

2255 Pine Street
Sandpoint, ID 83864
Tel: (208) 263-3584
Email: school@sjasda.org
www.sjasda.org



APPLICATION FOR ENROLLMENT

Please Type or Print:

APPLICANT'S NAME: _____ Gender (circle one): M / F
 First Middle Last

Physical Address: _____
 Street City State Zip

Mailing Address (if different from above): _____

Home Phone:(_____) _____ Date of Birth: _____ / _____ / _____ Age: _____

Place of Birth: _____ Grade Entering: _____
 State Country

Last School Attended (name & address): _____

Is Student a Baptized Church Member? _____ Date of Baptism: _____

PARENT/GUARDIAN INFORMATION:

Father		Married	Unmarried	Divorced	Separated	Remarried
Mother		Married	Unmarried	Divorced	Separated	Remarried

Father's Full Name: _____ Mother's Full Name: _____

Home Address: _____ Home Address: _____

Employer: _____ Employer: _____

Position: _____ Position: _____

Business Phone: _____ Business Phone: _____

Cell Phone: _____ Cell Phone: _____

Church Affiliation: _____ Church Affiliation: _____

EMERGENCY CONTACT INFORMATION:

Name: _____

Phone: _____

ALTERNATE EMERGENCY CONTACT:

Name: _____

Phone: _____

MEDICAL INFORMATION:

Family Physician: _____ Family Dentist: _____

Name of Clinic: _____ Dental Clinic: _____

Phone Number: _____ Phone Number: _____

List any allergies your child may have:

Are there any medical concerns?



FAMILY INFORMATION:

Primary Family Email Address:

PLEASE PRINT

List all other adults with whom the applicant lives (**excluding** parent/guardian listed previously):

_____	_____	_____	_____
Name	Relationship	Name	Relationship

List siblings and any other relatives with whom applicant lives:

_____	_____	_____	_____	_____	_____
Name:	Age:	Attends SJA?	Name:	Age:	Attends SJA?
_____	_____	<input type="radio"/>	_____	_____	<input type="radio"/>
_____	_____	<input type="radio"/>	_____	_____	<input type="radio"/>
_____	_____	<input type="radio"/>	_____	_____	<input type="radio"/>



Parent (Guardian) Signature

Parent (Guardian) Name - Printed

Date

I realize that participation in the program at Sandpoint Junior Academy is a privilege. I agree with the stated philosophy and objectives of the school and pledge myself to actively supporting them by endeavoring to make them a reality in my own life. Furthermore, I choose to comply with all stated rules and regulations and any others which may from time to time be deemed necessary by the administration or school board.

Student's Signature:

Office Use Only: New Student Photo Included Y / N Date Registration Fee Paid _____