

To ensure the application is legible, please download and complete it using Adobe Acrobat Reader. Complete and legible applications will be processed more quickly. Save, print, scan, and send.



**Cambrian**  
**Academy**  
COLLEGE PREPARATORY



## APPLICATION 2023-2024

### Student Information

**Student Name:** \_\_\_\_\_  
Last First Middle

Desired Start Date:

**Grade (2023-2024):** \_\_\_\_\_

August 21, 2023 (Fall Semester)

**Nickname or Preferred Name:** \_\_\_\_\_

January 16, 2024 (Spring Semester)

2024-2025 commitment required if starting mid-year

**Student Home Address:**

Street City State Zip

**Student Home Phone:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_

mo / day / year

**Male**  
**Female**

Persons authorized to pick up your child at school:

\_\_\_\_\_

### Family Information (please print clearly)

Parent's Name: \_\_\_\_\_

Parent's Name: \_\_\_\_\_

Relationship to Child: \_\_\_\_\_

Relationship to Child: \_\_\_\_\_

Home Address: \_\_\_\_\_

Home Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Pager and/or Cellular Phone: \_\_\_\_\_

Pager and/or Cellular Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

Occupation: \_\_\_\_\_

Occupation: \_\_\_\_\_

Job Title: \_\_\_\_\_

Job Title: \_\_\_\_\_

Name of Business: \_\_\_\_\_

Name of Business: \_\_\_\_\_

Business Phone: \_\_\_\_\_

Business Phone: \_\_\_\_\_

Does student live on a full time basis with both mother and father (*natural or adopted*)? \_\_\_\_\_ Yes \_\_\_\_\_ No

If no, please specify (*and, if applicable, provide legal documentation regarding any custody arrangements*):

\_\_\_\_\_

\_\_\_\_\_

**Medical Information**

Name of child's physician: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Please list any medications or food to which your child is allergic: \_\_\_\_\_

Please list any known medical conditions, anticipated special accommodations, current or anticipated medication and whether on-campus storage may be required for any such medications.

Now is the time to let us know.

**In Case of Emergency**

Please inform these people that you have listed them. They should be willing to pick up your child or assist if we cannot reach you in the event of an emergency. Only one is required now. Additional contacts may be provided during Orientation.

1. **NAME:** \_\_\_\_\_**PHONE:** \_\_\_\_\_**NEW STUDENTS -- Previous School History**

Name of School: \_\_\_\_\_ Dates Attended: \_\_\_\_\_

School Phone Number: \_\_\_\_\_ Grade Completed: \_\_\_\_\_

School Address: \_\_\_\_\_

\_\_\_\_\_

Please let us know how the applicant is currently doing in each of the following subjects. (*LOTE = Language Other Than English*)

Subject	Subject Level	Current Teacher Name	Current GPA	Comment if not A/B
Math				
Science				
English				
LOTE				

LOTE= Language Other Than English. For HS student, enter current GPA. For MS or younger, enter the current grade/score in the current class.

Extracurricular activities, regular clubs, or hobbies	From Date	To Date

Additional Interests: What else does the applicant enjoy doing outside of school?

I am the parent or legal guardian of the student on this application. I understand that, if the applicant is accepted, I and the student are bound by the terms of the enrollment contract to be signed when making our first payment, and that we are working toward the goal of this student being admitted to a well-recognized **four-year college/university**, not a two-year community college. I agree to all prepayment and fee policies as stated on the Cambrian Academy website.

**Signatures:**

\_\_\_\_\_  
Parent

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent

\_\_\_\_\_  
Date

**Why did you choose Cambrian Academy?** Please elaborate on why the applicant is a good fit and will thrive in our program.

*Other children in family:* Name, Age, Current School

When submitting this completed application, please include the following:

<b>Local Students</b> <ol style="list-style-type: none"><li>1. Most recent school transcripts or report cards Past two years preferred</li><li>2. Most recent standardized test (SAT, STAR, IOWA, etc.)</li><li>3. \$175.00 Application Fee (non-refundable)</li></ol> We will then review the application and schedule a follow-up meeting to discuss the application with you.  To pay the application fee by credit card: <a href="https://cambrianacademy.org/appfee.html">https://cambrianacademy.org/appfee.html</a>	<b>Mail To:</b> <b>Cambrian Academy</b> <b>4340 Almadén Expressway</b> <b>San Jose, CA 95118-2009 USA</b>  <b>If you wish to send a scanned application:</b> Scan all documents, including the front and back of the Application Fee check to <a href="mailto:admissions@cambrianacademy.org">admissions@cambrianacademy.org</a> .
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How were you referred to our school? *(name of source if possible)* \_\_\_\_\_

Please visit [www.CambrianAcademy.org](http://www.CambrianAcademy.org) for more information about the registration timeline and fees.  
Cambrian Academy is fully accredited by the Western Association of Schools and Colleges.



Offers of admission will typically have an expiration date, after which the space may be offered to another applicant. This is in part because space availability is so limited. The sooner we fill the allotted spaces with committed students, the sooner we may begin detailed planning for the upcoming year. We work hard to provide the best customized program possible for each student.

FOR OFFICE USE: