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**Enrollment Application Checklist**

**Basic Parent Requirements** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**o** Enrollment Application

**o Official** transcripts -To Place your child correctly in the right class

**o** last report card or progress report

**o** Student Withdrawal Card

**o** Student’s physical (DH3040) and immunization (DH 680) form

**o** Student’s birth certificate

**o** Guardian’s Photo ID

**o** Insurance Card

**o** $350.00 Non-refundable Registration Fee (Ask for promotional special)

**Requirements for parents that qualify for an income based scholarship** \_\_\_\_\_\_\_\_\_\_\_\_\_

**o** Current utility bill in parents name (only If the parent ID is not updated)

**o** 2 paycheck stubs (2 if Bi-Weekly) / 4 paycheck stubs (if Weekly)

**o** Signed Compliance Form (Only for AAA Scholarships)

**o** SSI, food stamps or housing assistance eligibility letter (If applicable)

**o** Evidence of any non-taxable income i.e. Child Support (AAA Scholarships Only)

**o** Birth Certificates for all siblings under 18 (AAA Scholarships Only)

**Requirements for parents that qualify for a Gardiner scholarship** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Students with intellectual disabilities, autism or in need if hospital or homebound services)*

**o** Signed Doctor Diagnosis Letter

**o** Signed and Notarized Parent Compliance Form

**o** IEP Documentation with IQ Score or Psychological Evaluation

**McKay Scholarship for students with a current I.E.P (Individualized Education Plan)** \_\_\_\_

**o** Filed McKay Intent

**o** Signed and Notarized Parent Affidavit

**o** Signed McKay Scholarship Issue Form

**Orientation Requirement** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**o** The student has attended a school orientation or watched a virtual orientation

\*ALL DOCUMENTS WILL BE HELD IN RESERVE BY THE SCHOOL AS PART OF THE STUDENT’S PERMANENT FILE.

# MY LIFE MY POWER PREPARATORY ACADEMY

Today's Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **(CURRENT GRADE): 6 7 8 9 10 11 12**

**Student Information**

|  |  |  |
| --- | --- | --- |
| STUDENT’S NAME: |  | Social Security Number: |
| Date of Birth: | Age: | Gender: |
| Place of Birth: | Cell Phone: | MDCPS Student ID: |
| Referred by: |  | Ethnicity: |
| Name and Location of Previous School Attended: | | |

**Parent/Legal Guardian Information**

|  |  |  |  |
| --- | --- | --- | --- |
| Student resides with:  Mother  Father  Legal Guardian | | | |
| **MOTHER’S NAME:** | | | Home #: |
| Address: | | | Cell #: |
| City: | | State: | Zip Code: |
| Employer/ Occupation: | | | Work #: |
| Parent Email: | | | Social Security Number: |
| **FATHER’S NAME:** | | | Home #: |
| Address: | | | Cell #: |
| City: | State: | | Zip Code: |
| Employer/ Occupation: | | | Work #: |
| Parent Email: | | | Social Security Number: |
| **Other:** | | | Home #: |
| Address: | | | Cell #: |
| City: | State: | | Zip Code: |
| Employer/ Occupation: | | | Work #: |
| Contact Email: | | | Relation: |

**Health & Medical Information** \*\* Copy of Insurance Card and/or Medicaid Must be attached

|  |  |
| --- | --- |
| Allergies: |  |
| Physician Name: | Physician Number: |
| Has the student had any previous psychological testing? \_\_\_\_ Yes \_\_\_\_ No |  |
| Health Insurance Carrier: | Policy Number: |

**In case of an emergency**

**Circle “YES” next to the person’s name if they are permitted to pick up. Circle “NO” if that person is NOT permitted to pick up.**

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

Name YES/NO Name YES/NO

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

Name YES/NO Name YES/NO

**If a parent cannot be reached, please identify someone outside of your household we can contact to reach you.**

|  |  |
| --- | --- |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Name and Phone Number | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Name and Phone Number |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Name and Phone Number | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Name and Phone Number |

**Considerations / Comments:**

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

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

Continued…

**Admissions Acknowledgements**

I hereby consent to have MLMPI Preparatory Academy seek emergency medical treatment for my child when a medical issue arises.

**Parent/ Guardian Initials: \_\_\_\_\_\_\_\_\_\_**

**Field Trips Acknowledgements**

I understand that field trips taken during regular school hours are included in this agreement. Longer field trips ordinarily require a special permission slip. This authorization is meant for ordinary field trips with verbal parental permission. The student has authorization to participate in ordinary school field trips and to be transported by school staff and board members.

**Parent/ Guardian Initials: \_\_\_\_\_\_\_\_\_\_**

**Regular Attendance Acknowledgements**

I understand that all full-time students **MUST** attend school a minimum of **25** hours per week.

