



MORGANTOWN LEARNING ACADEMY

LEARNING TO DISCOVER...DISCOVERING TO LEARN

123 Discovery Place
Morgantown, WV 26508
(304) 296-9554

ADMISSION AND APPLICATION GUIDELINES

1. Morgantown Learning Academy (MLA) values diversity within the student population and welcomes children of all races, sexes, nationalities, and religions.
2. MLA considers the records of all individual students to be confidential information available to a child's parents/guardians and only after all accounts due are paid in full.
3. MLA reserves the right to refuse admission to a child if school personnel believe that his/her educational needs cannot be met in the MLA learning environment.
4. MLA encourages parent involvement. We require each family to volunteer a pre-set number of hours per school year and participate in fundraising events.
5. **Please return this application form and non-refundable application fee of \$50 to the school.**
6. Applications for admission are available throughout the school year on the MLA website. Prospective students may be requested to submit previous school records and results of any screening and/or evaluations. Applicants will remain on the waitlist until MLA receives notification to remove the child's name.
7. MLA reserves the right to require testing/evaluation as deemed necessary, to make a decision about the admission of a child to the school.
8. A student must be 5 or 6 years of age by our first day of school to enter Kindergarten or First Grade, respectively. Early admission testing may be requested.
9. Class sizes are limited to ensure optimum learning opportunities for students. Applications are reviewed according to, but not limited to, the following criteria: date of application, siblings currently enrolled, continuing status, and the number of years the student plans to attend MLA.
10. You will receive an email notifying you of acceptance once your child has been admitted to MLA.
11. You will be asked to sign a tuition contract with MLA. A variety of payment options are available. A ninety-day, written notice of your intent to remove your child from MLA is required and must be given to a director to legally terminate the contract.

IN COMPLETING ANY OF OUR FORMS, PLEASE KEEP IN MIND THAT THE QUESTIONS WE ASK ARE FOR THE PURPOSE OF HELPING US TO PROTECT, CARE FOR, AND GIVE APPROPRIATE GUIDANCE TO THE CHILD YOU ARE ENTRUSTING TO US.

APPLICATION NOTICE

1. Pre-K and Kindergarten: Priority is given to those students who plan to stay at MLA beyond Kindergarten. Others will be placed on a waiting list.
2. Kindergarten: Although MLA does not insist that a student be five years of age by Jul 1, we do not wish to be a way for parents to circumvent the Public School Systems rules.
3. All Applicants: Priority is given to those students who currently have siblings attending MLA or have siblings who are alumni of MLA.

PERMISSION

1. I hereby grant permission for my child to use all of the play equipment and participate in all of the activities of the school.
2. I hereby grant permission for my child to leave the school premises under the supervision of a staff member for neighborhood walks or field trips in an authorized vehicle.
3. I hereby grant permission for my child to be included in evaluation and pictures connected with the school program.
4. I hereby grant permission to the Directors or School Staff to take whatever steps necessary to obtain emergency medical care if warranted. These steps may include, but are not limited to the following:
 - Attempt to contact a parent or guardian.
 - Attempt to contact the child's physician.
 - Attempt to contact a parent guardian through any person listed on the completed emergency form.
 - If MLA cannot contact a parent or guardian, the child's physician, or paramedics, we will do any of the following:
 - a. Call another physician or paramedic.
 - b. Call an ambulance.
 - c. Have the child taken to an emergency hospital in the company of a Morgantown Learning Academy staff member.
 - Any expenses incurred under #4 above will be borne by the child's family.
 - Morgantown Learning Academy will not be responsible for anything, which may happen as a result of false information given at the time of application or enrollment.
5. I request that Morgantown Learning Academy contact me in the event of an accident or serious illness. If the school is unable to reach me, I hereby authorize the school to call the physician indicated on the emergency card and to follow their instructions. If the school is unable to contact this physician, the school is requested to make whatever arrangements are necessitated, including referral to the hospital as listed on the emergency card for treatment as the attending physician may direct.

SIGNED _____ DATE _____
(Mother, Father, Guardian, or Custodial Parent)

SIGNED _____ DATE _____
(Mother, Father, Guardian, or Custodial Parent)

Morgantown Learning Academy admits students of any race, color, gender, religion, national and ethnic origin to all the rights, privileges, programs and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, gender, religion, national or ethnic origin in administration of its educational policies, admission policies, financial aid, athletic, and other school administered programs.

| |
|----------------------|
| Office Use Only |
| School Year _____ |
| Class or Grade _____ |
| Date rec'd _____ |
| App fee _____ |
| Init. Letter _____ |



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APPLICATION

Application Date: _____

Applicant Personal Information:

Name _____ Commonly Called _____
(First) (Middle) (Last)

Home Address _____
(Street) (City) (State) (Zip)

Home Phone _____ Date of Birth _____ Age _____

| Names of Other Children in the Family | Age | Names of Other Children in the Family | Age |
|---------------------------------------|-------|---------------------------------------|-------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

Is any language other than English spoken at home? _____ Please specify _____

If your child has any food allergies, special medical needs, please explain _____

Applicant Academic Information:

School Year Applying For _____ Grade or class Applying For _____

If admitted, the applicant would remain at MLA through what grade? _____

Reason for Applying _____

It is MLA's policy to send for records from the present school.

School most recently attended: _____
(Name) (Street) (City) (State) (Zip)

Name of Principal _____ Phone _____

Dates of Attendance _____ Present Grade _____

School previously attended _____
(Name) (Street) (City) (State) (Zip)

If your child has had any testing, evaluation, or therapy, please explain _____

Parent/Guardian Information:

Name of Child's Legal Guardian? _____ Relationship _____

With Whom Does the Child Live? _____ Relationship _____

Are Both Parents Living? Y N Married _____ Separated _____ Divorced _____ Remarried _____

Parent/Guardian #1 _____ Email _____
(First) (Middle) (Last)

Home Address _____
(Street) (City) (State) (Zip)

Employer _____
(Name) (Street) (City) (State) (Zip)

Phone: Home _____ Work _____ Cell _____

Parent/Guardian #2 _____ Email _____
(First) (Middle) (Last)

Home Address _____
(Street) (City) (State) (Zip)

Employer _____
(Name) (Street) (City) (State) (Zip)

Phone: Home _____ Work _____ Cell _____

Name of Financially Responsible Party _____

| <u>Emergency Contacts (other than parent/guardian) Phone</u> | <u>Relationship</u> |
|--|---------------------|
| _____ | _____ |
| _____ | _____ |

Specifically, how did you hear about Morgantown Learning Academy?

Webpage Print Ad Referral, by whom _____ Other Media _____

WE HEREBY MAKE APPLICATION FOR ADMISSION OF THE ABOVE NAMED CHILD TO MORGANTOWN LEARNING ACADEMY AND WE ACCEPT THE TERMS OF ADMISSION AS STATED IN THE EXPLANATION OF ADMISSIONS POLICY AND PROCEDURE.

SIGNED _____ DATE _____
(Mother, Father, Guardian)

SIGNED _____ DATE _____
(Mother, Father, Guardian)