



Application for Admission

2900 Barberry Avenue, Columbia, MO 65202 | Phone: (573) 449-2252
Email: office@heritageacademyofcolumbia.com | www.heritageacademyofcolumbia.com

*** REFERENCES REQUIRED ***

1. Name (*Personal*): _____ Phone # _____
2. Name (*Personal*): _____ Phone # _____
3. Name (*Church*): _____ Phone # _____

SECTION I – STUDENT INFORMATION *(for each child)*

Student's Name (First) _____ (Middle) _____ (Last) _____
Age: _____ DOB: ____/____/____ Grade Level Entering: _____ Gender: _____
Social Security Number (*confidential/used only for student transcript*): _____

Student lives with: Both Father & Mother Father Mother Stepfather Stepmother Other
If other, please explain: _____

Please check if either applies: _____ Father is deceased _____ Mother is deceased

Ethnic Origin (optional – for federal reporting purposes):

White Non-Hispanic American Indian or Alaskan Native Black Non-Hispanic
 Asian or Pacific Islander Hispanic Non-Resident Alien

Nearest relative to contact in addition to parents in the event of an emergency:

Name: _____ Relation to student: _____ Phone: _____
Street Address: _____ City: _____ Zip: _____

SECTION II – FAMILY INFORMATION *(for each child)*

Street Address: _____ City: _____ Zip: _____
Home Phone: (____) _____ Fax number: _____
Mother's cell: _____ Mother's work: _____
Father's cell: _____ Father's Work: _____
Email address #1: _____ Email address #2: _____

Has the father and/or mother of the student attended a Parent Information Presentation at Heritage Academy? Yes No

Father's Name (living with student) _____

Please describe briefly your relationship with Jesus Christ: _____

Marital Status _____

Name of church where member: _____ Active? ___ Yes ___ No

Occupation: _____ Business Phone: _____

Business Name & Address: _____

Number of hours worked weekly outside of home: _____

Please list any special skills, training, or certifications (optional): _____

Mother's Name (living with student): _____

Please describe briefly your relationship with Jesus Christ: _____

Marital Status: _____

Name of church where member: _____ Active? ___ Yes ___ No

Occupation: _____ Business Phone: _____

Business Name & Address: _____

Number of hours worked weekly outside of home: _____

Please list any special skills, training, or certifications (optional): _____

Siblings' Names:

Name: _____ Age: _____ School Attending: _____

Name: _____ Age: _____ School Attending: _____

Name: _____ Age: _____ School Attending: _____

Name: _____ Age: _____ School Attending: _____

Name: _____ Age: _____ School Attending: _____

Does the student affiliated with this application have a sibling who has already enrolled in courses at Heritage Academy for this next school year? **YES NO** (please circle one)

SECTION III – STUDENT REFERENCES (for each child)

*****References REQUIRED for ALL Students****

See First Page

SECTION IV – ACADEMIC INFORMATION (for each child)

Describe the type of instruction that your son or daughter has received (ex. home schooling, public schooling, etc.). Include the approximate dates each type of instruction was received.

In general, how would you rate your child's average academic performance on a standard grading scale (A, B, C, etc.)?

If he or she excels in any area or has unusual difficulty in any area, please explain:

Were any grade levels repeated? If so, please explain.

Has your student previously participated in Stanford Achievement Testing or IOWA Assessments through Heritage Academy?

YES NO *(please circle one)*

If yes, could you identify the most recent year(s) in which he/she tested with us? _____

What are your educational goals for your child?

In what ways do you believe Heritage Academy can help you achieve the educational goals you have for your child(ren)? Do you feel that Heritage Academy is your family's best educational option? If so, why? If not, why are you interested in participating in Heritage Academy's program?

Heritage Academy is not presently equipped to give special help to students with learning disabilities. Does your child have any special learning disabilities which would require help beyond what you are able to give at home and which cannot be alleviated through some other means (e.g. medication)? If so, how do you plan to meet those needs while your child attends Heritage Academy?

| |
|---|
| SECTION V – BEHAVIORAL INFORMATION <i>(for each child)</i> |
|---|

Please describe any behavioral or disciplinary difficulties the student has had during his or her previous schooling.

If your child has been expelled or suspended for any reason, please explain in detail.

SECTION VI – PARENTAL QUESTIONS *(once per family)*

In your understanding, what makes a Christian school distinctively “Christian”? What criteria would you use to determine whether a school is biblically sound in both its structure and its operations?

What, in your opinion, is the proper role of earned letter-grades (e.g. grades: A, B, C, etc.) in a child’s education? How do you think you would respond if your child earned a grade considerably lower than you felt he or she was capable of earning?