**Parent/ Guardian Initials: \_\_\_\_\_\_\_\_\_\_**

**Online Attendance Acknowledgements**

I understand that all Online students **MUST** complete a minimum of **15** hours of schoolwork per week.

**Parent/ Guardian Initials: \_\_\_\_\_\_\_\_\_\_**

**Credit Recovery Student Participation Acknowledgements**

I understand that all students that participate in the MLMPI credit recovery program **MUST** complete a minimum of **15** hours of schoolwork per week at their designated or chosen home school.

**Parent/ Guardian Initials: \_\_\_\_\_\_\_\_\_\_**

**Student Handbook Acknowledgment**

I confirm that I have received and fully accept all terms and conditions found in the Student & Parent Handbook.

**Parent/ Guardian Initials: \_\_\_\_\_\_\_\_\_\_**

**Policies and Procedures Acknowledgements**

The parent/guardian fully understands that all school policies and procedures must always be enforced. Failure to follow any portion of the policies and procedures will result in my immediate withdrawal from the program.

**Parent/ Guardian Initials: \_\_\_\_\_\_\_\_\_\_**

Continued…

**Afterschool Activities Acknowledgements**

The parent/guardian fully understands that all liabilities are released from MLMPI Preparatory Academy once students enter after school activities.

**Parent/ Guardian Initials: \_\_\_\_\_\_\_\_\_\_**

**Tuition Agreement Acknowledgements**

The parent/guardian fully understands that it is their responsibility to pay the full balance of the specified tuition unless otherwise indicated by the administration. All parents that withdraw prematurely are responsible for paying their remaining balance before the end of the academic school year. Failure to pay any portion of the specified balance will result in the retention of records and in the school taking possible further legal action. All scholarship funds received will be utilized for the sole purpose of paying school tuition.

**Parent/ Guardian Initials: \_\_\_\_\_\_\_\_\_\_**

**State Scholarships Acknowledgements**

The parent/guardian fully understands that all scholarship funds received will be utilized for the sole purpose of paying the school’s annual tuition.

**Parent/ Guardian Initials: \_\_\_\_\_\_\_\_\_\_**

**Search Consent Acknowledgements**

For the protection of the students, teachers, and employees of MLMPI Preparatory Academy, students may be required to submit their person, personal effects, vehicles, belongings, and any other items to a search by school officials or other authorized representatives. Your signature below constitutes your consent to the inspection of the student's person, personal effects, vehicle, and/or other belongings or items.

**Parent/ Guardian Initials: \_\_\_\_\_\_\_\_\_\_**

**Photo Release Acknowledgements**

The parent and/or guardian hereby grants MLMPI Preparatory Academy permission to use photographs, and videos taken of my child at the school facility and/or during educational field trips in publications, news releases, online platforms, and in other communications related to My Life My Power Institute.

**Parent/ Guardian Initials: \_\_\_\_\_\_\_\_\_\_**

**Vocational Development Authorization Acknowledgements**

The parent and/or guardian hereby grants MLMPI Preparatory Academy permission to teach my child vocational development skills related to career development, social media marketing, moral development, entrepreneurship, emotional intelligence training, and leadership skills.

**Parent/ Guardian Initials: \_\_\_\_\_\_\_\_\_\_**

Continued…

**Scholarship Assistance Acknowledgement**

The parent and/or guardian hereby grants MLMPI Preparatory Academy permission to share my contact and personal information with Scholaraids in efforts to assist the parent in applying for scholarships and seeking additional monies used for educational purposes

**Parent/ Guardian Initials: \_\_\_\_\_\_\_\_\_\_**

**Acknowledgment of Parental Choice**

The parent and/or guardian hereby acknowledges that they have chosen to apply at MIMPI Preparatory Academy of their own free will and have not been coerced, bribed, enticed, persuaded, influenced, or lured from any other private institutions that might claim tortious interference.

**Parent/ Guardian Initials: \_\_\_\_\_\_\_\_\_\_**

**Placement Commitment Acknowledgement**

The parent/guardian fully understands and acknowledges it is first come first serve for scholarships and the spot of the student attending the MLMPI Prep Academy School will ONLY be held if the registration fee is paid in full. If you choose not to attend MLMPI Prep Academy after your spot has been reserved, you will be liable for all tuition fees not paid by the scholarship.

**Parent/ Guardian Initials:  \_\_\_\_\_\_\_\_\_\_**

**Notice of Automatic Renewal**

The parent and/or guardian hereby acknowledges that they have chosen to have their child’s admissions at My Life My Power automatically re-renew each year until their child graduates or the parents inform the school of their intent to withdraw with sufficient notice.

**Parent/ Guardian Initials:  \_\_\_\_\_\_\_\_\_\_**