



**Starkville Academy**  
**505 Academy Road**  
**Starkville, MS 39759**  
**662-323-7814**

**For Office Use Only:**

Date of Application \_\_\_\_\_ Time \_\_\_\_\_  
 Enrollment Date \_\_\_\_\_ Initiated \_\_\_\_\_  
 Registration Fee \_\_\_\_\_ Date \_\_\_\_\_  
 Check # \_\_\_\_\_ Cash \_\_\_\_\_ Rec'd by \_\_\_\_\_  
 Testing Fee \_\_\_\_\_ Date \_\_\_\_\_  
 Check # \_\_\_\_\_ Cash \_\_\_\_\_ Rec'd by \_\_\_\_\_

**APPLICATION FOR ADMISSION**

Please complete one application per student.  
 Completed applications and registration fees must be brought to the Main Office or mailed.

*The mission of Starkville Academy is to provide quality educational programs in a safe, Christian environment that will challenge students to excel academically, physically, socially, spiritually, and culturally.*

**APPLICANT INFORMATION**

Full Name \_\_\_\_\_ Name Used \_\_\_\_\_  
First Middle Last

Mailing Address \_\_\_\_\_  
 \_\_\_\_\_

Street Address \_\_\_\_\_  
 \_\_\_\_\_

County of Residence \_\_\_\_\_ Home Phone ( ) \_\_\_\_\_

Age \_\_\_\_\_ Birthdate \_\_\_\_\_ SSN \_\_\_\_\_

Place of Birth \_\_\_\_\_  
City County State

Grade for which applying \_\_\_\_\_ Year \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

Public School District in Which Student Resides \_\_\_\_\_

**FAMILY INFORMATION**

Father \_\_\_\_\_ Mother \_\_\_\_\_

Legal Guardian (Male) \_\_\_\_\_ Legal Guardian (Female) \_\_\_\_\_

Home Address \_\_\_\_\_ Home Address \_\_\_\_\_

City State Zip City State Zip

Email Address #1 \_\_\_\_\_ Email Address #1 \_\_\_\_\_

Email Address #2 \_\_\_\_\_ Email Address #2 \_\_\_\_\_

Employer \_\_\_\_\_ Employer \_\_\_\_\_

Home Phone ( ) \_\_\_\_\_ Home Phone ( ) \_\_\_\_\_

Business Phone ( ) \_\_\_\_\_ Business Phone ( ) \_\_\_\_\_

Cell Phone ( ) \_\_\_\_\_ Cell Phone ( ) \_\_\_\_\_

SA Alumnus? \_\_\_\_\_ Yes \_\_\_\_\_ No Year \_\_\_\_\_ SA Alumnus? \_\_\_\_\_ Yes \_\_\_\_\_ No Year \_\_\_\_\_

**ACADEMIC HISTORY**

Preschool attended \_\_\_\_\_

Has the student attended Starkville Academy previously? \_\_\_\_\_ Grades \_\_\_\_\_ Dates \_\_\_\_\_

Previous Schools Attended:

| School | City, State | Grades | Years |
|--------|-------------|--------|-------|
|        |             |        |       |
|        |             |        |       |
|        |             |        |       |
|        |             |        |       |

Name and address of last school attended \_\_\_\_\_  
\_\_\_\_\_

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

Principal or Counselor's Name \_\_\_\_\_

Phone Number ( \_\_\_\_\_ ) \_\_\_\_\_

Has this student been retained in a grade? \_\_\_\_\_ If yes, which grade? \_\_\_\_\_

If yes, give a brief explanation: \_\_\_\_\_  
\_\_\_\_\_

Has this student been **Suspended** from a school? \_\_\_\_\_ If yes, explain \_\_\_\_\_  
\_\_\_\_\_

Has this student been **Expelled** from a school? \_\_\_\_\_ If yes, explain \_\_\_\_\_  
\_\_\_\_\_

Was the student readmitted? \_\_\_\_\_ Yes \_\_\_\_\_ No

Is this student currently in good standing both academically and behaviorally with his/her current school?

\_\_\_\_ Yes If no, please attach a detailed letter explaining the circumstances.

