



UNIVERSAL STARSHINE ACADEMY SCHOOLS

**Parent Questionnaire
High School Application**

School year applying for: Requested date of entry or ASAP

| | |
|-------------------------------|-------------------------------|
| Student's full, legal name | |
| Name student prefers to use | Student's Date of Birth |
| Student's Age | |
| Parent (Household 1) Name M F | Parent (Household 1) Name M F |
| Email: | Email: |
| Address | City |
| State, Country | Zip |
| Cell Phone Number | |
| Home Phone Number | |
| Employer | Employer |
| Occupation | Occupation |
| | |
| Parent (Household 2) Name M F | Parent (Household 2) Name M F |
| Email: | Email: |
| Address | City |

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Return Completed Application to the Director of Admissions, Universal StarShine Academy School, 3535 E McDowell Road, Phoenix, AZ USA 85008
email: admissions@starhine.us

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|-------------------|------------|
| State, Country | Zip |
| Cell Phone Number | |
| Home Phone Number | |
| Employer | Employer |
| Occupation | Occupation |

With whom does the student live?

We have read and we agree to StarShine’s 15 Guiding Principles. **Yes** **No**

Questions Providing frank and complete answers to the following questions will best serve the student. Use additional paper if needed.

1) Why would you like your child to attend the Universal StarShine Academy High School? What characteristics are you looking for in a high school?

2) Has the student taken any standardized tests (such as Terra Nova, STAR, or PSAT)? If yes, please attach a copy of the results.

3) Please describe the student’s academic strengths:

4) What are the student’s academic challenges?

5) Is the student currently receiving tutoring or other remedial services?

Yes No If yes, please provide name of tutor/provider and a brief description of the service provided.

6) Does the student have an identified learning disability? Yes No

If yes:

a. Attach documentation completed within the last three years which provides a diagnosis and recommendations for school interventions and accommodations (psychoeducational evaluation or specialized learning assessment).

b. Has an IEP or 504 plan ever been completed? Yes No

c. If yes, attach a copy of the most recent plan. d. List accommodations the student is currently receiving in school (formal or informal) if these are not described in documentation provided from a or b above.

7) Does the student have behavioral or emotional problems? Yes No If yes, please explain.

Is the student currently being treated?

9) Has the student undergone treatment for substance abuse? Yes No If yes, please explain.

10) At the StarShine Academy International School, we do not condone the use of drugs, alcohol or tobacco products by our students, and strictly forbid their use on campus or at school-related events. Will you support this policy?

Please add any information you think would help us in reaching a decision on admission. Of what might we need to be aware to support your student's success? (For example: does your student have special skills, interests, musical or artistic abilities, needs, temperamental characteristics, etc.?) Attach additional pages as necessary.

How did you hear about Universal StarShine Academy School?

Who referred you? Name

Have you attended: A School Tour? Yes No Harvest Fair? Yes No Open House? Yes No Another event on campus? Yes No If Yes, which?

Have you: Visited our website? Yes No

Viewed us on Facebook? Yes No

Who will sign the enrollment contract (tuition agreement) and be responsible for payment of tuition and fees?

Name Address (if not parent)

Name Address (if not parent)

Will you be applying for Tuition Assistance? No Yes :

Is there a custody arrangement or court order in force regarding this child? Yes No

All custodial parents or guardians must sign this application.

Submit Application and Application Fee: Email completed Application and all supporting documentation to "admissions@starshineacademy.org"

All custodial parents or guardians must sign this application.

Application Fee: Please pay your nonrefundable \$75 application fee using the "Pay Now" PayPal button located in the banner on the top side of our webpage under "Apply." I/We understand that • All financial arrangements for tuition payments will be made through the Business Office • The \$75 application fee is non-refundable • This application is valid only for the year noted.

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|--------------------------------|--------------------------------|
| Parent/Guardian Signature Date | Parent/Guardian Signature Date |
| Parent/Guardian Signature Date | Parent/Guardian Signature Date |
| Parent/Guardian Signature Date | Parent/Guardian Signature Date |

| | |
|--------------------------------|--------------------------------|
| | |
| Parent/Guardian Signature Date | Parent/Guardian Signature Date |

Thank you for completing the application.

Please return to:
Director of Admissions
Universal StarShine Academy School
3535 E McDowell Road
Phoenix, AZ 85008
Or email to:
admissions@starshine.us

StarShine Academy International School does not discriminate on the basis of race, sex, religion, or national origin in admission policy, or in the conduct of its educational, recreational, athletic, or aid programs.