



APPLICATION FOR ADMISSION

International Academy of Columbus

Application Date: _____

Student Information

Full Name: _____
Last First Middle

Address: _____

City: _____ State: _____ Zip Code: _____

Date of Birth: _____ Age: _____ Male Female

Place of Birth: _____
City State Country

Previous Grade: _____ Applying for Grade: _____ School District of Residence: _____

Racial or ethnic identity of your child*: White Black African American Hispanic Asian

American Indian/Alaskan Native Native Hawaiian or Pacific Islander Other _____

Parent/Guardian Information

Mother's Full Name: _____
Last First Middle

Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Work/Cell Phone: _____

Email (if applicable): _____

Father's Full Name: _____
Last First Middle

Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Work/Cell Phone: _____

Email (if applicable) _____

Home Language Survey

Is English the primary language spoken at home? Yes No If no, primary language: _____

How well does your child speak English? Fluently Some English No English

What was your child's first language? _____

Has your son/daughter taken ESL classes in the U.S? Yes No If yes, date ESL classes started: _____

Student Educational History

Has your child ever attended another school in the US? Yes No If yes, for how many years? _____

If yes, name and location of most recent school: _____

Has your child ever attended a school in the Columbus Public school district? Yes No

If yes, school name: _____

Has your child ever been suspended, expelled or received major disciplinary action at school? Yes No

If yes, please explain: _____

Has your child ever received psychological/neurological testing? Yes No

If yes, please explain and send copies of all relevant information: _____

Has your child received speech or learning disability services? Yes No

If yes, please explain: _____

Does your child have an active IEP? Yes No

If yes, please explain: _____

Has your child ever attended an academic summer school? Yes No

If yes, please explain: _____

Has your child ever been held back/repeated a grade or been approved to skip a grade? Yes No

If yes, please explain: _____

Has your child ever received special honors or awards? Yes No

If yes, please explain: _____

Does your child belong to any clubs or organized group activities? Yes No

If yes, please list: _____

How did you learn about International Academy? _____

For Office Use Only:

Grade: _____ Enrollment Date: _____ Approved by: _____

SSID #: _____ CSADM #: _____ EMIS #: _____

Admin+ date: _____ CSADM date: _____ EMIS date: _____

Transcripts: _____ Shots: _____ BC/I94: _____ SS Card: _____ Meal Status: _____ Transportation: _____

Proof of Res: _____ Comments: _____

***International Academy of Columbus maintains a non-discrimination policy and admits students of any races, religions, and ethnic backgrounds to all the rights, privileges, programs, and activities made available to students of International Academy.