

# APPLICATION FOR ADMISSION



**16100 Livingston Rd.  
Naples, FL 34110**

*Attach recent  
photograph of  
applicant here.*

*The mission of Royal Palm Academy is to partner with families to provide an education of rich academics with Catholic formation. We teach the mind, educate the heart, and form the character of tomorrow's leaders.*

## Admission Application Checklist:

- ☐ **Application** - Please complete this application and return it with the \$150.00 non-refundable application fee (check payable to "Royal Palm Academy").
- ☐ **Recommendation and Records** - Please complete and sign (both parents' signatures needed) the "Permission to Release Records" Form. Please give the Teacher Recommendation Form to your child's current teacher and ask that it be completed and returned to Royal Palm Academy. Royal Palm Academy must receive the Recommendation Form and records directly from the applicant's school.
- ☐ **Testing** - The Admission Committee requires ability and/or readiness evaluations for all applicants. Applicants for Pre-K4 through 8<sup>th</sup> grade will be evaluated at the school.
- ☐ **Family Visit** - The Admissions Office will arrange an appointment for a required campus visit and meeting with the Admissions Office and/or Executive Director.
- ☐ The **Admissions Committee** will review the application after *all* materials are received and procedures are completed.

Today's Date: \_\_\_\_\_

Proposed Enrollment Date: \_\_\_\_\_

Application for Grade: ☐ PK3(3 Day) ☐ PK3(5 Day) ☐ PK4 ☐ K ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8

Name of Applicant: \_\_\_\_\_  
Last First Middle Preferred Name

☐ Male ☐ Female Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Social Security Number \_\_\_\_ - \_\_\_\_ - \_\_\_\_  
(month/day/year)

Current School Name Current Grade Attended From (month/year) To Present

Current School Address

Previous School Name From To Previous School Name From To

# FAMILY INFORMATION



## Father/Guardian:

Dr./Mr. First Name Last Name

Address

City State Zip  
(Subdivision)

Home ( ) Cell ( )

Fax ( ) Email:

Job Title:

Business Name

Business Address

City State Zip  
( )

Business Phone

Religion

Parish/Church/Community

## Mother/Guardian:

Dr./Ms./ Mrs. First Name Last Name

Address

City State Zip  
(Subdivision)

Home ( ) Cell ( )

Fax ( ) Email:

Job Title:

Business Name

Business Address

City State Zip  
( )

Business Phone

Religion

Parish/Church/Community

Please star (\*) above address to use for all correspondence regarding this application.

Marital Status of Natural Parents: ☐ Single ☐ Married ☐ Separated ☐ Divorced ☐ Widowed

With whom does student live? \_\_\_\_\_

Who has custody? ☐ Mother ☐ Father ☐ Joint

Who will be responsible for payment of school fees? \_\_\_\_\_

**Royal Palm Academy's open admission and financial aid policies do not discriminate on the basis of race, gender, ethnic origin, disability, or similar factors. Applicants of all races and creeds are welcome at Royal Palm Academy.**



**GUIDANCE AND ADMISSION INFORMATION:**

Country where born \_\_\_\_\_ Country of citizenship \_\_\_\_\_

If a citizen of country other than the United States, will I-20 Immigration Form be needed? ☐ Yes ☐ No ☐ N/A

Please provide visa number if I-20 is not used to enter the U.S.A.: \_\_\_\_\_

Language(s) spoken at home \_\_\_\_\_

How did you first learn about Royal Palm Academy? \_\_\_\_\_

Has student previously applied to Royal Palm Academy? ☐ Yes ☐ No

If yes, for what Grade? \_\_\_\_\_

Did the student previously attend Royal Palm Academy? ☐ Yes ☐ No

If yes, last year attended? \_\_\_\_\_

Has the applicant skipped a grade? ☐ Yes ☐ No

If so which grade? \_\_\_\_\_

Has the applicant repeated a grade? ☐ Yes ☐ No

If so which grade? \_\_\_\_\_

Has the applicant ever received disciplinary censure at school? ☐ Yes ☐ No

School suspension? ☐ Yes ☐ No

Dismissed? ☐ Yes ☐ No

Asked to withdraw by school? ☐ Yes ☐ No

Probation? ☐ Yes ☐ No

Please share with us information about disciplinary matters: \_\_\_\_\_

Can the applicant participate in organized team sports or other school programs? ☐ Yes ☐ No

Please share information to help us understand your child's athletic interests, talents, and team participation:

If the applicant has received or is receiving personal counseling, please provide information so that we may better understand and respond to your child's needs: \_\_\_\_\_

Candidates with a disability who would like to request accommodations should identify themselves early in the application process. Documentation from a qualified professional is required and should either be enclosed with this application or sent directly to the Admissions Office. Auxiliary aids and services may be available on request. If the applicant has a disability and would like to request accommodations in the admissions process, please explain here.

**SIBLING INFORMATION:** Please list siblings who attend Royal Palm Academy:

Name \_\_\_\_\_ Current Grade \_\_\_\_\_

Name \_\_\_\_\_ Current Grade \_\_\_\_\_

**GRANDPARENT INFORMATION:** Grandparents of current students are sent school newsletters and invitations to special events. Please name living grandparents and list their addresses:



Dr./Mr./Mrs.	First Name	Last Name (Maternal)	Address	City	State	Zip
Dr./Mr./Mrs.	First Name	Last Name (Maternal)	Address	City	State	Zip
Dr./Mr./Mrs.	First Name	Last Name (Paternal)	Address	City	State	Zip
Dr./Mr./Mrs.	First Name	Last Name (Paternal)	Address	City	State	Zip

### FINANCIAL AID

Do you wish to receive information about the Royal Palm Academy Financial Aid program based on family need?

☐ Yes

☐ No

☐ Already have materials

### APPLICATION

1. A non-refundable application fee of \$150.00 is required of all applicants

2. (I/We) hereby authorize Royal Palm Academy to contact schools and other sources to obtain information to support this application and will not seek access to confidential recommendation and evaluation materials before or after (my/our) (child's/ward's) admission. The undersigned releases every person and institution from any and all liability resulting from or pertaining to the furnishing of records, documents and other information provided to Royal Palm Academy for that purpose.

3. Your signature on this application verifies that the information set forth in the application and provided in separate documents is true and correct. (I/We) understand that any false, misleading, or inaccurate information, or any missing or omitted information, may be deemed to be reason for Royal Palm Academy to reject this application or dismiss my/our child from school if accepted. **Both parents are required to sign the application** unless the school receives information reflecting that only one parent has the authority to make educational decisions.

\_\_\_\_\_  
Father/Guardian Signature Date

\_\_\_\_\_  
Mother/Guardian Signature Date

*Thank you for your interest in Royal Palm Academy.*

Please send your completed application and the application fee to the Admissions Office at Royal Palm Academy.

FOR OFFICE USE ONLY

Dare \_\_\_\_\_ Amt. \_\_\_\_\_ By \_\_\_\_\_  
TM \_\_\_\_\_ CO \_\_\_\_\_ FX \_\_\_\_\_ EV \_\_\_\_\_