

ADMISSIONS PROCEDURE

Grades 1st – 12th

A prospective student must submit a formal application to AUA. There is no application fee. Students must submit evidence of a successful completion of the previous grade or its equivalent. There must be evidence that there is no outstanding financial obligation to any previous school. Membership in the Seventh-day Adventist Church is not a requirement for admission. **However, only those students who have a sincere desire to grow spiritually, academically, and physically should apply.** A prospective student may be given placement testing prior to admission.

AUA strives to maintain reasonable student-teacher ratios to offer quality instruction. Admission to AUA is a privilege and not a right and may be withheld or withdrawn by the academy at its discretion. AUA does not discriminate based on race, color, national or ethnic origin in the admission of students.

Admission Criteria

- Submission of AUA application form
- 2 Satisfactory recommendations:
 - 1 must be completed by a former teacher
 - 1 must be completed by a pastor, Sabbath/Sunday school teacher OR family friend who has known your child for **at least** 2 years (must be at least 21 years old).
- Satisfactory disciplinary and attendance records
- Commitment to academic success
- A demonstrated sincere desire to attend AUA

Step 1: Application Requirements

- Student Application
- 2 Completed Recommendations
- A copy of the student's most recent Report Card
- A copy of student's current Standardized Test scores
- A copy of Disciplinary and Attendance Records
- Interview or Testing with classroom teacher and/or Principal

Step 2: Additional Forms Necessary Once Admitted

- Transfer of Student Records
- Consent to Treatment
- Self-Medication Administration Consent
- Image Release Form
- Riding Permission (1st-8th)
- Automobile Regulations (Grades 9-12 only)
- Acceptable Use Policy
- Copy of [Immunization records](#)
- [Report of Health Examination For School Entry](#) filled out by a doctor (1st grade students **only**)
- [Tdap Booster](#) vaccine (7th grade students only)
- Medical examination form filled out and signed by a doctor (2nd -12th)
- Sports Physical completed by a doctor (Grades 5th-12th students participating in sports.)
- Copy of Birth Certificate
- Financial Agreement

All documents must be submitted for your application to be reviewed.



ARMONA UNION ACADEMY

Student Application

STUDENT INFORMATION

Student Legal Name

Last	First	Middle
------	-------	--------

Home Address:

Street	City	Zip code
--------	------	----------

Student Email Address: _____

Date of Birth: _____ Place of Birth: _____ Age: _____ Sex: _____

Student Ethnicity: _____ Grade applying for: _____

Please answer each question below:

1. Is this student sponsored by an Adventist church member? () Yes () No
2. Is this student a baptized member of the Seventh-day Adventist church? () Yes () No
 - a. If yes, indicate date of baptism: _____
 - b. Please list where membership is held: _____
3. Does this student have some other church affiliation? If yes, please list: _____

STUDENT EDUCATIONAL INFORMATION

School Last Attended: _____

Name	Address	Phone
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Please answer each question below:

1. Has this student been previously identified as qualifying for a gifted education program?

Yes No If yes, what kind? _____ When? _____

Where? _____ By whom? _____
2. Has this student been previously identified as qualifying for a special education program?

Yes No If yes, what kind? _____ When? _____

Where? _____ By whom? _____
3. Does this student have an unpaid account at another school?

Yes No If yes, what kind? _____ When? _____

Where? _____ By whom? _____

EMERGENCY CONTACT (required)

Please list numbers we can reach at any time.

Full Legal Name: _____

Street Address: _____

City, State, Zip: _____

Cell Phone: _____

Relation to Student: _____

GUARDIAN INFORMATION (required)

Check all that apply: Father Stepdad Grandparent Mother Stepmom Grandparent

Full Legal Name: _____

Street Address: _____

City, State, Zip: _____

Home Phone: _____

Cell Phone: _____

Work Phone: _____

Employer: _____

Occupation: _____

Email Address: _____

Denomination: _____

Church Membership _____

Ethnicity: _____

Please list names of other children in the family:

SIBLING NAME	SEX	AGE	SCHOOL ATTENDING
1.			
2.			
3.			
4.			

STUDENT CONTRACT

I agree to uphold the school’s regulations. I pledge my cooperation with and loyalty to the school and its’ employees. I will live in harmony with the school’s Christian principles.

