



Alpha Learning Academy

The "Beginning" of a Life-time of Learning

New Student Application Packet—2015-2016

www.alaorlando.org



STEP UP FOR STUDENTS

Thank you for your partnership in education!



- STEP 1: Visit the Step Up scholarship for the 2015-16 school year at:
<http://www.stepupforstudents.org/> to complete the NEW STUDENT application. Scholarships are awarded on a first-come, first-served basis, so apply early.
- STEP 2: Apply for admission to Alpha Learning Academy by submitting this **NEW STUDENT** application and the **\$25** application fee along with all required documents.

Admissions Criteria

The Alpha Learning Academy is a representation of God's family; and therefore we require that at least one parent or guardian be a confessed Christian. We believe a true education begins with God and a relationship with our Lord and Savior Jesus Christ. The Alpha Learning Academy does not discriminate on the basis of race, color, national and ethnic origin in administration of its educational policies, admissions practices and scholarship consideration.

Application Process

All required items are listed on the Application Checklist and should be submitted as a complete packet by the priority deadline. The offer of Admission will be mailed along with the enrollment contract on a rolling basis for the 2015-2016 academic year.

APPLICATION CHECKLIST

New Student Application Packet

- Obtain and present the original student's Birth Certificate (a copy will be made)
 - Obtain current student immunization record on valid Florida DH immunization form
Please contact Orange County Health Department at (407) 836-7185 for more information.
 - Annual Physical exam (must be current within year of enrollment)
 - Teacher reference form completed and returned by current/former teacher
 - Church letter of reference from the Pastor, ministerial staff or ministry head of current church
 - Obtain copy of previous year & most recent report card
 - Obtain copy of most recent standardized test scores (SAT, FCAT, IOWA, etc.)
 - Complete Application and submit the Application fee (**Non-Refundable**)
- * After the application packet and all checklist items have been submitted and reviewed, the applying student must take an ability test scheduled by the administrative office. Applicants must score at normed levels for readiness and abilities in reading, language arts and math.
- * The family must also schedule an Admissions conference with the School Principal to discuss admission consideration, expectations and address any questions related to the learning environment for students enrolled at Alpha Learning Academy. This Admissions conference will be between the school principal and the parent(s) or guardian(s).

Parental Involvement

All parents of Alpha Learning Academy students will be expected to participate in their child's education and demonstrate support for the school. This expectation is accomplished by becoming an active member of Parent Teacher Fellowship (PTF), volunteering for assignments in support of our learning environment and praying for our administration, faculty, students and families. Parental involvement is used as a measure for re-enrollment eligibility.

2015-2016 APPLICATION FOR ADMISSION *(Please use black or blue ink)*

New Student Application Packet

Today's Date: _____

Student's Social Security #: _____

Enrolled in Extended day? Y N

Paid the \$15 registration fee per child for Extended day

(Child's Birth Name)

Last Name

First Name

Middle Initial

Permanent Home Address

City

State

Zip code

Male

Female

Date of Birth (mm/dd/yyyy)

Last Grade Completed

Last School Attended

Name of Teacher

Attendance Dates

Date of Last Assessment/Standardized Test (SAT, FCAT, Iowa, ect)

Reading Level/ Math Level

Assessment Test Scores

List any Honors, Recognitions and/or Extra-curricular Activities (Attach additional sheet if necessary).

PARENT/ GUARDIAN INFORMATION:

Parent/ Guardian #1

Last Name

First Name

Relationship to the Student

Permanent Home Address (if different from student)

Daytime Phone #

Cell Phone #

E-mail Address

Name of Church Affiliation & Name of Pastor

Church Phone #

2015-2016 APPLICATION FOR ADMISSION (continued)

New Student Application Packet

PARENT/ GUARDIAN INFORMATION:

Parent/ Guardian #2

Last Name

First Name

Relationship to the Student

Permanent Home Address (if different from student)

Daytime Phone #

Cell Phone #

E-mail Address

Name of Church Affiliation & Name of Pastor

Church Phone #

ADDITIONAL INFORMATION: (Please attach additional pages if necessary)

Social Adjustment: Please discuss any serious behavioral issues or concerns related to your child's educational experiences:

Has this student ever been suspended, expelled, or asked to withdraw from another school? No Yes

If Yes, give the name of the school and details: _____

2015-2016 APPLICATION FOR ADMISSION (continued)

