

2255 W Pine Street
Sandpoint, ID 83864
Tel (208)263-3584 Fax (208)263-8683
school@sjasda.org
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

ALTERNATE EMERGENCY CONTACT

Name _____

Name _____

Phone _____

Phone _____

"I can do all things through Christ who strengthens me" (Philippians 4:13).

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 _____

"I can do all things through Christ who strengthens me" (Philippians 4:13).