Student Signature

Date

PARENT CONTRACT

I hereby agree to support school regulations and to help my child observe them, to supply physical examination reports for this student, a) entering school for the first time, b) at grade seven (this should include the scoliosis examination), c) at grade 9, and d) other financial educational obligations for this student.

Parent Signature

Date



ARMONA UNION ACADEMY

#1 Letter of Recommendation: **Former or Current Teacher**

Student Name: _____

Grade: _____

The student named above has applied for admission to Armona Union Academy. AUA is a K-12 Christian School operated by the Seventh-Day Adventist Church. Students need not be Seventh Day Adventists to attend but must be willing to cooperate in maintaining a Christian atmosphere. We offer a challenging academic program within a Christ-centered framework. We make every effort to develop and strengthen the spiritual, intellectual, physical, and emotional sides of each student. In helping us to make an evaluation of this applicant, we ask that you fill out this form to the best of your knowledge. We will appreciate your careful consideration of his or her intellectual and personal qualities, as your recommendation will be a very important part of our evaluation and will be kept in the strictest of confidence.

PLEASE RETURN THIS FORM DIRECTLY TO ARMONA UNION ACADEMY.

CHARACTERISTICS:

From the list, choose **THREE** words that best describe the applicant. Please circle your choices.

- | | | | | |
|------------|--------------|--------------|---------------|---------------|
| Agreeable | Disobedient | Humorous | Patient | Troubled |
| Aggressive | Distractible | Hyperactive | Perfectionist | Trustworthy |
| Ambitious | Energetic | Industrious | Prompt | Untrustworthy |
| Athletic | Generous | Late | Rebellious | Underachiever |
| Attentive | Happy | Lazy | Slow | Other: _____ |
| Consistent | Healthy | Obedient | Sneaky | _____ |
| Daydreamer | Honest | Overachiever | Supportive | _____ |

PERSONAL QUALITIES

Compared to all students this age with whom you have dealt with, please rate this student in the following areas:

	Not Known	Poor	Below Average	Average	Good	Excellent	Truly Outstanding
Christian Values							
Integrity							
Creative							
Reaction to Criticism							
Self-disciplined							
Perseverance							
Respect for Authority							
Leadership							
Common Sense							
Independence							
Self-Confidence							
Energy							
Tolerance of Peers							
Respect of Peers							
Concern for Others							
Sense of Humor							
Emotional Stability							
Choice of Friends							
Relationship w/parents							

ACADEMIC WORK:

Compared to all students this age with whom you have dealt with, please rate this student in the following areas:

	Truly Outstanding	Excellent	Good	Average	Below Average	Poor	Not Known
Reading Ability							
Reading Achievement							
Writing Ability							
Writing Achievement							
Math Ability							
Math Achievement							
Study Habits							
Effective Class Discussion							

RECOMMENDATIONS:

How do you recommend this candidate for admission to Armona Union Academy?

With Enthusiasm _____ With Confidence _____ With Reservations _____ Not Recommended _____

COMMENTS:

Briefly share any comments you feel will help us in deciding admission regarding the candidate:

Please answer each question below:

1. In what capacity do you know the candidate? _____
2. How long have you known the candidate? _____

Your Name: _____

Your Title: _____

Your Contact Number: _____

School/Church Name: _____

School/Church Address: _____

School/Church Contact: Number: _____

Your Signature: _____

Date: _____

Thank you for providing a helpful recommendation for the applicant. These are the three ways to submit the recommendation: fax: 559.582.6609, email: office@auaweb.com, mail: Armona Union Academy, P.O. Box 397, Armona, CA 93202. Should you have questions, please contact Mr. Bovee or Mrs. Interiano at 559.582.4468 or email office@auaweb.com



ARMONA UNION ACADEMY

#2 Letter of Recommendation: **Pastor or Sabbath/Sunday School Teacher**

Student Name: _____

Grade: _____

The student named above has applied for admission to Armona Union Academy. AUA is a K-12 Christian School operated by the Seventh-Day Adventist Church. Students need not be Seventh Day Adventists to attend but must be willing to cooperate in maintaining a Christian atmosphere. We offer a challenging academic program within a Christ-centered framework. We make every effort to develop and strengthen the spiritual, intellectual, physical and emotional sides of each student. In helping us to make an evaluation of this applicant, we ask that you fill out this form to the best of your knowledge. We will appreciate your careful consideration of his or her intellectual and personal qualities, as your recommendation will be a very important part of our evaluation and will be kept in the strictest of confidence.

