

Teaching Achieving Student Academy

"Success is in a Matter of Time"

7829 Old Concord ~ Charlotte, NC 28213

(704) 453-9534

Website: www.tasacademy.org ~ email: flcowan@tasacademy.org

STUDENT APPLICATION

Contact Information (please print clearly)

Student's Name:

Last Name	First Name	M.I.
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Parent/Guardian 1:

Last Name	First Name	M.I.
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Home Address:

Street Name	Apartment	Cross Street
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City/Zip:

City	State
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Phone #s:

Contact # 1	Contact #2
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Parent/Guardian 2:

Last Name	First Name	M.I.
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Home Address:

Street Name	Apartment	Cross Street
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City/Zip:

City	State
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Phone #s:

Contact # 1	Contact #2
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Emergency:

Last Name	First Name	M.I.
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Phone #s:

Contact # 1	Contact #2
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Student Information (please print clearly)

Current School Year Grade: K 1 2 3 4 5 6 7 8 9 10 11 12

Gender: Male Female Date of Birth:

Month	Day	Year

School Attending:

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Racial/Ethnic Identification (optional): White Black Hispanic/Latino Decline to State

Special Needs

If you answer YES to any question, please attach an IEP and/or written description of the special needs.

Is the student currently receiving special education services? YES NO

Does the student have health conditions that may affect educational needs? YES NO

Is the student mobility impaired? YES NO Is the student vision impaired? YES NO

Is the student in a wheelchair? YES NO

Date of last vision exam M____ D ____ Y____ Date of last hearing exam M____ D ____ Y____

Educational Assessment

Student Assessment

Did your child participate in any tutoring programs last year? YES NO

What subject(s) does your child require academic tutoring? Math Reading Language Arts
 English History Science Comprehension Test Taking Skills Other: _____

Do you object to diagnostic testing in order to identify specific academic skills challenges? YES NO

Has your child be identified as having ADD or ADHD? YES NO

Is your child currently on any medication? If so, please list: _____

Has your child has a psycho-educational evaluation in the last 3 years? YES NO

Family Information

Who does the child live with? Parents Father Mother Grandparent(s) Other _____

Home Language Survey:

What language did your child first learn when s/he began to talk? _____

What language does your child use most frequently at home? _____

What language do you use most frequently to speak to your child? _____

What language do the adults use most frequently at home? _____

Other Siblings:

	Gender	Age	Living at same address	School Attending
1	<input type="checkbox"/> M <input type="checkbox"/> F	_____	YES <input type="checkbox"/> NO <input type="checkbox"/>	_____
2	<input type="checkbox"/> M <input type="checkbox"/> F	_____	YES <input type="checkbox"/> NO <input type="checkbox"/>	_____
3	<input type="checkbox"/> M <input type="checkbox"/> F	_____	YES <input type="checkbox"/> NO <input type="checkbox"/>	_____
4	<input type="checkbox"/> M <input type="checkbox"/> F	_____	YES <input type="checkbox"/> NO <input type="checkbox"/>	_____
5	<input type="checkbox"/> M <input type="checkbox"/> F	_____	YES <input type="checkbox"/> NO <input type="checkbox"/>	_____
6	<input type="checkbox"/> M <input type="checkbox"/> F	_____	YES <input type="checkbox"/> NO <input type="checkbox"/>	_____

Parent/Guardian Educational Level: Check appropriate box for both parents.

	Grade School	High School	Some	College	College	Graduate	Graduate	Graduate
	6 7 8 9 10 11	YES <input type="checkbox"/> NO <input type="checkbox"/>	13	14 15 16	YES <input type="checkbox"/> NO <input type="checkbox"/>	17 18 19 20		
Mother	6 7 8 9 10 11	YES <input type="checkbox"/> NO <input type="checkbox"/>	13	14 15 16	YES <input type="checkbox"/> NO <input type="checkbox"/>	17 18 19 20		
Father	6 7 8 9 10 11	YES <input type="checkbox"/> NO <input type="checkbox"/>	13	14 15 16	YES <input type="checkbox"/> NO <input type="checkbox"/>	17 18 19 20		

I (print name) _____ affirm that the information I have provided in the application is true to the best of my knowledge. I understand that a personal interview will be offered and may be conducted with me prior to any placement of my child in this program. I give permission for my child to receive academic tutoring through Teaching Achieving Students Academy.

 (Signature of Parent/Guardian)

 Date

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PARENT RELEASE FORM

Dear Parent or Guardian,

We are asking you to give Teaching Achieving Students Academy permission to obtain information from your child's school and teacher, to allow your child to participate in field trips, to allow your child to participate in Club Time, to allow Teaching Achieving Students Academy to use your child's picture in appropriate publications such as the local paper or television station, and to sometimes transport your child. Please sign each release to which you give permission.

SCHOOL INFORMATION

I understand that in order to better address my child's academic needs, Teaching Achieving Students Academy may need to acquire information from his/her school or teacher. I give permission for Teaching Achieving Students Academy to acquire academic information from my child's school and teacher as needed.

