



California's Charter School Program of Choice

2018-2019 Application Package Instructions & Checklist

Please review the information below. Based on your student(s) grade and applicable circumstances, you are required to submit documentation in order to complete this step in the enrollment process. You can scan and email or mail the required paperwork. **Please note that your application is not considered complete until all required documentation has been received.**

****Important Note:** Please send copies; do not mail in original documents.

Scan and Email (preferred):	Mail
enrollment@summitacademycs.org	Summit Academy 337 Baywood Dr. Newport Beach, CA 92660

Required For	Item	Description
ALL Students	<input type="checkbox"/> Application	Please closely read and fully complete the entire attached application packet.
ALL Students	<input type="checkbox"/> Proof of Age	Official Birth Certificate (not hospital issued) A passport may also be used.
ALL Students	<input type="checkbox"/> Proof of Residency	Utility bill showing current address and name of at least one listed parent OR Mortgage statement/Rental Contract including signature page OR a Property Tax Statement. Please note that Summit Academy requires a physical address; documents containing P.O. Box will not be accepted.
ALL Students	<input type="checkbox"/> Immunization Record	Current Immunization Record or Personal Beliefs Exemption Waiver required for all students. *For students entering 7th-12th grade, please provide proof of current DTAP vaccine.
Students entering public school for the first time	<input type="checkbox"/> Health Examination Form	Please have this form filled out by a health examiner and submitted. Available for download on our website.
Students with an IEP or other Special Education Needs	<input type="checkbox"/> IEP	A copy of your student's current IEP (Individualized Education Plan). Because the IEP expires yearly, please submit the current IEP.
Students with an IEP or other Special Education Needs	<input type="checkbox"/> Evaluation Report	The Evaluation Report is valid for 3 years. If you do not have a copy of the student's ER, you can request a copy from your student's current school.
Students that have a 504 plan	<input type="checkbox"/> 504 Accommodation Plan	A copy of your student's current 504 Accommodation Plan. Because the 504 expires yearly, please submit the current 504.

Student Name:	Student Home Phone:
---------------	---------------------



Ph: (949) 791-9916
 enrollment@summitacademycs.org

Student Demographics

Please fill out the following information for your student:

Last Name	First Name	Middle Name

Street Address	City	State	Zip	County

Home Phone	Student Email	Date of Birth	Grade

ES Request (optional)	Start Date Request (optional)

Ethnicity

Is your student Hispanic or Latino? ___ Yes ___ No

Race:

Please select at least one of the following:

<input type="checkbox"/> American Indian or Alaskan Native	<input type="checkbox"/> Black or African American	<input type="checkbox"/> White <input type="checkbox"/> Middle Eastern
Asian <input type="checkbox"/> Asian Indian <input type="checkbox"/> Cambodian <input type="checkbox"/> Chinese <input type="checkbox"/> Filipino <input type="checkbox"/> Japanese <input type="checkbox"/> Korean <input type="checkbox"/> Laotian <input type="checkbox"/> Vietnamese <input type="checkbox"/> Other Asian	Pacific Islander <input type="checkbox"/> Guamanian <input type="checkbox"/> Hawaiian <input type="checkbox"/> Samoan <input type="checkbox"/> Tahitian <input type="checkbox"/> Other Pacific Islander	

Student Name:	Student Home Phone:
---------------	---------------------



Ph: (949) 791-9916
enrollment@summitacademycs.org

Release of Student Records Request

Please accept this document as formal approval for the release of all official school records (including the record of transcripts, testing information, special education, health and immunization records).

Student Information

Last Name	First Name	Middle Name

Date of Birth	Grade Last Enrolled in Prior School	Withdrawal Date from Prior School

If student was always homeschooled OR never previously enrolled in school, please check one of the below:

<input type="checkbox"/> ALWAYS previously homeschooled	<input type="checkbox"/> Enrolling in Kindergarten
---	--

Prior School Information

Name of Prior school	School Phone Number

School Address	City	State	Zip	County

Sign and date below

Name of Parent or Guardian	
Signature of Parent or Guardian	
Date	

Student Name:	Student Home Phone:
---------------	---------------------



Ph: (949) 791-9916
enrollment@summitacademycs.org

Parent/Guardian Information

Parent/Guardian 1:

___ Lives with student

First Name	Last Name	Relationship to Student

Home Phone	Cell Phone	Email

Address (If different than student's)	Highest Level of Education

Parent/Guardian 2:

___ Lives with student

First Name	Last Name	Relationship to Student

Home Phone	Cell Phone	Email

Address (If different than student's)	Highest Level of Education

Student Name:	Student Home Phone:
---------------	---------------------



Ph: (949) 791-9916
 enrollment@summitacademycs.org

Family Income Form for the 2018-2019 School Year

In order to determine if Summit Academy will receive federal Title I funds for reading and/or mathematics or other services, certain information is needed. Please list only those students enrolled or enrolling with Summit Academy.

Please print the following information for all students enrolling or already enrolled with Summit

Name	Date of Birth	Sex	Grade	District of Residence	Indicate if child is a foster child, ward of court, or food stamp recipient

Calculating Household Income

In order to determine if Summit Academy will receive Title I funds, you will have to calculate the total amount of income in your household. Include all income for all household members (include yourself, all children in the home, your spouse, grandparents, and all others related and unrelated in your household). See Lists below of the type of income to report.

