Diamond Star Academy
1307 W Ridgeway Ave, Waterloo, IA 50701
Phone: (319) 529-7375

Email: info@dsaacademy.org
Website: www.dsaacademy.org

APPLICATION FOR ENROLLMENT

DEAR PARENTS AND APPLICANT:
Thank you for your interest in the Diamond Star Academy. **Please fill out this enrollment application form completely.** *Falsifications, misrepresentations, or omissions may disqualify your application. Information you supply will not be given to any other person/company for any purpose. Applications received unsigned, incomplete, or after the closing date may not be considered for acceptance.*

Application Date: ____/____/____

Student Biographical Information

Last Name/First Name/Middle: | | | |

Gender: Male Female

Date of Birth MM/DD/YY ____/____/____

Applying for Grade: **K 1 2 3 4 5 6 7 8**

Birth Location
City :_____
State :_____

Ethnicity
___American Indian
___Asian/Pacific Islander
___Black/African American
___Hispanic
___Multiracial
___White / Caucasian
___Other

Social Security Number: _____

Student's Residence Address: (Note: No P.O. Boxes)

Address: _____ Apt. #: _____

City:_____ County:_____ State:_____ Zip Code: _____

Home Phone: (_____) _____ Cell Phone: (_____)

_____

Student's Mailing Address: ____ Check here if same as residence address.

Address: _____ Apt. #: _____

City:_____ County:_____ State:_____ Zip Code: _____

Previous School Information

Type of School: Public School ____ Private School ____ Registered Home School ____ Not in school/other ____

Address

Current School

School District

Student Lives With:

Both parents____ Both parents alternately (Joint Custody) ____ Mother only ____
Father only ____ Legal guardian ____

Parent / Custodial Parent/ Guardian (First Contact)

Title | First Name | Last Name | Relationship to Student

Mr. Mrs.

Address

Profession

E-mail

Home Phone: Work Phone: Cell:

Parent / Custodial Parent/ Guardian (Second Contact)

Title | First Name | Last Name | Relationship to Student

Mr. Mrs. Ms.

Address

Profession

E-mail

Home Phone: Work Phone: Cell:

Other Children Living in the Household Age Relationship to Student

Other Children Living in the Household Age Relationship to Student

_____

_____

_____

_____

Please list applicant's honors, awards, or special achievements (*in or out of school*): _____

_____

_____

_____

Has applicant ever skipped or repeated a grade? No Yes *Which grade and why*?

_____

Does the applicant have an Individual Education Plan (IEP)/504 Plan/MFE ? No Yes

(If Yes, Please Explain) _____

_____

Please indicate any special health or other needs of which we should be aware:

_____

_____

Is applicant currently under expulsion from any school or school district? No Yes If yes, explain:

_____

What Language is spoken at home? _____

Has the student participated in any of these programs? ☐ ESL ☐ Bilingual ☐ Gifted & Talented ☐ Title I Program

How did you first learn about DSA?

☐ Friend/Relative ☐ Val-Pak Ad ☐ Bus Ad ☐ Another School ☐ Website/Search Engine *(URL?):* _____

☐ Mail Brochure ☐ Door Hanger ☐ Billboard ☐ Walk-in ☐ On site signage ☐ Community Event

☐ Newspaper *(name?):* _____ ☐ Radio *(station?):* _____ ☐ Other *(please specify):* _____

What is the primary reason you are choosing to apply to DSA?

☐ Academics ☐ Location ☐ Extracurricular Activities ☐ Parental Involvement ☐ Safe/Secure Environment ☐ Other

We/I, the undersigned, hereby certify that, to the best of our/my knowledge and belief, the answers to the foregoing questions and statements made by us/me in this application are complete and accurate. We/I understand that any false information, omissions, or misrepresentations of facts may result in rejection of this application or possible civil or criminal penalties.

_____ _____

Signature of Parent or Guardian Date

Please return the completed form to: Diamond Star Academy

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Fax :
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DIAMOND STAR ACADEMY admits students without regard to race, color, religion, sex, national and ethnic origin, or the presence of a medical condition or disability.