



CALDWELL ACADEMY

Classical • Christian • Community

2900 Horse Pen Creek Road, Greensboro NC 27410
Phone (336) 665-1161 / Fax (336) 665-1178

STUDENT APPLICATION FORM 2019-2020 School Year

Please fill out this application completely and return with a nonrefundable \$100 application fee and the signed Release of Records form. Checks should be made payable to Caldwell Academy. Kindergarten applicants must be 5 years of age by August 1st in order to be eligible for Kindergarten admission.

Office Use
Date Received _____
Payment _____
Release Form Sent _____

Caldwell Academy admits young men and women from any race, religion, and national or ethnic origin.

Applicant: Full Name: _____
Last First Middle (Name child responds to in class)

Applying for Grade: _____ Sex: M____ F____ Date of Birth: ____ / ____ / ____

Address: _____
Street City State ZIP County

Family Primary Phone: _____ Race/Ethnicity (for statistical purposes only): _____

Family:

Applicant lives with: Both Parents _____ Father _____ Mother _____ Grandparent(s) _____ Other: _____

Check ALL that apply: Father is deceased _____ Parents are divorced _____ Father is remarried _____
 Mother is deceased _____ Parents are separated _____ Mother is remarried _____

If one or both parents have legal custody, please check one of the following: Father only ____ Mother only ____ Both ____

Father/Male Guardian: _____
Title (Dr., Mr., etc.) First Name M.I. Last Name Goes by

Home Address: _____
Street City State ZIP

Cell Phone: _____ Email: _____ Place of Employment: _____

Mother/Female Guardian: _____
Title (Dr., Mrs., etc.) First Name M.I. Last Name Goes by

Home Address: _____
Street City State ZIP

Cell Phone: _____ Email: _____ Place of Employment: _____

Stepmother: First Name _____ Last Name _____ Cell Phone _____ Email _____

Stepfather: First Name _____ Last Name _____ Cell Phone _____ Email _____

Are all parents/guardians listed allowed to pickup/serve as emergency contacts? _____
If "no", please explain.

Family Church Affiliation: _____

How did you hear about Caldwell? A current Caldwell family: _____ Other: _____

Education

Child's current school: _____ Fax: _____
Name

Street City State ZIP Phone

Current teacher's name: _____ Email: _____

List all other schools attended including kindergarten and preschool(s). List most recent school first.

Name of School	Grades	Years	City	State

Does your child have any health or physical challenges of which the school would need to be informed? **Yes** ___ **No** ___
If "yes", please explain. _____

Has your child ever consulted or been referred to a psychiatrist, psychologist, or psychiatric social worker for professional evaluation or assistance? **Yes** ___ **No** ___ If "yes," please explain. _____

Does your child have an identified learning difference and/or ADD, ADHD?* **Yes** ___ **No** ___ If "yes," please name or describe the learning difference and the interventions necessary for your child to succeed in school. _____

What services has your child received? _____

Has your child exhibited behavioral/discipline issues at school, preschool, or daycare?* **Yes** ___ **No** ___ If "yes," please describe the issue(s) and solution(s)/intervention(s) necessary for your child to succeed in school. _____

***Caldwell Academy is academically rigorous. In order to maintain the integrity of the classical curriculum, Caldwell does not offer classroom or curriculum modifications. For students with diagnosed learning differences, accommodations may be offered based on relevant and up-to-date formal evaluation results.**

Other Information

Siblings (Please list all other children younger than 18 who are living with the family.)

Name	Birth Date			Current School	Current Grade
	month	day	year		

What are your child's areas of greatest school-related accomplishment? _____

What are your child's areas of greatest non-school-related accomplishment? _____

Does your child play a sport or a musical instrument? _____
If so, please specify: _____

Do you have any comments regarding athletics or fine arts? _____

What additional information should we know regarding your child and his/her placement at Caldwell Academy?

Please explain why you wish to enroll your child in Caldwell Academy. _____

Have you read *An Introduction to Classical Education* by Christopher Perrin? **Yes** ___ **No** ___ If "No", please pick up a copy from the main office and review.

Are you willing to participate in the following as part of the application process? **Yes** ___ **No** ___

- Pay to have your child participate in academic screening.
- Ensure that ninth- through twelfth-grade applicants submit the student admission essays (found at end of this application).
- Submit a recent photograph of the applicant.
- Submit any formal testing documents and any information specific to any identified learning differences or ADHD, including formal or informal plans used in your child's previous school(s).

Homeschooled applicants, please complete the reverse side.

FOR HOMESCHOOLED APPLICANTS ONLY: Complete in lieu of Release of Educational Records form.

- Please record all standardized testing information. (Attach a photocopy of the reports.)

Name of Test	Date Administered	Results

- Please report other objective student performance/achievement/psychological information for which you have results. (Attach a photocopy of the results.)

- **Please attach all health records including immunization (required), vision, and hearing.**

- What curriculum did your child use? _____

- Please record your observations of your child as a student (strengths, weaknesses, progress, learning style, etc.).

- **Please list names and telephone numbers of three adults who have recently worked with your child in a group educational setting (e.g., Sunday School teacher, Scout leader, coach). We will be mailing teacher observation forms to each of these contacts.**

1. _____

Name	Phone	Street Address	City	State	ZIP
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2. _____

Name	Phone	Street Address	City	State	ZIP
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3. _____

Name	Phone	Street Address	City	State	ZIP
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Rhetoric School Student Questionnaire

1 . Do you consider yourself to be a Christian? Yes ____ or No ____

If “no” why are you interested in attending a Christian high school?

If “yes” can you describe your relationship with Jesus Christ? How does being a Christian impact your lifestyle and choices?

2. Please describe your involvement in a local church and/or youth group.

3. Do you have specific goals regarding your relationship with God during high school? In what areas would you like to grow?



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Rhetoric Essay

Writing Prompts: Please choose one of the following question prompts. Write a well-composed essay with both a thesis statement (topic sentence) and supporting arguments or details to explain your answer and/or position, either for or against the statement.

1. Part-time jobs are helpful for High School students.
2. Many High School students should take a gap year between graduation and their freshman year of college.
3. Caldwell students should be required to learn a musical instrument and participate in at least one drama, prior to graduation.