How many hours per week is the father willing to devote to supervising, tutoring and/or instructing his child(ren)?

How many hours per week is the mother willing to devote to supervising, tutoring, and/or instructing her child(ren)?

SECTION VII – ITEMS TO BE ATTACHED *(for each child)*

Please note that your student’s application will be considered incomplete if it is submitted without the following documents.

- Complete record of immunizations**, including the date each immunization was received. If religious or medical exemption is claimed, please attach complete Missouri Department of Health Form Imm.P.11A (religious exemption) or Imm.P.12 (medical exemption). NOTE: It is unlawful in the state of Missouri for a child to attend school unless the child has been immunized according to the rules promulgated by the Missouri Department of Health or unless the parent or guardian has signed and submitted a statement of medical or religious exemption with the school administrator. Mo. Rev. Stat. 167.181; 19 CSR 20-28.010.
- Copy of your student’s official birth certificate.**
- Church reference form to be given to your church reference.** *(Attached to this application)*
- Your student’s writing sample.** *(Attached to this application)*
- If your student is currently enrolled in another school, please complete the “Request for Release of Records” Form.** *(Attached to this application)*
- If your student is currently homeschooled, please attach a copy of his or her home school transcript.**
Example of home school transcript may be viewed on the school’s website at heritageacademyofcolumbia.com/forms.html.

**SECTION VIII – CONSENT TO MEDICAL TREATMENT
AND EMERGENCY CONTACT INFORMATION**
(Please complete a separate form for each child.)

CONSENT TO MEDICAL TREATMENT

In case of a medical emergency requiring immediate attention,
I hereby authorize any necessary medical treatment to be given to

_____,
(print child's full name)

of whom I am the parent/guardian.

This authorization includes admission to the hospital in my absence if it is recommended by my child's physician, a consulting physician, or the emergency room/urgent care physician in their absence.

My signature testifies that I am the parent or guardian of the child named above. I will be responsible for the charges for medical treatment authorized by the use of this document. This authorization is effective for the duration that my child is enrolled at Heritage Academy.

PARENT/GUARDIAN SIGNATURE

DATE

INSURANCE INFORMATION

Insurance Company: _____ Policy Number: _____

ID Number: _____ Certification Number: _____

Does company require pre-admission certificate/notification? YES NO *(please circle one)*

If yes, please provide phone number: _____

CHILD'S MEDICAL HISTORY

Child's Full Name: _____ Child's SS#: _____

Child's Birth Date: _____ Date of Last Tetanus Shot: _____

Known allergies or reactions: _____

Chronic Medical Conditions: _____

Child takes the following medications (list dosage and times taken): _____

Medical Limitation (the school should be aware of): _____

Child has been hospitalized (most recently) for: _____

When? _____ Where? _____

CHILD'S PHYSICIAN

Name: _____

Office Number: _____

PARENT CONTACT INFORMATION

Family's Home Phone: _____

Mother's Full Name: _____

Mothers' Place of Employment: _____

Mother's Cell Phone: _____

Mother's Work Phone: _____

Father's Full Name: _____

Father's Place of Employment: _____

Father's Cell Phone: _____

Father's Work Phone: _____

ALTERNATE CONTACTS *(to be contacted in an emergency if parents are unreachable)*

Name: _____

Name: _____

Relationship to Student: _____

Relationship to Student: _____

Phone Number #1: _____

Phone Number #1: _____

Phone Number #2: _____

Phone Number #2: _____

City & State: _____

City & State: _____

ADDITIONAL NOTES

SECTION IX – AGREEMENT WITH PARENTS

Purpose, Statement of Faith, Non-Denominational Clause, and Mediation/Arbitration Clause
(One form applies to all children in the family.)

Please sign at the end of this section, if after reading, you understand and agree with all aspects of Heritage Academy's Purpose Statement, Spiritual and Academic Objectives, Statement of Faith, Nondenominational Position, and Mediation/Arbitration Clause as stated in this section.

STATEMENT OF PURPOSE

Heritage Academy consists of a University-Model School and the related ministries designed to develop and support it. As an organization subject to the Lord Jesus Christ, it seeks to participate in the Great Commission (Matthew 28:19-20) by helping to build the body of Christ through academic education and related ministries (Ephesians 4:11-13). This model is intended to work in partnership with Christian families providing necessary resources in the preparation of young believers for success as disciples of Christ in and beyond higher education (Proverbs 22:6).

OBJECTIVES

I. Spiritual Objective

The spiritual objective of *Heritage Academy* is to encourage its students, families and staff members to live and work wholeheartedly for the Lord and for the building of His body, the Church (Mark 12:30-31). Parents, faculty, staff and board members, therefore, must personally agree with the ministry's Purpose, Statement of Faith, Nondenominational position, and Mediation/Arbitration Clause.

