



thedanielacademy.com

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Student Application for Admission – 2016-2017

Student Name			Grade entering 2016-2017	
Street Address (if different from Parent)			City	
State	Zip Code	Student's Home Phone & Cell Phone		Date of Birth
Parents' Names			Student's Email	
Please list any unusual factors in the student's life (severe illness, social/physical trauma, depression, anxiety, death of family member etc).				
Please list ALL languages spoken in your home.				
Is your family a blended family? Is so, please tell us the details of the arrangement. Are there any custodial issues?				
Is your child on any medication? Have they been on medication previously?				
Is your child allergic to anything or do they suffer from asthma, seizures, diabetes, etc? Please share any information with us that we should know about.				

Academic History

Please list in chronological order all schools attended including homeschooling. Begin with the most recent first and then go back to kindergarten.

School Name and City	Years	Grades

Please list academic awards, honors, hobbies, and/or character qualities.

Does your child have any issues staying on task? Do you suspect problems learning? Are there any diagnosed learning issues? Please indicate if your child has an IEP (Individual Education Plan) from a previous school and provide a copy.

Has your child ever been in trouble at school or in the community, been suspended or expelled from any school? If so, please explain.

Student Testimony – 7th-12th – To Be Completed by the Student

This must be in the student's own handwriting. Do not type. Use complete sentence and proper grammar. Parents are not to correct errors.

When and how did you become a Christian?

Describe your current relationship with the Lord.

Why are you interested in The Daniel Academy?

How do you feel about pursuing the 'Daniel lifestyle' – in prayer, a dedicated lifestyle, excellence and building with marvelous friends (comrades)?

What areas do you hope to grow at The Daniel Academy?

Did you watch the videos on the TDA Website (About TDA: About Us: A Look Inside TDA (1 video) About TDA: Our Vision: Bottom 2 videos) About TDA: Our Policies: POG (1 video))? What do you think about your commitment to not date during your high school years, but instead build great friendships with both boys and girls?

What is the most interesting book you've ever read? Briefly summarize it and explain why it is your favorite.

What are some of your favorite hobbies or interests? How much time do you spend on them in the course of one week?

What are your goals? What would you like to be doing in 10 years?

Reference for Student Enrolling in 7th-12th Grade

To be filled out by **teacher or church leader** and returned in a sealed envelope as part of the TDA application.

Name of Student: _____

Name of Reference: _____

In what capacity do you know this student? How long have you known this student and what was your interaction?

How would you describe this student's walk with God?

What do you feel are the student's strengths?

What do you feel are their weaknesses?

Is there anything you can tell us to help this student succeed at The Daniel Academy?