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CHARACTERISTICS:

From the list, choose **THREE** words that best describe the applicant. Please circle your choices.

- | | | | | |
|------------|--------------|--------------|---------------|---------------|
| Agreeable | Disobedient | Humorous | Patient | Troubled |
| Aggressive | Distractible | Hyperactive | Perfectionist | Trustworthy |
| Ambitious | Energetic | Industrious | Prompt | Untrustworthy |
| Athletic | Generous | Late | Rebellious | Underachiever |
| Attentive | Happy | Lazy | Slow | Other: _____ |
| Consistent | Healthy | Obedient | Sneaky | _____ |
| Daydreamer | Honest | Overachiever | Supportive | _____ |

PERSONAL QUALITIES

Compared to all students this age with whom you have dealt with, please rate this student in the following areas:

	Not Known	Poor	Below Average	Average	Good	Excellent	Truly Outstanding
Christian Values							
Integrity							
Creative							
Reaction to Criticism							
Self-disciplined							
Perseverance							
Respect for Authority							
Leadership							
Common Sense							
Independence							
Self-Confidence							
Energy							
Tolerance of Peers							
Respect of Peers							
Concern for Others							
Sense of Humor							
Emotional Stability							
Choice of Friends							
Relationship w/parents							

ACADEMIC WORK:

Compared to all students this age with whom you have dealt with, please rate this student in the following areas:

	Truly Outstanding	Excellent	Good	Average	Below Average	Poor	Not Known
Reading Ability							
Reading Achievement							
Writing Ability							
Writing Achievement							
Math Ability							
Math Achievement							
Study Habits							
Effective Class Discussion							

RECOMMENDATIONS:

How do you recommend this candidate for admission to Armona Union Academy?

With Enthusiasm _____ With Confidence _____ With Reservations _____ Not Recommended _____

COMMENTS:

Briefly share any comments you feel will help us in deciding admission regarding the candidate:

Please answer each question below:

1. In what capacity do you know the candidate? _____
2. How long have you known the candidate? _____

Your Name: _____

Your Title: _____

Your Contact Number: _____

School/Church Name: _____

School/Church Address: _____

School/Church Contact: Number: _____

Your Signature: _____

Date: _____

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ARMONA UNION ACADEMY

#2 Letter of Recommendation: **Adult-must be 21 years old and NOT related to applicant**

Student Name: _____

Grade: _____

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CHARACTERISTICS:

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- | | | | | |
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| Aggressive | Distractible | Hyperactive | Perfectionist | Trustworthy |
| Ambitious | Energetic | Industrious | Prompt | Untrustworthy |
| Athletic | Generous | Late | Rebellious | Underachiever |
| Attentive | Happy | Lazy | Slow | Other: _____ |
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| Daydreamer | Honest | Overachiever | Supportive | _____ |

PERSONAL QUALITIES

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Integrity							
Creative							
Reaction to Criticism							
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Perseverance							
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Leadership							
Common Sense							
Independence							
Self-Confidence							
Energy							
Tolerance of Peers							
Respect of Peers							
Concern for Others							
Sense of Humor							
Emotional Stability							
Choice of Friends							
Relationship w/parents							

ACADEMIC WORK:

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	Truly Outstanding	Excellent	Good	Average	Below Average	Poor	Not Known
Reading Ability							
Reading Achievement							
Writing Ability							
Writing Achievement							
Math Ability							
Math Achievement							
Study Habits							
Effective Class Discussion							

RECOMMENDATIONS:

How do you recommend this candidate for admission to Armona Union Academy?

With Enthusiasm _____ With Confidence _____ With Reservations _____ Not Recommended _____

COMMENTS:

Briefly share any comments you feel will help us in deciding admission regarding the candidate:

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2. How long have you known the candidate? _____

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Your Title: _____

Your Contact Number: _____

School/Church Name: _____

School/Church Address: _____

School/Church Contact: Number: _____

Your Signature: _____

Date: _____

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