New Student Application Packet

Has this student ever experienced academic, behavior, emotional or attention difficulties that resulted in discussion or referral for evaluation by a school official, psychologist or other professional? No Yes

If Yes, please give details:

Has this child ever been evaluated for academic, behavioral, emotional or attention difficulties by a school official, psychologist or other professional? No Yes If Yes, please attach all copies of any Individual Educational Plan (IEP) or Individual Performance Plan (IPP) Has this student ever repeated or been held back in any grade? No Yes If Yes, which grade? _____

Please explain:

APPLICATION CONSIDERATIONS: Please discuss why your student should be considered for admission to ALA:

In what way are you willing to support and participate in your child's education, as well as demonstrate your support of Alpha Learning Academy?

Please explain: _____

Check all that apply:

- Serve as a Classroom Coach
- Join PTF (Parent Teacher Fellowship)
- Volunteer for Campus Beautification
- Volunteer to Read w/Students
- Serve as a Lunchroom Attendant
- Help with Car Riders
- Join Tri-Alpha Society Booster Club
- Assist with Coaching a Sports Club
- Assist with Annual Spelling Bee

CERTIFICATION STATEMENTS

New Student Application Packet—2015-2016

Please carefully review the following statements and initial below to acknowledge your understanding.

Initial Below:

_____ I have attached a check or money order for the application fee & Extended day registration fee (if applicable). I understand that this fee is non-refundable.

_____ I certify that I have health insurance coverage for my son/daughter that will cover him/her while attending Alpha Learning Academy, and that I agree to maintain said coverage in full force and effect for the duration of my child's attendance. I will notify the administrative office immediately of any change in coverage and further understand that should my son/daughter become sick or injured while attending Alpha Learning Academy, medical treatment for said sickness or injury is my financial responsibility.

_____ I agree to indemnify, protect, and hold harmless Alpha Learning Academy, its officers, Board members, and employees, from any claim or liability whatsoever including, but not limited to, personal injury, property damage, court costs, attorneys' fees and interest, however caused, as a result of my child participating in activities at Alpha Learning Academy.

_____ I understand that all required documents from the enrollment process become the property of Alpha Learning Academy and will not be returned nor photo-copied nor released.

_____ I have reviewed and agree with the policies and procedures which govern the core practices of Alpha Learning Academy. I understand that my student, as well as myself will be held accountable for maintaining compliance.

I certify that the information provided on this form is true and accurate to the best of my knowledge. I further understand that any falsification related to this Commitment to Return form will void any offer of re-enrollment to the Alpha Learning Academy.

Signature of Parent or Legal Guardian #1

Date

Printed Full Name

Signature of Parent or Legal Guardian #2

Date

Printed Full Name

ALPHA LEARNING ACADEMY—STUDENT REFERENCE FORM

1960 BRUTON BLVD, ORLANDO, FLORIDA 32805

PH: 407-447-2897 FAX: 407-841-0307 admin@alaorlando.org www.alaorlando.org

Instructions for Parents: Please give this form to your child's present/former school. The person completing the form will return it to Alpha Learning Academy. Reference forms are confidential.

Name of Student _____ Current grade _____ # of years attended your school _____

The above student is a candidate for admission to: **Alpha Learning Academy**, a private Christian preparatory school. We would appreciate your observations about the areas listed below. **Your remarks will remain confidential.** Thank you for your assistance.

Please <u>circle</u> the appropriate response:	Below		Above	
	Average	Average	Average	Outstanding
Academic Potential	1	2	3	4
Academic Achievement	1	2	3	4
Maturity & Stability	1	2	3	4
Initiative/ Motivation	1	2	3	4
Leadership Potential	1	2	3	4
Conduct and Discipline	1	2	3	4
Social Skills	1	2	3	4
Concern for Others	1	2	3	4
Dependability	1	2	3	4
Integrity	1	2	3	4
Attendance	1	2	3	4
Tuitions and fees paid in timely manner	1	2	3	4
Overall Recommendation	1	2	3	4

Does the student have any significant limitations (physical, emotional, social)? Yes No (If "yes" please explain)

Is the student in good standing and eligible to return to your school for the next grade level? Yes No

Has student ever been suspended or expelled from your school? Yes No (If "yes" please explain)

How would you rate the parent's cooperation/involvement in the education process? Very cooperative Usually cooperative Rarely cooperative Disinterested Never had communication with parents

Please attach any additional information that you feel should be in our assessment of this applicant. If you wish to discuss this applicant personally, please contact our Admissions Office at (407) 447-2897.

