



CORNERSTONE

LEARNING COMMUNITY

Application For Admissions Kindergarten – 8th Grade

Applicant's Name _____

Date of Application _____

Grade Applying For _____

School Year Applying For _____

PLEASE PROVIDE ALL REQUESTED INFORMATION. If you wish any contact information (home telephone, home address, names, e- mail address) not be available to other CLC families please place an "X" beside it and we will not publish that info.

Child's full name _____ Gender: _____

Cornerstone is always seeking greater racial diversity and provides the following question with such spirit in mind: Race: _____ (optional)

Name called _____ Birthplace _____ Birthdate _____ Age on **Sept. 1** _____

Home address _____

Apartment # _____ City _____ State _____ Zip _____

Name of Parent or Guardian: Billing Mailing _____

Relationship to Student: _____

Home address: _____

_____ Zip _____

Home telephone: _____

Cell phone: _____

E- mail address: _____

Occupation: _____

Company: _____

Business address: _____

Business telephone: _____

Applicant's Name _____

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Child's present school (Name and Address) _____

Previous school(s), if any:

Name _____ Grades attended _____

Name _____ Grades attended _____

How did you find out about Cornerstone? (Please be as specific as possible) _____

Have you visited (Open House, Tour, Special Event)? _____

Fees for services provided by independent contractors (speech, reading, occupational therapy, etc.) are set by provider. Services are scheduled according to need as determined by evaluation.

Please check applicable item below. (Please see insert for fee schedule.)

- A. _____ I estimate that I am able to pay full tuition for my child's age/grade level.
- B. _____ My child has been approved for Step Up For Students.
- C. _____ My child has been approved for the McKay Scholarship Program.
- D. _____ I will apply/have applied for CLC financial assistance through the FAST link on the website.

Parents are: _____ Married _____ Partners _____ Single _____ Separated _____ Divorced _____ Widowed

With whom does the child live? _____ If parents are divorced or separated, please describe the child's living arrangements: _____

Other children living in the home (names, ages and relationships to child) _____

Adults living in the home (names and relationships to child): _____

Language(s) spoken in the home: _____

Cornerstone values a diverse student population and each learners' unique strengths and challenges. Please make sure that you have submitted all of the requested records and testing to insure that the Admissions Committee can make the most informed decision.

Why do you believe CLC is a good fit for your child?

If this application represents a change of schools, why is the change being sought?

Please describe your child (include, for example, interests and areas of strength and weakness).

Please describe your child's attitude towards school and learning. If your child has not been in school, please explain any experiences your child has had in group settings.

Please provide any additional information about your child and/or family which you feel would be important for us to know (religious preference, cultural background, major life changing events).

ACADEMIC INFORMATION:

Has your child ever repeated a grade? Yes ____ No ____ Which Grade: _____

Has your child ever been dismissed from any school for any reason? Yes ____ No ____

Suspended? Yes ____ No ____ Asked to Withdraw? Yes ____ No ____

If yes, please comment:

Has your child ever been recommended for psychological or educational testing? Yes ____ No ____
(If yes, please include report/s with application packet)

Does your child have an Individual Education Plan (IEP)? Yes ____ No ____ (If yes, please attach copies to application.)

Does your child have any learning difficulties/disabilities or behavioral issues that will require any type of classroom accommodation or that will potentially impact the learning environment of other students? Yes ____ No ____

If yes please comment: _____

Applicant's Name _____

Does your child have any physical, emotional or mental condition that will require any type of classroom accommodation or that will potentially impact the learning environment of other students?
Yes ____ No ____ If yes, please explain:

This application must be accompanied by the \$75.00 Application Fee

APPLICATION TERMS

I/we certify that the information provided herein is complete, factually correct, and honestly presented.

DATE

PARENT / LEGAL GUARDIAN

PARENT / LEGAL GUARDIAN

DATE

SIGNATURE OF PERSON RESPONSIBLE FOR PAYMENT

Mail Completed application and \$75.00 application fee to:

Cornerstone Learning Community
Director of Admissions
2524 Hartsfield Road
Tallahassee, Florida 32303

NOTICE OF NONDISCRIMINATORY POLICY AS TO STUDENTS

Alpha School Inc, dba Cornerstone Learning Community admits students of any race, color, national or ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. CLC does not discriminate on the basis of race, color, national or ethnic origin in administration of its admission policies, educational policies, scholarships or other programs.