

Entering Kindergarten Student Application 2018/2019

| Name of Student: | |
|--|---|
| Date of Birth: | Age: |
| Mother's Name: | |
| | |
| | |
| | ZIP |
| Phone: | |
| Mother's cell phone: | Father's cell: |
| Email address: | |
| | |
| Upon enrollment can we include t Upon yes No | the above information in a school directory? |
| Please answer the following quest | tions that best describe your student's education so far. |
| My student has been home school | ed exclusively. |
| YesNo | |

If yes, list the curriculum used in the past:

Number of Years Home schooling:

Please explain your reasons for changing academic settings:

What grade level was your student enrolled in at his or her most recent school?

Why have you chosen home-education for your student?

Mosaic Academy is a partnership with the parents and attendance and participation requires parent availability three days a week for supervision and assistance in completing homework assignments. Does the family schedule allow for this level of time commitment?

YesNo

If no, please explain:

Are there any special needs or circumstances that would affect your student's classroom behavior and participation?

YesNo

If yes, please explain:

If yes, please explain how you help your student manage his or her behavior to participate in classroom learning:

Is your student currently taking any prescription medication?

YesNo

If yes, please explain.

Has your student participated in any standardized testing in the past school year?

Yes (Please provide a copy of results if available)No

Has your student participated in an educational classroom setting before?

YesNo

If yes, please explain the setting:

Do you know your child's learning style?

What are your student's personal strengths?

List some specific character qualities that you desire to see your student develop, deepen, or improve:

Kindergarten Students: Is your student reading yet?

YesNo

Kindergarten Students: Please explain what pre-reading skills they have acquired:

Mosaic Academy is a Christian school. We challenge students to deepen their personal relationship with God. Please tell about your student's current understanding of the need for a relationship with Jesus Christ.

Is your family currently active in a local church?

YesNo

If yes, please tell where, and briefly detail your family's level of involvement:

Please feel free to add additional pages if there is other information that would assist us in evaluating your student's admission to Mosaic Academy. All information contained on this application is confidential and will not be shared with anyone outside of Mosaic Academy Staff.

By submitting this application we are committing to participate in one academic school year at Mosaic Academy. We understand that our materials fees are not refundable. We also recognize that should we withdraw our student's application from the program prior to the start of the school year, refunds will be given based on the withdrawal policies as stated in the handbook and online.

Parent Signature:

Date:

Parent Signature:

Date:

Refund policy can be viewed at: http://www.mosaicacademyfw.org/faq.php