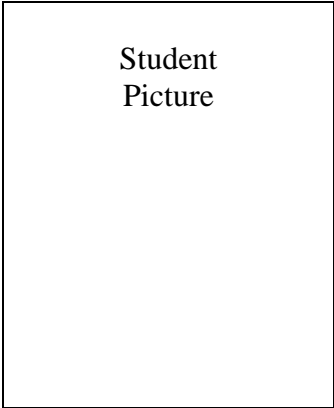


Redemption Academy
355 North Kainalu Drive
Kailua, HI, 96734
(808) 266-2341
Fax: (808) 266-2342
www.redemptionacademy.org



STUDENT APPLICATION

Name (Legal): _____
(Last) (First) (M.I.)

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Grade Entering: _____ Birth Date: _____

Birth Place: _____ Social Security Number: _____

Church Membership: No () Yes () Where? _____

PARENT INFORMATION:

Father: Name: _____

Address: () Same as child
(If not same as child, please list)

(City) (State) (Zip)

Phone: _____ E-mail: _____

Cellular Number: _____

Custody: Yes () No () Circle One: Divorced Separated Deceased

Occupation: _____ Work Number: _____

Employer: _____

Church Membership: No() Yes () Where? _____

Mother: Name: _____

Address: () Same as child
(If not same as child, please list)

(City) (State) (Zip)

Phone: _____ E-mail: _____

Cellular Number: _____

Custody: Yes () No () Circle One: Divorced Separated Deceased

Occupation: _____ Work Number: _____

Employer: _____

Church Membership: No() Yes () Where? _____

*Person authorized if Mother or Father cannot be reached:

Name: _____ Relationship: _____

Address: _____

Home Number: _____ Cellular: _____

(Over)

PLEASE FILL OUT ALL AREAS NECESSARY.

School previously attended: _____ Grade: _____

Mailing Address of School: _____

1. Why would you like to enroll your child at Redemption Academy?

2. Have you read the STUDENT HANDBOOK and agree to assist your child in fulfilling his/her part?

3. Do you agree to authorize the school to employ such discipline as it deems wide and expedient for your child? _____

4. Is there anything CONFIDENTIAL that you wish to inform our school regarding your child?

No () Yes () *Please explain:

5. Does your child have an IEP? No () Yes () * Please explain:

**A copy of your child's IEP may be requested.*

Signature: _____/Mother

Date: _____

Signature: _____/Father

Date: _____

Legal Guardian: _____

Date: _____

(If Legal Guardian is not Mother or Father)

Items to bring to interview:

- 1. Most recent report card
- 2. Most recent achievement scores
- 3. Birth Certificate
- 4. Health Record

*Birth certificate and Health Record are not needed until enrollment.

OFFICE USE:

Date Received: _____ Application Fee: ___ Cash ___ Check #

_____ Rcvd By: _____

File Started: _____ Date Enrolled: _____ Other: _____

*Attach copy with Financial Worksheet and submit to Ms. Shabri.