Your Name _____ Date _____

Position: _____ School _____ Telephone # _____



Alpha Learning Academy

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EXTENDED DAY PROGRAM

Why Should Parents Consider Extended Day?

- Homework assistance and individualized tutoring, particularly in reading and mathematics
- A safe Christian environment away from negative influences
- A stimulating atmosphere where their child can experience art, crafts, and physical fitness
- An opportunity to learn leadership and decision-making skills
- Increased likelihood for academic and lifelong Success
- Fun activities that counterbalance the academic focus of the school day

REGISTRATION: Registration forms must be completed and a \$15 non refundable registration fee must be paid per child: for each fiscal school year. All fees must be paid in advance before a child can participate in the Extended Day Program.

MEDICAL INFORMATION: If your child requires medication, you must 1) list the times and type of medication to be administered on the registration form, 2) bring the medication in the **original container, labeled by the pharmacist**. Emergency Contact Form and special needs information are required.

ACTIVITIES:

Program hours are before school—6:30am until 8:15am and after school—3:00pm until 6:00pm; Monday, Tuesday, Thursday and Friday. After school hours on Wednesday's—2:00pm until 6:00 pm. *Hot/Cold Nutritional Breakfast Daily and Healthy After School Snacks.*

WEEKLY FEES

Daily Rates (Emergency Only) \$15.00 per child.

*4-C ACCEPTED Late Payment Fees: If weekly payment fee is not paid on Monday or not received in payment box by Tuesday, no later than 8:15 am your account will be charged a \$25.00 late fee.

PAYMENT OF FEES:

Fees must be paid in advance before your child is supervised for the week. Payments should be made in the form of cash, money order or checks, if a check has been return for insufficient funds. all future payment must be in cash or money order. Weekly receipts are issued and should be retained for income tax reporting services. Credits are not issued for non-attendance; the weekly fee secures a spot for your child(ren) in the program.

SIGN IN/SIGN OUT:

In the interest of safety, the parent or authorized person is expected to sign in and sign out the child daily to and from the Extended Day Program. NO child will be released to an adult not authorized by the custodial parent. Adults not recognized by the staff will be asked to show identification. Only authorized adults may pick up a child. If any person not listed, attempts to pick up child (ren) must be verified his/her authorization with the parent by phone before the child will be released. No child under the age of 15 can pick up his/her sibling. Late Pick-Up Fee: A fee of \$1.00 per minute will be charged for every minute beyond your program time. The Extended Day Staff makes every effort to contact the parent or other authorized person listed on the Registration Form. *If a child is not picked up by the closing time and parent is not reachable, 30 minutes after closing, the Extended Day Administrator will be notified and Department of Children and Families or Law Enforcement will be called.*

DISCIPLINE:

Positive reinforcement is used in dealing with children. Input from parents concerning problems at home, which may affect the child's behavior is welcomed. The Extended Day Program are held to the same code of conduct and discipline procedures outlined by the Alpha Learning Academy.

MEDICAL PERMISSION FORM

To: *Emergency Personnel*, I hereby grant permission for my son/daughter to participate in any extra-curricular activities. I waive, release, absolve and hold blameless Alpha Learning Academy; it's Principal, Administration, Teachers, Supervisors, Physical Education Directors, Managers and Persons transporting my child to and from school related activities and other authorized participants and volunteers from any claim arising out of injury to or sickness of my child.

If in the option of a properly licensed and practicing physician, my child needs medical or surgical services which require my consent before being supplied and I cannot be reached, I authorize, appoint and empower the Principal, Director and his/her designee to furnish on my behalf such written or oral authorization as may be required. I also hereby authorize the aforementioned parties to administer Tylenol or any other non-prescription medication for my child. I understand that every effort will be made to notify me before any non-prescription medication is administered. Further, I release the administration, his/her designee and Alpha Learning Academy from any liabilities which might arise from the giving of such authorization, it being my desire that my child be furnished with such medical surgical services as soon as reasonably possible after the need arise. I hereby give my consent to arrange for my child to be transported by ambulance if the situation warrants.