II. Statement of Faith

We believe the Bible to be the only inspired, infallible, authoritative, inerrant Word of God (2 Timothy 3:16; 2 Peter 1:21) and we adhere to its orthodox interpretation regarding all matters, including, but not limited to, the sanctity of life beginning at conception, human sexuality and sexual identity, and the sanctity of marriage between a man and a woman. We affirm the Nashville Statement: A Coalition for Biblical Sexuality (<https://cbmw.org/nashville-statement/>).

We believe there is one God, eternally co-existent in three persons: Father, Son and Holy Spirit (Genesis 1:1; Matthew 28:19; John 10:30).

We believe in the deity of Christ (John 10:33); His virgin birth (Isaiah 7:14; Matthew 1:23; Luke 1:35); His sinless life (Hebrews 4:15; 7:26); His miracles (John 2:11); His vicarious and atoning death (1 Corinthians 15:3; Ephesians 1:7; Hebrews 2:9); His resurrection (John 11:25; 1 Corinthians 15:4); His ascension to the right hand of the Father (Mark 16:19); and His imminent, personal return in power and glory (Acts 1:11; Revelation 19:11).

We believe in the necessity of regeneration by the Holy Spirit for salvation because of the sinfulness of human nature (Romans 3:23; 6:23; Titus 3:5). We believe that men are justified by God's grace and through faith alone in Jesus Christ, who is the only way to eternal life (John 3:16-19; John 14:6, 5:24; Acts 4:12; Romans 5:8-9; Ephesians 2:8-10), and our only mediator with God the Father (1 Timothy 2:5-6).

III. Nondenominational Position

Neither *Heritage Academy* nor its ministries, when acting as representatives of Heritage Academy, shall promote or disparage any doctrinal or denominational beliefs, practices or positions upon which the ministry has assumed no official stance (Philippians 2:1-4).

We maintain this position for the purpose of unity and fairness to each student. Other doctrinal issues upon which this ministry has no official stance will be secondary doctrine and will not be taught. In the event secondary doctrine is brought up, students will be referred back to the family and church for final authority. We desire to remain united in the salvation and love of Christ, avoiding any dissension that may be caused by denominational distinctives.

IV. Academic Objective

This ministry’s primary academic objective is to partner with Christian parents to prepare students for post-secondary education and for life, through a quality, Christ-centered educational program.

MEDIATION / ARBITRATION CLAUSE

The parties to the Agreement with Parents are Christians and believe the Bible commands them to make every effort to live at peace and to resolve disputes with each other in private or within the Christian church (see Matthew 18:15-20; I Corinthians 6:1-8). Therefore, the parties agree that any claim or dispute arising from or related to the functions or activities of Heritage Academy, academic or otherwise, shall be settled by biblically-based mediation and, if necessary, legally binding arbitration in accordance with the Rules of Procedure for Christian Conciliation of the Institute for Christian Conciliation, a division of Peacemakers Ministries. (Complete text of the Rules of Procedure is available at www.HisPeace.org.) Judgment upon an arbitration decision may be entered in any court otherwise having jurisdiction. The parties understand that these methods shall be the sole remedy for any controversy or claim arising out of the functions or activities of Heritage Academy and expressly waive their right to file a lawsuit in any civil court against one another for such disputes, except to enforce an arbitration decision.

Your signatures will confirm that you –

- Acknowledge and agree to support Heritage Academy’s Statement of Faith and Spiritual Objectives,
- Understand and will support Heritage Academy’s Statement of Purpose, and Academic Objectives,
- Agree with and will abide by Heritage Academy’s Nondenominational position, and
- Understand and agree to abide by the content and intent of the Mediation/Arbitration Clause.

(Both Signatures REQUIRED)

Father: _____ Date _____

Mother: _____ Date _____

Heritage Academy Representative: _____ Date _____

SECTION X – FOUNDATIONS FOR PARTNERSHIP

(One form applies to all children in the family.)

Parents, please write **YES** or **NO** on each of the lines to the left.

- _____ Commit to providing a home environment that reflects Biblical morality.
- _____ Commit to having a parent in the home during at-home school days.
(Please see "Parent Roles" in the current Family Manual.)
- _____ Are actively pursuing a relationship with Jesus Christ and attending a Christian church.
- _____ Agree with and support the school's procedures for handling student discipline. (Please see Family Manual.)
- _____ Acknowledge that our child(ren) has/have reviewed Heritage Academy's Code of Conduct and Dress Code Policy and is/are willing to abide by the standards contained therein. (Please see Family Manual.)
- _____ Have as parents with my child(ren) reviewed Heritage Academy's Code of Conduct and Dress Code Policy and agree to support its enforcement concerning my/our child(ren) at Heritage Academy.

