

**APPLICATION
NEWBURY PARK ADVENTIST ACADEMY**

180 Academy Drive, Newbury Park, CA 91320
(805)498-2191 * FAX (805) 499-1165



Date of Application _____

PERSONAL INFORMATION

Name _____ Grade Entering _____
Last First Middle

Address _____
Street and P.O. Box City State Zip Code

Home Phone (_____) _____ Social Security # _____ Sex: Male _____ Female _____

Age _____ Date of Birth _____ Place of Birth _____ Citizenship _____

If not a U.S. Citizen, Country of Citizenship _____

Type of Visa _____ Visa Number _____

Are you a baptized member of the SDA Church? Yes _____ No _____ Name of Home Church _____

If not an SDA, of which church are you a member? _____

Height _____ Weight _____ Physical Handicaps: Yes _____ No _____ Explain _____

Have you ever smoked? Yes _____ No _____ Last Occasion _____

Have you ever used alcoholic beverages? Yes _____ No _____ Last Occasion _____

Have you ever used illegal drugs of any kind? Yes _____ No _____ Last Occasion _____

Have you ever been suspended or expelled from school? Yes _____ No _____ Last Occasion _____

FAMILY INFORMATION

Are your parents living together? Yes _____ No _____ Widowed _____ Separated _____ Divorced _____ Remarried _____

FATHER

(Indicate Step-parents, if any)

MOTHER

NAME _____

ADDRESS _____

HOME PHONE _____

OCCUPATION _____

EMPLOYER _____

WORK PHONE _____

E-MAIL ADDRESS _____

CHURCH MEMBERSHIP _____

Send Statement to: _____
Name Address

Send Grades to: _____
Name Address

In an Emergency contact: _____

DO NOT WRITE IN THIS SPACE
FOR OFFICE USE ONLY

Date Application Recorded _____ Fee _____ Transcript _____

EDUCATIONAL INFORMATION

List schools attended from 8th grade to current year.

8th Year _____ School _____ Phone (____) _____
9th Year _____ School _____ Phone (____) _____
10th Year _____ School _____ Phone (____) _____
11th Year _____ School _____ Phone (____) _____

Are you enrolled in any correspondence courses? Yes _____ No _____ If yes, list the school and subject(s).

School _____ Subject(s) _____

(Please request your records from the last school you attended.)

REFERENCE INFORMATION

Supply the name and address of persons (not relatives) from whom you have requested references.

1. Church Pastor _____
Address _____ Phone (____) _____
2. Principal or Teacher _____
Address _____ Phone (____) _____
3. Other Person _____
Address _____ Phone (____) _____

(Give the enclosed recommendation forms to the above individuals.)

FINANCIAL INFORMATION

Name of person responsible for your account _____

Relationship to you _____ Phone (____) _____

Address _____ Business Phone (____) _____

City, State & Zip _____

Have you an unpaid account at any school(s)? Yes _____ No _____ If yes, give the name of the school and the amount owed:

School _____

Address _____ Amount _____

City

State

Zip

Are either of your parents employed by the S.D.A. organization? Yes _____ No _____

If yes, give the name of the organization: _____

If you would like to work on campus, please indicate by number your choices of work (minimum age is 14):

_____ Landscape _____ Janitorial _____ Office & Teacher's Aid _____ Maintenance, Building

Your choice cannot be guaranteed due to the limited number of opportunities available in some of the areas.

If the student is accepted, the school will make every effort to provide work for him, but makes no promises or guarantees regarding the amount which the student will earn toward his expenses. This will depend upon the student's ability and willingness to do the work assigned.

CONTRACT

I have read and am in full harmony with the ideals and standards set forth in the NPAA bulletin. I, with the help of God, will order my personal living and conduct in harmony with these principles, and my signature pledges my cooperation and loyalty if admitted as a student.

SIGNED _____

STUDENT

CONTRACT OF PARENT OR GUARDIAN

I agree to the conditions herein stated, and am in harmony with the regulations and policies as stated in the NPAA Bulletin. My financial obligation is clearly understood and I agree to pay my child's account each month unless arranged otherwise in advance, and I further agree to wait for a transcript of grades until my child's account is paid in full upon termination from school. To the best of my knowledge the questions have been answered honestly and the applicant will cooperate with the principles and the spirit of the Academy.

_____, 20____, Signed _____

Parent or Guardian