Earnings from Work <input type="checkbox"/> Wages/salaries/tips <input type="checkbox"/> Strike benefits <input type="checkbox"/> Unemployment Compensation <input type="checkbox"/> Worker's Compensation <input type="checkbox"/> Net income from self-owned business or farm	Public Assistance / Child Support / Alimony <input type="checkbox"/> Public assistance / welfare payments <input type="checkbox"/> Alimony / child support payments
Pensions / Retirement / Social Security <input type="checkbox"/> Pensions <input type="checkbox"/> Supplemental Security Income <input type="checkbox"/> Retirement income <input type="checkbox"/> Social Security	Other Income <input type="checkbox"/> Disability benefits <input type="checkbox"/> Interest dividends <input type="checkbox"/> Cash withdrawn from savings <input type="checkbox"/> Estate / trusts / investments <input type="checkbox"/> Regular contributions from person(s) not living in household <input type="checkbox"/> Net royalties / annuities / net rental income

Household Income

Total Number of **all** household members, whether or not they receive income: _____
 Total monthly income of **all** household members' income before taxes or anything else is taken out: _____

Certification and Signature

I certify that all of the above information is true and correct, and all income is reported. I understand this information is being given for the receipt of federal funds, and that school officials may verify the information on the form.

Parent Signature _____ **Date:** _____

Student Name:	Student Home Phone:
---------------	---------------------



Ph: (949) 791-9916
enrollment@summitacademycs.org

The Family Educational Rights and Privacy Act (FERPA) gives parents and students over 18 years of age (“eligible students”) certain rights regarding the student’s education records. One of those rights is the right to consent to disclosures of personally identifiable information contained in the student’s education records.

Summit Academy, Cal Prep, and California STEAM have found that to best serve the student’s education needs, it is necessary to disclose a student’s name and address to the following classes of vendors that provide important services related to your student’s education. In all cases, these vendors will have agreed to ensure the confidentiality of the student’s name and address and not to use the information for purposes other than that contracted for the student’s education needs.

- Suppliers of computers and educational materials for purposes of shipping to and from the student’s home
- Internet service provider
- Speakers or presenters presenting or participating in synchronous web-conferencing sessions
- Computer professionals that host and maintain the student’s account management system.
- Other contractors and subcontractors that Summit Academy identifies as necessary to providing education services

To best serve the student, Summit Academy requests the following parental consent to disclose the student’s name and address to the specified class of contractors.

I hereby agree that my student’s name, address, and other information as necessary, be provided to ensure that Summit Academy can best meet my student’s education needs.

Name of Parent/Guardian	
Signature of Parent/Guardian	
Date	

Student Name:	Student Home Phone:
---------------	---------------------



Ph: (949) 791-9916
enrollment@summitacademycs.org

Release Information

Student Directory

Do we have your permission to publish the parent's name, address, email, and phone number in the student directory?	<input type="checkbox"/> Yes <input type="checkbox"/> No
---	---

Photo/Video Release

Throughout the year, there are occasions when Summit academy and/or Cal Prep & California STEAM may want to take pictures/videos of your student participating in activities related to the school. We may use, duplicate, broadcast, distribute, and display these pictures/videos in Summit Academy, Cal Prep, or California STEAM facilities, or on the websites maintained for them. We request that you sign this photo/video release for your student to allow us to record on film, tape, or otherwise, to edit such items as desirable or necessary, and to use the student's name, likeness, image, voice, and performance as outlined above. Thank you in advance for your support and understanding.

Student's Name (First, Middle, Last)	
--------------------------------------	--

	I give my consent for Summit Academy/Cal Prep & California STEAM Inc. to use pictures/videos of my student.
	I do NOT give my consent for Summit Academy/Cal Prep & California STEAM Inc. to use pictures/videos of my student.

Name of Parent/Guardian	
Signature of Parent/Guardian	
Date	

Student Name:	Student Home Phone:
---------------	---------------------

Home Language Survey

Student's Legal Name:

Last	First	Middle

Please answer the following:

1	Which language did your son or daughter learn when he/she first began to talk?
2	What Language does your son or daughter use most frequently at home?
3	What Language do you use most frequently to talk to your son or daughter?
4	Name the languages in the order most often spoken BY THE ADULTS at home: A. _____ B. _____ C. _____
5	If a language other than English is indicated on any line above, can your student communicate in that language? Understands: ___ Yes ___ No Speaks: ___ Yes ___ No Reads: ___ Yes ___ No Writes: ___ Yes ___ No
6	Was your student born in another country? ___ Yes ___ No If yes, which country? _____ Date entered the U.S.? _____
7	Has your student had instruction in a language used at home other than English? ___ Yes ___ No If yes, how many years of instruction? _____
8	Did your student attend school in another country? ___ Yes ___ No If yes, how long? _____
9	Has your student attended school in the U.S.? ___ Yes ___ No If yes, what was the beginning date? _____
10	Do you feel your student can communicate well in English? ___ Yes ___ No

Sign and date below:

Name of Parent/Guardian	
Signature of Parent/Guardian	

Student Name:	Student Home Phone:
---------------	---------------------



Ph: (949) 791-9916
enrollment@summitacademycs.org

Date:	
--------------	--

Student Name:	Student Home Phone:
---------------	---------------------