



## APPLICATION CHECKLIST

Please submit the following forms to complete the admission process for Academy High. Upon receipt of all application materials, the School will contact you to schedule an interview. Thank you.

- Application for Admission**
- Parent/Guardian Statement**
- Student Statement**
- Administrator Report**  
This form may be completed by a current or former Head of School, Assistant Head of School, Principal, Assistant Principal, or Guidance Counselor.
- Information Release Form**
- Applicant Reference**  
This form may be completed by a teacher, coach, friend, or any other individual who knows the applicant well.

## APPLICATION SUBMISSION

The due date to be considered in the next round of the admissions cycle will be announced soon. Please do not hesitate to submit your application in the meantime, as admissions are on a rolling basis.

Please e-mail all forms to [admissions@academyhigh.org](mailto:admissions@academyhigh.org) or send through the U.S. Mail to:

Academy High  
2302 Fox Drive  
Champaign, IL 61820

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# APPLICATION FOR ADMISSION

1 of 3

To be completed by Parent or Guardian.

## APPLICANT INFORMATION

_____	_____	_____
First Name	Middle Name	Last Name
_____	_____	_____
Name Usually Called	Date of Birth	Gender
_____		
Current Mailing Address		

## PARENT/GUARDIAN INFORMATION (1)

_____	_____	_____
First Name	Middle Name	Last Name
_____		
Current Mailing Address		
_____		
Email Address		
_____	Accepts Text Messages: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Primary Phone		
_____	Accepts Text Messages: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Secondary Phone		

## PARENT/GUARDIAN INFORMATION (2)

_____	_____	_____
First Name	Middle Name	Last Name
_____		
Current Mailing Address		
_____		
Email Address		
_____	Accepts Text Messages: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Primary Phone		
_____	Accepts Text Messages: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Secondary Phone		





**APPLICATION FOR ADMISSION** 2 of 3

**APPLICANT PROFILE**

Current School Name \_\_\_\_\_ Current School Address \_\_\_\_\_

Current Grade \_\_\_\_\_ Applying for Grade \_\_\_\_\_ in Fall 20 \_\_\_\_\_

Other Schools Attended in the Last Three Years (Name, Address, Dates Attended):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Siblings (Names and Ages):  
\_\_\_\_\_  
\_\_\_\_\_

Is a Language Other Than English Spoken at Home?  Yes  No

If Yes, What Language? \_\_\_\_\_ Is the Applicant Bilingual?  Yes  No

**FINANCIAL INFORMATION**

Name(s) and Address(es) of the person (s) Who Will Pay School Bills:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Will the Applicant Apply for Financial Aid?  Yes  No

Note: Applying for Financial Aid will not affect the admissions decision.





## APPLICATION FOR ADMISSION

3 of 3

The information furnished on the application and related forms will be completely confidential and will not be disclosed to anyone beyond the Admission Committee and other appropriate school personnel, except at the Head of School's discretion.

THANK YOU. WE APPRECIATE YOUR TAKING THE TIME TO COMPLETE THIS FORM.

### PARENT/GUARDIAN SIGNATURE

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

### APPLICATION SUBMISSION

Please submit a \$50.00 application fee. Checks should be made payable to Academy High. If you are unable to pay this fee, please contact us.

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**PARENT/GUARDIAN STATEMENT** 1 of 2

**APPLICANT INFORMATION**

\_\_\_\_\_  
First Name

\_\_\_\_\_  
Middle Name

\_\_\_\_\_  
Last Name

PLEASE ANSWER THE FOLLOWING QUESTIONS.

If you feel that additional information would be helpful in our admissions decision, please feel free to include it as a separate attachment.

What are your child’s strengths, interests, personal traits, learning experiences, and any areas of challenge?

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**PARENT/GUARDIAN STATEMENT** 2 of 2

Why do you think Academy High would be a good match for your child and family?

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**PARENT/GUARDIAN SIGNATURE**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

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# STUDENT STATEMENT

## APPLICANT INFORMATION

\_\_\_\_\_  
First Name

\_\_\_\_\_  
Middle Name

\_\_\_\_\_  
Last Name

## PLEASE SUBMIT THE FOLLOWING:

1. Answer one of the questions below in your own writing, either by hand or typed. Feel free to attach additional pages if necessary.
2. Submit a video, a photograph of an original work of art, or other example that reflects your passion, interests, and best work.

## QUESTION CHOICES (CHOOSE ONE)

1. What would be your ideal high school class?
2. What's the boldest thing you have ever done?
3. If you could meet an historical figure, who would it be, and what would you ask that person?

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**ACADEMY HIGH**  
CHAMPAIGN URBANA

**STUDENT STATEMENT** 2 of 2

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**APPLICANT SIGNATURE**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**APPLICATION SUBMISSION**

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# ADMINISTRATOR REPORT

## APPLICANT INFORMATION

\_\_\_\_\_

First Name

\_\_\_\_\_

Middle Name

\_\_\_\_\_

Last Name

To the Parent/Guardian: Please read and sign the statement below.

I acknowledge that I waive my right to read the confidential Administrator Report for the student listed above.

