

BERRY Elementary & COLLEGE Middle School

Application for Admission 2018-2019

For Office Use:

Completed Application _____ Student Visit _____ Parent Visit _____ Records _____

Please sign and return to the BCEMS school office this completed application form along with a nonrefundable \$25 application fee (cash or check payable to Berry College). Date of completed application can be a significant factor in determining admission status. Special consideration is given to maintain classroom balance. Students with currently enrolled siblings at BCEMS and students with parents who are Berry College employees will be given preferential consideration. Students who are currently enrolled at the Berry College Child Development Center will receive preferential consideration for kindergarten during Early Admission (September 5-October 26, 2017) .

Student Applicant Information

Full Legal Name: _____

Preferred Name: _____

Entrance Date Preferred: _____ Entrance Grade Preferred: _____

Home Address: _____

City, State, Zip Code: _____

Date of Birth: _____ Birthplace: _____

Applicant's Most Proficient Language: _____

Language Spoken at Home: _____

School District of Applicant's Residence: _____

County of Applicant's Residence: _____

Parent/Guardian Information

Parent/Guardian 1: _____

Home Address: _____

Cell Phone: _____ Work Phone: _____

Email Address: _____ Email Address: _____

Occupation: _____ Relationship to Applicant: _____

Parent/Guardian 2: _____

Home Address: _____

Cell Phone: _____ Work Phone: _____

Email Address: _____ Email Address: _____

Occupation: _____ Relationship to Applicant: _____

Student Applicant resides with: _____

Parent/Guardian(s) accepting financial responsibility: _____

Name of Sibling: _____ Date of Birth: _____

Name of Sibling: _____ Date of Birth: _____

Name of Sibling: _____ Date of Birth: _____

Additional Information

Please check all that apply:

_____ Applicant's sibling(s) are currently enrolled at BCEMS.

_____ Applicant's parent(s) are currently employed by Berry College.

_____ Applicant is currently enrolled at Berry College's Child Development Center.

Please share your reasons for choosing to apply to Berry College Elementary & Middle School:

Please provide BCEMS personnel with any additional information that would be helpful to us in meeting the student applicant’s needs (allergies, medications, medical history, family history, behavioral issues, developmental history, etc.):

BCEMS admits students of any race, creed, color, sex, age, religion, national and ethnic origin, or qualified handicap to all the rights, privileges, programs, and activities generally accorded or made available to the students at the school. BCEMS does not discriminate on the basis of race, creed, color, sex, age, religion, national or ethnic origin, or qualified handicap in administration of its educational and admission policies.

Student Applicant History

Current School : _____

Dates Attended: _____

Previous School: _____

Dates Attended: _____

Previous School: _____

Dates Attended: _____

Has the student applicant ever been referred for and/or received psycho-educational testing or medical diagnoses?

Yes _____ No _____ If Yes, please provide a copy of reports and contact information with application.

Has the student applicant ever been recommended to receive, or has the student applicant ever received intervention services related to development and learning?

Yes _____ No _____ If Yes, please provide a copy of reports and contact information with application.

Does the student applicant have a disciplinary record? Yes _____ No _____

If Yes, please provide a copy of the student's disciplinary record and contact information.

If your child is accepted into our program, do you agree to provide detailed information about your child over an extended period of time? Yes _____ No _____

Do you intend to apply for need-based financial aid? Yes _____ No _____

If Yes, information about need-based financial aid and a BCEMS Financial Aid Eligibility form will be sent to you. Date of completed application for financial aid is very important.

Your signature below attests to the truth and honesty of all information provided on this application. False statements by guardians/parents on this application and/or financial aid application can result in de-enrollment with full payment of tuition contract required.

A non-refundable Application Fee of \$25.00 is required with the filing of this application. Please make checks payable to Berry College Elementary & Middle School.

Signature of Parent/Guardian : _____

Signature of Parent/Guardian : _____

Date of Application: _____

Applications may be mailed to: **Berry College Elementary & Middle School
P.O. Box 247
Mount Berry, Georgia 30149**