

## BROOK ROAD ACADEMY APPLICATION FOR ADMISSION

Application for School Year: 20\_\_

**Name of Applicant:** \_\_\_\_\_ Gender: \_\_\_\_\_ Date: \_\_\_\_\_  
(Last, First Middle)

Applying for Grade: \_\_\_\_\_ Age: \_\_\_\_\_ DOB: \_\_\_\_\_

Has your child applied to Brook Road Academy previously? Yes  No  If yes, when: \_\_\_\_\_

List relatives who have attended Brook Road Academy and years attended: \_\_\_\_\_

List other schools attended & dates of attendance: \_\_\_\_\_

Has your child repeated or skipped any grades? Yes  No  if yes, indicate the grade and explain: \_\_\_\_\_

Is your child receiving special school services? Yes  No  if yes, please explain: \_\_\_\_\_

List any extracurricular school activities or special interests. \_\_\_\_\_

List any honors or awards received by the student. \_\_\_\_\_

What does the student like most about school?

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What does the student most dislike about school?

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What are the student's goals past High School?

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What kind of educational experience and expectations are you looking for at Brook Road Academy?

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In what ways will you be comfortable contributing to the Brook Road Academy Community?

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Has your child had previous educational testing of psychological examinations? Yes  No  If yes then provide dates, agency, reason for examination and a summary of the results.

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Has your child ever been: Suspended  Expelled  Asked not to return  Please Explain:

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Is there any history of Substance Abuse Yes  No

If yes, please list substance, length of use, treatment provided, and all applicable dates of usage and treatment:

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***Students transferring must fill out a Record Release Form (enclosed), and forward all requested records. All students must enclose a reference from a teacher, advisor, coach or counselor employed at your current school. Applications will not be processed without all of these items.***