



**Harmony Academy Student Application  
2019 - 2020**

**We are so glad to have you consider attending Harmony Academy.  
To be considered for admission, every applicant must complete this application for enrollment.**

**STUDENT**

Name \_\_\_\_\_ Date of birth \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Previous School \_\_\_\_\_ Grade \_\_\_\_\_

Email: \_\_\_\_\_

Pronouns I like to use are: \_\_\_\_\_

**PARENTS**

*Guardian 1* \_\_\_\_\_

Address \_\_\_\_\_ Place of Employment \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email: \_\_\_\_\_

Willing to volunteer at school Yes \_\_\_\_\_ No \_\_\_\_\_

*Guardian 2* \_\_\_\_\_

Address \_\_\_\_\_ Place of Employment \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email: \_\_\_\_\_

Willing to volunteer at school Yes \_\_\_\_\_ No \_\_\_\_\_

*GUARDIAN (If different from parents)*

Name \_\_\_\_\_

Address \_\_\_\_\_ Place of Employment \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Willing to volunteer at school Yes \_\_\_\_\_ No \_\_\_\_\_

Email: \_\_\_\_\_

*Student lives with* \_\_\_\_\_

**PREVIOUS SCHOOL PROGRAMS**

Please list all schools attended.

**ACADEMIC HISTORY**

In a paragraph or two, describe your academic experience. What subjects particularly interested you? How do you best learn? What worked for you at prior schools? What didn't work so well? Please include areas of strength as well as challenges. (You may attach additional sheets.)

**Questions about your academic history. Please check all that may apply and explain in the comment section below. If none are applicable, leave them blank.**

	Failure to complete assignments on a regular basis		Failing grades Number classes currently failing _____
	Failed 1 or more previous grades Grade(s) failed _____		Failed in other alternative program Name of program _____

	Currently home-schooled		Currently receiving home tutoring or online school
	Not enrolled in a school program		Special education Please include accommodations or IEP
	Enrolled but not attending		504 Plan Please include accommodations

*Comments about checked boxes:*

**SOCIAL AND EMOTIONAL BEHAVIOR**

Imagine that you are someone else introducing you to someone new. How would that individual describe you as a person? What are the first three words or phrases someone would use to describe you?

**Questions about your personal history. Please check all that may apply and explain them below in the comments section. If none are applicable, leave blank.**

	Gang Involvement		History of social isolation
	Adjudicated (explain below) Probation Officer: _____		Reluctant Learner
	Past history of anger problems		Recent suspensions Number _____
	Substance use or treatment		Mental health concerns
	Experienced a traumatic incident (explain below)		Pregnant or parenting teen
	Family changes (circle all that apply) Divorce, death, separation, illness, loss of mobility		

	Have been expelled in the past (Year)_____		Currently expelled
	Have gone through pre-expulsion		Other

Comments:

**Please list any community services you are receiving (e.g. probation, medical intervention, counseling, social work) and the person from whom you receive these services.**

**Please describe any current concerns you have regarding school, home or community.**

**Please describe any hobbies or interests you have.**

**Please list any jobs you have had, include dates worked and reason for leaving.**

**In a paragraph or two, explain how you would benefit from attending a Recovery High School like Harmony Academy, and describe ways you imagine contributing to your community, either at school or where you live.**

**Days/times you are available for a phone call to set up your initial interview and do you prefer a phone call, text, or email to set up the meeting.**

How long have you been in recovery (or how long have you been trying) \_\_\_\_\_  
\_\_\_\_\_

I am willing to participate in individual, group or family counseling. Yes \_\_\_\_\_ No \_\_\_\_\_

I am interested in participating in other supports offered. Yes \_\_\_\_\_ No \_\_\_\_\_

I need help finding support groups for young people in recovery. Yes \_\_\_\_\_ No \_\_\_\_\_

Please contact me with information about any summer programming. Yes \_\_\_\_\_ No \_\_\_\_\_

Someone helped me to fill out this form. Yes \_\_\_\_\_ No \_\_\_\_\_

\_\_\_\_\_  
**(Student Signature)**

\_\_\_\_\_  
**(Date)**