\_

Father's Name \_\_\_\_\_

Mother's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

(If Different from above)

(If different from above)

Phone: Home \_\_\_\_\_

Phone: Home \_\_\_\_\_

Work \_\_\_\_\_

Work \_\_\_\_\_

Other \_\_\_\_\_

Other \_\_\_\_\_

E-mail: \_\_\_\_\_

E-mail \_\_\_\_\_

Occupation: \_\_\_\_\_

Occupation: \_\_\_\_\_

Employer: \_\_\_\_\_

Employer: \_\_\_\_\_

Give name, age, school, and grade of other children in family:

**Name** \_\_\_\_\_ **Age** \_\_\_\_\_ **School** \_\_\_\_\_ **Grade** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Additional Comments** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Background Information:**

Was your child adopted? \_\_\_\_\_ If yes, at what age? \_\_\_\_\_ Child's Pediatrician: \_\_\_\_\_

Who tested your child for a learning disability? \_\_\_\_\_

Other schools attended by the applicant:	School	Grade
	_____	_____
	_____	_____
	_____	_____

Has your child been expelled or suspended? \_\_\_\_\_ If yes, explain \_\_\_\_\_

Has your child been involved with law enforcement or juvenile authorities? \_\_\_\_\_ If yes, explain \_\_\_\_\_

Describe any major illness, injury, and/or health issues that your child has had and at what age: \_\_\_\_\_

Is your child presently taking medication? \_\_\_\_\_ If yes, describe \_\_\_\_\_

What do you consider the child's chief assets, abilities and interests? \_\_\_\_\_

What do you consider the child's main weaknesses or limitations? \_\_\_\_\_

Why do you desire admission to Ava White Academy for your child? \_\_\_\_\_

**I certify that all the information contained in this application is complete and accurate to the best of my knowledge.**

\_\_\_\_\_  
Parent/Guardian signature

\_\_\_\_\_  
Date