\_\_\_\_\_

Name of Parent or Guardian (please print)

\_\_\_\_\_

Signature of Parent or Guardian

\_\_\_\_\_

Date

To Administrator: This student is applying for admission to Academy High. Please fill out this form to provide us a full and candid profile of the applicant. Your appraisal will be held in strict confidence. Thank you in advance for your valuable help in this process.

## ADMINISTRATOR INFORMATION

\_\_\_\_\_

Name

\_\_\_\_\_

Title

\_\_\_\_\_

School Name

\_\_\_\_\_

School Address

Please summarize the personal and academic qualities of the applicant, including strengths in areas of interest, areas for growth and development, maturity and sense of self, and interactions with peers, staff, and faculty.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_





**ACADEMY HIGH**  
CHAMPAIGN URBANA

**ADMINISTRATOR REPORT** 2 of 3

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Has the applicant received any special tutoring or other academic support through your school? If so, please describe them, their frequency, and your perspective on their continuing need.

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Is there anything else you would like to add about this applicant?

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# ADMINISTRATOR REPORT

3 of 3

Rate the applicant with respect to the following qualities, compared to other students at the same peer level or cohort.

	Excellent	Very Good	Good	Average	Below Average	N/A
<b>Academic Strength:</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Self-Motivation:</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Intellectual Curiosity:</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Imagination and Creativity:</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Citizenship:</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Acceptance Toward Others:</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

THANK YOU. WE APPRECIATE YOUR TAKING THE TIME TO COMPLETE THIS FORM.

## ADMINISTRATOR SIGNATURE

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Please Print Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Length of Time Acquainted with Applicant

## APPLICATION SUBMISSION

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## INFORMATION RELEASE FORM

1 of 1

Parents: Please give this form to your child's current school.

### INFORMATION RELEASE

\_\_\_\_\_  
Name of Principal, Head of School, Guidance Counselor

\_\_\_\_\_  
Name of School

Our child, \_\_\_\_\_, has applied to Academy High. We hereby give permission to have pertinent records and information forwarded to Academy High as part of the application process. Thank you in advance for your assistance.

THANK YOU. WE APPRECIATE YOUR TAKING THE TIME TO COMPLETE THIS FORM.

### PARENT/GUARDIAN SIGNATURE

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

### APPLICATION SUBMISSION

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## APPLICANT REFERENCE

1 of 2

### APPLICANT INFORMATION

\_\_\_\_\_  
First Name

\_\_\_\_\_  
Middle Name

\_\_\_\_\_  
Last Name

To the Parent/Guardian: Please read and sign the statement below.

I acknowledge that I waive my right to read the confidential Applicant Reference for the student listed above.

\_\_\_\_\_  
Name of Parent or Guardian (please print)

\_\_\_\_\_  
Signature of Parent or Guardian

\_\_\_\_\_  
Date

To Reference: This student is applying for admission to Academy High. Please fill out this form to provide us a full and candid profile of the applicant. Your appraisal will be held in strict confidence. Thank you in advance for your valuable help in this process.

### REFERENCE INFORMATION

\_\_\_\_\_  
Name

\_\_\_\_\_  
In what capacity have you known the applicant and for how long?

Please summarize the personal and academic qualities of the applicant, including strengths, areas for growth and development, maturity and sense of self, perseverance, and interaction with others.

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## APPLICANT REFERENCE

2 of 2

Rate the applicant with respect to the following qualities, compared to other students at the same peer level or cohort.

	Excellent	Very Good	Good	Average	Below Average	N/A
<b>Academic Strength:</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Self-Motivation:</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Intellectual Curiosity:</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Imagination and Creativity:</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Citizenship:</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Acceptance Toward Others:</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

THANK YOU. WE APPRECIATE YOUR TAKING THE TIME TO COMPLETE THIS FORM.

### REFERENCE SIGNATURE

Signature

Date

Please Print Name

Length of Time Acquainted with Applicant

### APPLICATION SUBMISSION

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## APPLYING FOR FINANCIAL AID

We partner with School and Student Services (SSS) by NAIS in our financial aid process. To begin your financial aid application, you will complete SSS's Parents' Financial Statement (PFS).

The PFS is a comprehensive application that will take some time to complete. Give yourself the time you need by not waiting until the deadline to begin. You'll need your most recent tax return before beginning the PFS. We also recommend that you review the wide range of materials that SSS has put together to help families with the financial aid process. They can be found at <http://sssbynais.org/parents>.

We will communicate our financial aid decision to you. To make our decision, we use the information from the PFS as a starting point but also consider our school policy, practices, and available budget.

## HOW TO COMPLETE THE PARENTS' FINANCIAL STATEMENT (PFS) ONLINE



- Beginning October 24, 2016, visit <https://sss.secure.force.com/familyportal> to create your PFS Online account using your email address and a password.
- Begin a PFS for Academic Year 2017-18. You can log out of the PFS Online at any time, then return later to complete it.
- After you have pressed submit, you'll be brought to a payment screen. The fee of \$48 is nonrefundable. Once your PFS is submitted, it cannot be withdrawn from the SSS system.

If you need help completing the PFS, contact SSS customer service at (800) 344-8328.

### HERE'S KEY INFORMATION YOU NEED TO KNOW ABOUT OUR SCHOOL AS YOU COMPLETE THE PFS:

Our school's full name: **Academy High**

Our school's SSS code: **9141**

Contact information for our financial aid office: **Darren J. Pascavage**

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