Current School Phone:

APPLICATION FOR ADMISSION

	A	Applying for grade Fall/Spring/Summer 20			
Livermore Valley A C A D E M Y			Date of Application	<u> </u> /20	
Student's Full Name:					
Lo	ast	Firs	t	Middle	
Student's Primary Address	: Street	City	State	Zip	
Student's Home Phone:			SSN:		
Date of Birth://			Gender: _		
Ethnicity:					
Hispanic/Latino	Black/Afric	an	Native Hawai	ian/Pacific Islander	
Caucasian/White	Asian		American Inc	lian/Alaska Native	
Middle Eastern	Other				
Current School:			Current/Last Grade	Attended:	

FAMILY INFORMATION PARENT/GUARDIAN 1

Parent's	Name:			
		Last	First	Middle
Parent's relationship to Applicant:		Parent's Oc	cupation:	
Parent's I	Primary Phone:			
Parent's S	Secondary Phone:			
Parent's I	Email Address:			
Parent's I	Home Address (If otl	ner than that of	Applicant):	
FAMILY	'INFORMATION	PARENT/GU	ARDIAN 2	
Parent's	Name:	Last	First	Middle
Parent's r	elationship to Applica	ınt:	Parent's Oc	ccupation:
Parent's I	Primary Phone:			
Parent's S	Secondary Phone:			
Parent's I	Email Address:			
Parent's I	Home Address (If oth	ner than that of	Applicant):	
FAMILY	'INFORMATION	PARENT/GU	IARDIAN 3	
Parent's	Name:	Last	First	Middle
Parent's r	elationship to Applica			cupation:
Parent's I	Primary Phone:	***		
Parent's	Secondary Phone:			
Parent's I	Email Address:			
Parent's I	Home Address (If otl	ner than that of	Applicant):	

FAMILY INFORMATION OTHER

Student lives with:							
Both Parents Step-Mother							
Mother Step-Father							
Father Guardian(s)							
Grandparent(s) Both Parents in Different Households (Court Documents required)							
If the child is adopted, how long has he/she	lived with you?						
Names, ages and grade in school of	other children in the fam	nily:					
Name:		Age:	Grade:				
Name:		Age:	Grade:				
Name:		Age:	Grade:				
What language is spoken most at home?							
What other languages do family members s	peak fluently?						
*Is your child ELL (English Language Learne	r)? YesNo						
*Does your child have an IEP or 504 plan? Yes_	No						
*Does your child have special needs (for exc	ample, medication, language	developme	nt delav.				
behavioral, emotional, or social issues, etc.)?				1)			
Additional Information:							
How did you hear about Livermore Valley	Academy? Check all that app	oly.					
LVA Website	_ Phone Contact with LVA St	aff					
Facebook	_ Instagram						
Current LVA Friend-Family Name:		_					
Campus Visit/Open House							
I/We consent to allow my/our child's image	to be used on the LVA social	media, web	osite and				
understand that no child's name or informa	tion will be disclosed	Ves	No				

Livermore Valley Academy's admissions policies shall not be influenced or affected by an applicant's race, color, sex, national origin, age, disability, or any other characteristic protected by the law. The school does not discriminate in the admission of its students in its offers of tuition assistance, nor does it discriminate among its students on the basis of religious beliefs.

I certify that all information given on all application materials is correct and complete. I understand that any omission or misinformation may result in denial of my application or dismissal from Livermore Valley Academy.

LVA Tuition Schedule:						
Annual Tuition: Initial:						
Payment Options-pick one and initial: One payment (full amount): Initial: Ten payments: Initial: I have received, read, and agree to the LVA tuition schedule.						
Guardian #1 Signature:	Date:					
Guardian #2 Signature:	Date:					
SCH	OOL USE ONLY					
Date Received:	Registration Fee:, ACH or CC Technology Fee:, ACH or CC Supply Fee:, ACH or CC Supply Fee:, ACH or CC IEP Admin Fee:, ACH or CC Assessment Fee:, ACH or CC					
ACH	Cash, Check #, ACH or CC					
Emergency Card						
Student Policies	Shirt Size:					
Immunization Record						