Signature of Parent or Legal Guardian

Driver License#

State of Florida – County of Orange County:

On this _____ day of _____, in the year 20__

Identification was presented, verified and executed the same

[THIS FORM MUST BE NOTARIZED]

Notary Public

My Commission Expires

MEDICAL INFORMATION:

Name of Physician

Office Address

Office Phone#

Hospital of Choice

List any allergies and or special medical conditions

Date of last tetanus shot

List any medication the student may be taking and any allergies to medications

Insurance Company

Policy#

Group#

Primary Policy Holder

PREVIOUS SCHOOL YEAR'S CALENDAR

For Review Purposes only—the 2015-2016 Calendar will be confirmed by late July, 2015.

Monday – Friday	August 12, 13, 15, 16	Pre-Planning
Wednesday	August 14	Staff Development Day
Friday	August 16	Meet the Teacher
Monday	August 19	First Day of School
Monday	September 2	Labor Day (No School)
Thursday—Friday	September 26-27	Fall Field Trips
Tuesday	October 1	Fall Pictures
Wednesday	October 23	End of 1 st Marking Period (47 Days)
Thursday	October 24	Student Holiday/Teacher Workday
Friday	October 25	Student Holiday/Teacher Professional Day
Monday – Friday	November 25 - 29	Thanksgiving Break (No School)
Friday	December 20	Holiday Gala
Two Weeks	December 23 – January 3	Holiday Break (No School)
Thursday	January 16	End of 2 nd Marking Period (44 Days)
Friday	January 17	Student Holiday/Teacher Workday
Monday	January 20	Martin Luther King, Jr. Day (No School)
Monday	February 17	Presidents' Day (No School)
Thursday	March 20	End of 3 rd Marking Period (42 Days)
Friday	March 21	Student Holiday/ Teacher Workday
Monday – Friday	March 24 - 28	Spring Break (No School)
Tuesday – Friday	April 8 – 11	Stanford Achievement Test (S.A.T.)
Friday	April 18	Good Friday—No School
Monday – Friday	May 5 – 9	Teacher Appreciation Week
Friday	May 23	Kindergarten Promotion & Awards
Monday	May 26	Memorial Day (No School)
Thursday	June 5	Last Day of School End of 4 th Marking Period (47 days)
Friday	June 6	Graduation
Thursday – Friday	June 5 - 6	Post Planning

1st semester: 91 Days (47/44) and 2nd semester: 89 days (42/47)

COST OF ATTENDANCE

**Retain this page for your records*

All students offered admission to the *Alpha Learning Academy* are responsible for the following tuition, book and enrollment fees. Total cost of attendance may be subject to increase bi-annually:

Below is an example of fees for the 2013-2014 SCHOOL YEAR—Families will need to discuss their individual billing details with the financial secretary:

Yearly Tuition	\$ 4,640.00
Application Fee	\$ 25.00
Enrollment Deposit	\$ 100.00
Book Fee	\$ 300.00
Standardized Testing Fee	\$ 100.00
Total Cost of Attendance	\$ 5,165.00

Yearly Tuition	The amount charged for academic instruction.
Application Fee	Fee charged for all New applications to Alpha Learning Academy. The fee is non-refundable.
Enrollment Deposit	Administrative fee for record set-up costs associated with a new academic year. Paid upon submitting the enrollment contract & is non-refundable.
Book Fee	Fee charged for books and copyright materials utilized in classroom instruction. The fee is non-refundable upon ordering of materials.
Standardized Testing Fee	Charges associated with materials utilized for benchmark testing. The fee is non-refundable upon ordering of testing supplies.

The *Alpha Learning Academy* is a proud participant in the “**Step up for Children**” Scholarship program and the McKay Scholarship Program, both are annual scholarships which require a new application each year.

The Tri-Alpha Scholarship is awarded to assist families with remaining cost of attendance after all other applicable scholarships and grants have been applied. All enrolled students are reviewed and considered for the scholarship based on available funds and a families’ remaining cost of attendance obligations. *Tri-Alpha scholarship awards will vary every year based on available funds.



Alpha Learning Academy

Home of the Spiritual Warriors

1960 Bruton Blvd - Orlando, Florida 32805

PH: 407-447-2897 FAX: 407-841-0307

Visit us on the web: www.alaorlando.org or via email: admin@alaorlando.org