_____ Student Signature (grades 9-12)

_____ Student Signature (grades 9-12)

- _____ Agree to inform the school's Administrator if any significant changes occur in relation to topics addressed above.

-
- _____ Agree to ensure that the school annually receives, before the first day of school, updated immunization records for our enrolled child(ren).
 - _____ Agree that our student(s) will participate in mandatory Stanford Achievement Testing (organized by Heritage Academy and at no cost to us) in spring of the years that they are enrolled in any 2nd, 4th, 6th, or 8th grade courses.
 - _____ Agree to login to my student's online Gradelink account and to maintain regular awareness of grades received, assignments missing and teacher communications.
 - _____ Have answered the questions in this application to the best of our knowledge and ability.

(Both Signatures REQUIRED)

Signed: _____ Date: _____
(Father or Legal Guardian)

Signed: _____ Date: _____
(Mother or Legal Guardian)

Heritage Academy Representative: _____ Date: _____

Application Fee *(paid only once per family)*

If this Application for Admission represents the first or only Application for Admission to be submitted by your family, please provide payment of \$50 to accompany submission of this application. This \$50 Application Fee will be assessed only once to your family. **If your family has already paid this fee with an application previously submitted, no repeated payment of fee is required.**

Once completed, this application may be mailed or hand delivered to:

Heritage Academy
2900 Barberry Avenue
Columbia, MO 65202

Student Application (Approved by BOT 11/19, Revised 01/2020)

| |
|--|
| <p>Would you like to identify one family whom we may thank for referring you to Heritage Academy?</p> <p>Family Name: _____</p> |
|--|



HERITAGE ACADEMY

Request for Release of Records

2900 Barberry Avenue ▪ Columbia, MO 65202
Phone: 573.449.2252 ▪ office@heritageacademyofcolumbia.com
www.heritageacademyofcolumbia.com

Date of Request: _____

Name of Student: _____

Date of Birth: _____ Current Grade: _____

I hereby request and authorize official personnel from

(name of school last attended)

(mailing address of school)

(city)

(state)

(zip code)

to mail or email to Heritage Academy the following records concerning my child:

- transcript and academic records (including standardized test scores)
- immunization / health records
- discipline records
- other: _____

(Parent or Guardian's Signature)

(date)

(Heritage Academy Staff) Signature

(date)



The mission of Heritage Academy, a certified K-12 University-Model School[®], is to partner with Christian parents to prepare college-worthy, character witnesses for Jesus Christ.

Writing Sample Requirement

Please see the requirement below and submit with this application:

| Grade entering | Requirement |
|--|---|
| 3rd - 6th | The student will handwrite a paragraph on their favorite topic. |
| 7th - 12th | The student will provide a 3 to 5 paragraph essay on their personal walk with Christ, their reason for wanting to be a Heritage student, and any other information they wish to give to 'introduce' themselves. |
| If you should have any questions regarding this requirement, please contact the office at: office@heritageacademyofcolumbia.com or call the school office at (573) 449-2252. | |

Heritage Academy Church Reference Letter



Family Name: _____

Students(s) and Grade(s): _____

Dear Pastor, Youth Pastor, or Sunday School Teacher,

The family named above has applied for admission to Heritage Academy and must have a reference supplied by you or one of your staff as a part of the admission's process. Please speak to the character of both the student and the family. Your comments will be kept strictly confidential and will not be included in the student's permanent record.

Name of Church: _____

Name of Responder: _____

Position in the Church: _____

Contact Number: _____ Best time to call: _____ AM or PM

Please fill out the following survey with information on the family and student seeking admission:

| Question (please check one) | Yes | No | Unobserved |
|--|-----|----|------------|
| Does the family attend church on a regular basis? | | | |
| Are any family members in positions of responsibility at the church? | | | |
| Is the student(s) in regular attendance at the church/Sunday school? * | | | |
| Does the student(s) serve in any positions of responsibility within the youth? * | | | |
| Are both parents Christian based on your knowledge? | | | |
| Has the student(s) accepted Jesus Christ as his/her Savior?* | | | |
| Can the parents successfully help instruct this student(s)?* | | | |

**If answering for more than one student, please place a check mark and the student's initials.*

Please list positions of responsibility held by either of the parents:

Please give any comments as to the character of the family and students(s) based on your knowledge:

Signature: _____ Date: _____

Send to:
 Heritage Academy
 2900 Barberrry Avenue
 Columbia, MO 65202
office@heritageacademyofcolumbia.com