(Signature of parent or Guardian)

Date

FIELD TRIPS

I understand that Teaching Achieving Students Academy sometimes participates in community service activities as well as taking field trips to such places as the library, museums, nursing homes and the like. Supervision by adults will always be provided. Announcements of specific trips or activities will be sent home in advance. I give permission for my child to participate in all scheduled field trips and service activities.

(Signature of parent or Guardian)

Date

CLUB TIME

I understand that Teaching Achieving Students Academy conducts a Club Time, after the academic tutoring time, which includes Bible lessons and instruction in Christian values. I give permission for my child to participate in the Club Time activities.

(Signature of parent or Guardian)

Date

PHOTO PUBLISHING

I give permission for Teaching Achieving Students Academy to photograph or videotape my child in the Teaching Achieving Students Academy program and to submit such a photo or video picture to its regular newsletter, the local news media or the like.

(Signature of parent or Guardian)

Date

TRANSPORTATION

I give permission for Teaching Achieving Students Academy to transport my child in the Teaching Achieving Students Academy program when it becomes absolutely necessary to do so. Otherwise, I understand I am responsible for getting my child to and from the program.

(Signature of parent or Guardian)

Date

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INTERNET USAGE AGREEMENT

Access to the Internet is a wonderful opportunity to interact with the world at large. The opportunity brings with it a number of responsibilities. In order to receive service from Teaching Achieving Students Academy the use of the internet services is needed to communicate and perform academic assignments. You must read the following information and sign the computer/internet agreement that follows.

1. The use of any computer which provides access to the Internet is a privilege which may be revoked by instructors, staff, or administrators at any time for abusive or inappropriate conduct. Such conduct would include, but is not limited to, the placing of unlawful information on or through the computer, system, accessing another person's files or e-mail, and the use of obscene, abusive, or otherwise objectionable language or images in either public or private files or messages.
2. The Teaching Achieving Students Academy reserves the right to inspect any material stored in files to which users have access and will edit or remove any material which the staff, in its sole discretion, believes may be objectionable. Users of the Internet will not use their account to obtain, view, download, or otherwise gain access to potentially objectionable materials. This includes text materials, video images, or sound files that may be considered objectionable.
3. The Teaching Achieving Students Academy's Internet access is provided primarily for educational purposes under the direction of the staff. Non-educational use may be limited at any time by staff.
4. Information services and features contained on the Teaching Achieving Students Academy network are intended for the private use of its patrons. Any commercial or other unauthorized use of those materials, in any form, is expressly forbidden.
5. Teaching Achieving Students Academy does not warrant that the functions of the system will meet any specific requirements you may have, or that it will be error-free or interrupted; nor shall it be liable for any direct or indirect, incidental, or consequential damages (including lost data, information, or profits) sustained or incurred in connection with the use, operation, or inability to use the system.
6. Rules and regulations of system usage will be added and posted from time to time by the faculty/administrators of Teaching Achieving Students Academy and/or the network. Users of computers/Internet are subject to these rules and regulations.
7. The Teaching Achieving Students Academy computers/network is intended for the exclusive use of its registered users. As a user, you are responsible for the use of your password and account. Any problems which arise from the use of a user's account are the responsibility of the account holder. Any misuse will result in suspension of the account privileges.
8. Deletion, examination, copying, or modification of files and/or data belonging to other users without their prior consent is prohibited.
9. Commercial software is placed on the computer for the use and convenience of students and staff. Any unlawful use such as the copying of copyrighted material without the express written permission of the owner or the proper license is prohibited.
10. Any unauthorized, deliberate action which damages or disrupts a computing system (including the willful introduction of computer "viruses" or other disruptive/destructive programs), alters its normal performance, or causes it to malfunction is prohibited. Intentional attempts to "crash" network systems or programs are punishable disciplinary offenses.

COMPUTER/INTERNET USAGE AGREEMENT

I have read the Teaching Achieving Students Academy. Computer/Internet Usage Agreement, understands it, and agree to adhere to the principles and procedures listed within. I also understand that additional rules and regulations may be added from time to time and that they become a part of this agreement. Should I break this agreement, I understand that I may lose all computer/Internet privileges. I also understand that inappropriate or illegal use of computer facilities could result in civil or criminal lawsuits. Parents and/or guardians may be held accountable for inappropriate use by their child.

Student Signature

Date

Parent Signature

Date

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STUDENT INFORMATION RELEASE FORM

The Family Educational Rights & Privacy Act (FERPA) requires a student's written consent in order for an educational institution to release confidential student records to another party, except under the limited exceptions in FERPA permitting release without consent.

I, _____, hereby authorize _____
to release my child, _____ educational records and information to Teaching
Achieving Students Academy, for the purpose of academic use, the following specified educational records and
information in accordance with this FERPA Release:

Educational Records and Information:

Course enrollment information
Grades
Class standing
IEPs
Other support documents

I understand that this consent shall remain in effect until revoked by me in writing.

Parent Signature

Date

Parent Name (please print)

Case Manager

Date

Case Manager (please print)