**Does this student have (or been diagnosed with) any: educational or behavioral needs; developmental delays; particular physical, mental, or emotional needs.**

If yes to any of the above give an explanation \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**EMERGENCY INFORMATION**

Person to contact in an emergency (if parents cannot be reached):

Name \_\_\_\_\_ Phone Number ( \_\_\_\_\_ ) \_\_\_\_\_

Relationship to child \_\_\_\_\_

Physician \_\_\_\_\_ Phone Number ( \_\_\_\_\_ ) \_\_\_\_\_

## **MISCELLANEOUS INFORMATION**

Please check all that apply:

Student resides with    \_\_\_ Mother and Father    \_\_\_ Mother    \_\_\_ Father    \_\_\_ Grandparent(s)  
   \_\_\_ Guardian    \_\_\_ Stepmother    \_\_\_ Stepfather  
\_\_\_ Father is deceased    \_\_\_ Mother is deceased    \_\_\_ Parents are divorced or separated

\_\_\_\_\_ Number of Brothers and Sisters. Please give names and ages of siblings.

| Name  | Age   | School |
|-------|-------|--------|
| _____ | _____ | _____  |
| _____ | _____ | _____  |
| _____ | _____ | _____  |
| _____ | _____ | _____  |

### **NOTE CAREFULLY**

***Starkville Academy admits students of any race, color, national and ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, religion, sex, national and ethnic origin in administration of its educational policies, admissions policies, athletic and other school administered programs.***

#### **Notes:**

1. No student will be accepted who has a record of academic failure, discipline problems, or who has not met the criteria for successful completion of the standardized assessment test as stated previously in the enrollment procedures.
2. No student will be accepted requiring separate special education classes because Starkville Academy is not equipped to be of the best service to such a student. If this problem is not known at the time of enrollment, proper action will be taken to have the child tested and evaluated for appropriate placement or referred to another school in the best interest of the child.
3. All students are expected to maintain standards of academic achievement and general citizenship relative to the requirement established. Failure to do so will be just cause for the student's withdrawal from Starkville Academy.
4. When a student reaches a point where Starkville Academy can no longer contribute to the educational advancement of said student, and/or said student fails to take full advantage of educational opportunities offered him or her, and/or said student continuously violates school regulations, the student will be requested to withdraw from Starkville Academy during the present year and will definitely lose his or her priority for admission to Starkville Academy the following year. The Board of Directors will evaluate the recommendations of the administration concerning each student's present and future enrollment at Starkville Academy.
5. Parents of students must have paid their registration fees and signed a contract for the student to be eligible for any type of try-outs, practices etc. relative to the next school year.
6. Athletic eligibility requirements of the MS Association of Independent Schools must be followed concerning all athletes.

#### **Admission Process**

1. A tour of the school with the Director of Admissions or a designated school official, if desired
2. Completed application with payment of non-refundable registration fee and a meeting of the school administrator with the parent/guardian and student. New students will be considered based on the dated receipt of a completed application and payment of the registration fee. Each application will be dated, initialed, and time recorded to determine priority. The registration fee for a student will be refunded if the student is not admitted to SA.
3. Schedule a time with the school counselor for entrance testing, grades 1-12; on the day the entrance test is given the counselor will need the following:
  - A. Check for testing fee (\$25.00 per student made payable to Starkville Academy)
  - B. Official copy of transcripts
  - C. Official copy of most recent report card
  - D. Official copy of achievement test scores(It is the parent's/guardian's responsibility to obtain and deliver the above information.)

***(continued on back)***

**Criteria for Admission**

1. Students in grades 1-12 shall pass the admission test administered by assigned school official.
2. Student shall receive an excellent background report as stated by former school officials (including behavior and proper actions).
3. Student must have grades from former school that indicate probable success at Starkville Academy.
4. Entrance age is set by state law (students entering 1st grade shall be 6 by September 1st).
5. Student must receive approval of Admission Committee.
6. English Speaking Requirement – Students must be able to speak English.
7. The school administration may accept a student for enrollment on a temporary basis provided said student has met all requirements as designated by the enrollment policy. However, the Board of Directors will officially approve all educational contracts.

**Requirements for Class Attendance**

1. Application form properly completed and signed
2. Registration fee and testing fee paid
3. Screening/testing completed for new students
  - A. A copy of academic records from previous school
  - B. A referral from previous school regarding discipline report
  - C. Successful completion of the standardized assessment test in grades 1-12
  - D. Personal interview with an administrator
4. A completed and signed Educational Contract
5. Original Mississippi Certificate of Immunization Compliance
6. Certified copy of birth certificate complete with the state certification number
7. Student's Social Security Number

**The Mississippi Certificate of Immunization Compliance, the certified copy of the birth certificate, and the social security number for the enrolling student must be presented at the time of enrollment unless the student is transferring from a Mississippi school where records are being requested.**

**I understand the terms of this application and certify that ALL information and answers to questions herein are complete, true, and correct to the best of my knowledge and belief in consideration of the admission sought. If any misrepresentation by false statement or inaccuracy has been made by me herein, Starkville Academy may withdraw any offer of admission or my admission with Starkville Academy may be terminated immediately.**

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

**Starkville Academy is accredited by and members of:**

