



# Cornerstone Academy

## APPLICATION FOR ADMISSION

- A \$50 registration fee will be required at the time of acceptance.
- All students must submit the following:
  1. Most recent report card or transcript
  2. Up-to-date physical and immunization record
- Call the school office to arrange a personal interview at 312-573-8854.

### PERSONAL INFORMATION

Date \_\_\_\_\_

Student's Last Name \_\_\_\_\_ First \_\_\_\_\_ Initial \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Phone Numbers \_\_\_\_\_ (home) \_\_\_\_\_ (cell)

Parent/Guardian Phone Numbers #1 \_\_\_\_\_ (cell) \_\_\_\_\_ (work)

Parent/Guardian Phone Numbers #2 \_\_\_\_\_ (cell) \_\_\_\_\_ (work)

E-mail Address for the parent/guardian \_\_\_\_\_

Age \_\_\_\_\_ Birthday \_\_\_\_\_

Social Security # \_\_\_\_\_ Sex M \_\_\_ F \_\_\_

Church Attending (if applicable) \_\_\_\_\_ Pastor \_\_\_\_\_

List the high schools that you have previously attended beginning with the most recent:

1<sup>st</sup> Most Recent \_\_\_\_\_ 2<sup>nd</sup> \_\_\_\_\_

My Total High School Credits: \_\_\_\_\_

**EMERGENCY CONTACT**

Emergency Contact (other than parent/guardian) \_\_\_\_\_

Relationship to Student \_\_\_\_\_ Home phone \_\_\_\_\_

Work phone \_\_\_\_\_ Cell phone \_\_\_\_\_

Family Doctor \_\_\_\_\_

Any Special Health Considerations \_\_\_\_\_

Family Health/Insurance Carrier \_\_\_\_\_

Policy Number \_\_\_\_\_

Can Cornerstone Academy call an ambulance in case of emergency? Y N

Can the Academy take a student to an emergency room in case of emergency? Y N

Can the Academy call a doctor in case of emergency? Y N

Can the Academy staff treat the student in case of emergency? Y N

**FAMILY INFORMATION**

Mother/Guardian's Last Name \_\_\_\_\_ First \_\_\_\_\_

Occupation \_\_\_\_\_

Employer \_\_\_\_\_

Home Address \_\_\_\_\_ Zip \_\_\_\_\_

Home Telephone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Wk Phone \_\_\_\_\_

Father/Guardian's Last Name \_\_\_\_\_ First \_\_\_\_\_

Occupation \_\_\_\_\_

Employer \_\_\_\_\_

Home Address \_\_\_\_\_ Zip \_\_\_\_\_

Home Telephone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Wk Phone \_\_\_\_\_

**Student Lives With**

- |  |  |
|--|--|
| <input type="checkbox"/> Both Parents      | <input type="checkbox"/> Father            |
| <input type="checkbox"/> Mother            | <input type="checkbox"/> Stepmother/father |
| <input type="checkbox"/> Stepfather/mother | <input type="checkbox"/> Guardian          |

Please List Siblings and Their Ages \_\_\_\_\_

\_\_\_\_\_

**GENERAL INFORMATION**

1. What work or volunteer work experience do you have?
2. How did you hear about Cornerstone Academy?
3. Why are you interested in switching schools?
4. Why are you interested in Cornerstone Academy?
5. What do you like to do with your free time?
6. Have you ever been suspended or expelled from school in the past three years? If yes, explain.
7. Please state what your goals are while in high school and what your plans are for after graduation.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

---

---

---

---

---

---

---

**Cornerstone Academy is an independent Christian high school that strives to educate the student's mind and character. We require:**

- 1. That students come ready to work**
- 2. That students strive to attend school and work every day**
- 3. That students do homework every night**
- 4. That students are employable**
- 5. That students are willing to abide by a business casual dress code**
- 6. That students are ready to work well with their peers and respect and cooperate with all adults at school and work**

**I have completed the application and I am willing to abide by the above stated principles.**

**STUDENT SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_**

**The undersigned assumes responsibility for all tuition, fees, books and other expenses of the student.**

**The undersigned gives permission for the student named above to participate in all Cornerstone Academy functions, both inside and outside of the building at 1111 N. Wells, Chicago, Illinois, for the duration of their enrollment. This includes classes, which meet elsewhere, as well as school trips. The student has permission to travel to and from such places by foot, public transportation, or bicycle, sometimes unaccompanied by a staff member. They may also ride a vehicle if and when a Cornerstone Academy staff member or volunteer drives it. This permission does not apply to overnight trips, nor does it apply to vehicles driven by students.**

**It is the policy of Cornerstone Academy not to discriminate on the basis of race, sex or religious background in its educational programs, and admissions policies.**

**PARENT/GUARDIAN SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_**

**Cornerstone Academy  
1111 N. Wells Street  
Fourth Floor  
Chicago, Illinois 60610  
312-573-8854 and 312-573-8850 (fax)**