



Flora Macdonald Academy

Established 1969

ENROLLMENT APPLICATION

First time enrollees, please submit current grades (most recent report card) along with this application. An individual application must be submitted for each child. Please email this application and grades to the school email address: office@floramac.org or mail to the school office.

School year: 20____ to 20____ Date:_____

Student's Name: _____
Last First Middle

_____ Male / Female
Preferred Name Last Grade Completed

Student's Social Security # _____ - _____ - _____ Date of Birth _____
Month / Day / Year

Mailing Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Student's Cell: _____

Home Address - if different from mailing: _____

City: _____ State: _____ Zip: _____

School Previously Attended: _____ Telephone: _____

Has Student Ever Previously Attended this School? Yes / No

Parent Information:

Name of legal guardian(s): _____

Father's Full Name (or guardian): _____

Father's E-Mail: _____

PLEASE COMPLETE REVERSE SIDE OF APPLICATION

Father's Mailing Address (if different from student): _____

City: _____ State: _____ Zip: _____

Father's Cell: _____

Employer: _____ Work Phone: _____

Mother's Full Name (or guardian): _____

Mother's E-Mail: _____

Mother's Mailing Address (if different from student): _____

City: _____ State: _____ Zip: _____

Mother's Cell: _____

Employer: _____ Work Phone: _____

Emergency Contacts:

Emergency Contact Name:	Phone Number(s):	Relationship:
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Upon the successful review of this application, parents of new students will be contacted to arrange an interview with the Headmaster and schedule a time for the prospective student to sit for an entrance examination.

Parent's Signature: _____ Date: _____