

# Midland Adventist Academy

6915 Maurer Road  
 Shawnee, KS 66217  
 Office: (913) 268-7400  
 Fax: (913) 268-4968



## STUDENT APPLICATION

### Grades K-12

Last Name	First	Middle	Name used	Biological Birth Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	Grade entering
Address – Street & PO Box			City	State	Zip
Birthdate (MM/DD/YY)	Birthplace	Citizenship	Social Security #	Home phone ( )	
Prominent Ethnic Background (for statistical purposes only)	<input type="checkbox"/> American Indian <input type="checkbox"/> Asian/Pacific Islander	<input type="checkbox"/> Black <input type="checkbox"/> Caucasian	<input type="checkbox"/> Hispanic <input type="checkbox"/> Other	Student Cell ( )	
Has the student ever been recommended for special education or retention? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, please explain:					
Has the student ever been suspended or expelled from school? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, please explain:					
Does the student have behavioral challenges? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, please explain:					
School attended last year		School address (if not Midland)		School phone (if not Midland) ( )	
Student lives with: <input type="checkbox"/> Both parents <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Stepfather <input type="checkbox"/> Stepmother <input type="checkbox"/> Grandparent <input type="checkbox"/> Aunt <input type="checkbox"/> Uncle <input type="checkbox"/> Other					

## PARENT / GUARDIAN INFORMATION

Father's last name	First	Address	City	State	Zip
Married? <input type="checkbox"/> Yes <input type="checkbox"/> Divorced <input type="checkbox"/> No <input type="checkbox"/> Separated	Occupation		Employer		Work phone ( )
Father's email	Include in Newsletter email list? <input type="checkbox"/> Yes <input type="checkbox"/> No		Father's <input type="checkbox"/> Beeper/pager <input type="checkbox"/> Cell ( )	Home phone ( )	
Mother's last name	First	Address	City	State	Zip
Married? <input type="checkbox"/> Yes <input type="checkbox"/> Divorced <input type="checkbox"/> No <input type="checkbox"/> Separated	Occupation		Employer		Work phone ( )
Mother's email	Include in Newsletter email list? <input type="checkbox"/> Yes <input type="checkbox"/> No		Mother's <input type="checkbox"/> Beeper/pager <input type="checkbox"/> Cell ( )	Home phone ( )	
Other parent's last name	First	Address	City	State	Zip
Married? <input type="checkbox"/> Yes <input type="checkbox"/> Divorced <input type="checkbox"/> No <input type="checkbox"/> Separated	Occupation		Employer		Work phone ( )
Other parent's email	Include in Newsletter email list? <input type="checkbox"/> Yes <input type="checkbox"/> No		Other parent's <input type="checkbox"/> Beeper/pager <input type="checkbox"/> Cell ( )	Home phone ( )	

## CHURCH AFFILIATION

Church denomination (student)	Church where membership is held	Baptized? <input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, date of baptism
Church denomination (Father)	Church where membership is held	Baptized? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Church denomination (Mother)	Church where membership is held	Baptized? <input type="checkbox"/> Yes <input type="checkbox"/> No	

I/we, the undersigned, pledge to uphold the policies and principles of Midland Adventist Academy as outlined in the student handbook. I/we agree to accept full financial responsibility according to the published policies and financial contract. I/we have read the above statements and acknowledge that, to the best of our knowledge, all information is completed truthfully.

\_\_\_\_\_  
 Student signature

\_\_\_\_\_  
 Mother/guardian signature

\_\_\_\_\_  
 Father/guardian signature