

Corvid Academy

Summer School 2016: Overview

Corvid Academy will have a 4 week summer school beginning Monday, June 13, 2016, and ending on Friday, July 8, 2016. Monday, July 4th will be the only scheduled day off during summer school.

TUITION: The tuition for the four week summer school will be \$775. The hours of summer school will be from 9A.M. until 2P.M. with a 45 minute lunch break.

SUPPLIES: Students will need a personal laptop, a composition book, 5 pencils, one eraser and a book bag. Students need to bring their own lunch, but a refrigerator, water cooler, utensils and microwaves will be provided.

DROP OFF AND PICK-UP: Summer school begins at 9:00A.M. Students must be picked up at 2:00pm, a fifteen minute grace period will be allowed. Any student that is not picked up after 2:15pm will be invoiced a \$25 late pick-up fee. The after school care for summer school is \$125. After school care will end at 5:00pm during summer school. If you cannot pick your child up on time, then we suggest that you pay for after school care. At \$25 a day for late pick-up fee, you will be paid \$125 in one week. The school gate will be open at 8:00A.M. Students that arrive early MUST be well behaved or they will NOT be allowed to be dropped off until 9:00A.M.

SUMMER SCHOOL CLASSES: Students will be assessed in the following subjects: Math, Reading/Vocabulary and Language. Students will be required to complete at the minimum one lesson in each subject daily. Students that do not complete their daily lessons will have homework or a reduced lunch time.

SUMMER SCHOOL

Summer School Year Deadline

Application Deadline: June 4th

Start Date: June 13th

Corvid Academy: Office of Admissions
91-1003 Lehulehu St.
Kapolei, HI 96707

E-mail: admission@corvidacademy.org
Website: www.corvidacademy.org
Phone: 808.674.9597

It is preferable that students submit their Student Profile on line at www.corvidacademy.org; however, you may print the completed application and mail it, along with application fees and supplemental documentation.

If you are submitting a paper application, please be sure to write your e-mail address legibly. You may receive important messages about the application through e-mail. Be sure to check your e-mail frequently and let us know if you change your e-mail address.

Student Biographical Information

Current Student (Add Summer)

Summer Only

Student Name _____
Last First Middle Suffix

Preferred First Name _____

Permanent Address _____
Street Name Apt/Unit
City State Zip Code

Student's Home Telephone _____ Students's Cell Phone (if any) _____

Gender: Female Male Student's Email (if any) _____

Date of Birth _____ mm/dd/yyyy Place of Birth _____
City State Country

If not English, language spoken in student's home _____ Summer School for Year _____
yyyy

Current Grade _____ Country of Residence _____

Name of present school _____

Number of years attended _____

School Address _____
Street Name
City State Zip Code

School Type Public School Private School: Day Student Private School: Boarding Student
Parochial School Charter School Home School Online School

Have you ever applied to Corvid Academy? Yes No If yes, for what year: _____

If yes, for what type of program did you apply: Physical Academy Distant Learning Academy

If you have any questions about the topics above, please contact our office at 808.674.9597 or email us at admission@corvidacademy.com

Family Information (Household 1)

Parents/Guardians are listed according to the household in which they live. If both parents live in the same household, please record both parents' information under Household 1. If parents live in separate households, record one parent's information in the first section of Household 1 and the other parent's information in the first section of Household 2.

Parents' Marital status (relative to each other): Married Single Separated Divorced Widowed

Household 1 Information (Household 1 is the student's primary place of residence)

Permanent Address _____
Street

City State Country Zip Code

Home Telephone _____
(###) ###-####

Household 1 Parent/Guardian

Parent/Guardian Type: Father Mother Guardian

Name _____
Title First Middle Last Suffix

This Parent/Guardian has legal guardianship of the student.

Occupation/Title _____ Employer _____

Business Address _____

Daytime Telephone _____ Cell Phone _____ Fax (if any) _____
(###) ###-#### (###) ###-#### (###) ###-####

Preferred E-mail _____ Parent/Guardian's Place of Birth _____

College / Graduate School Attended (if any) and Degree Earned _____

High School Attended (if any) _____

Household 1 Parent/Guardian

Parent/Guardian Type: Father Mother Guardian

Name _____
Title First Middle Last Suffix

This Parent/Guardian has legal guardianship of the student.

Occupation/Title _____ Employer _____

Business Address _____

Daytime Telephone _____ Cell Phone _____ Fax (if any) _____
(###) ###-#### (###) ###-#### (###) ###-####

Preferred E-mail _____ Parent/Guardian's Place of Birth _____

College / Graduate School Attended (if any) and Degree Earned _____

High School Attended (if any) _____

Last Name: _____

Date of Birth: _____

First Name, Middle Name: _____

Family Information (Household 2)

Parents/Guardians are listed according to the household in which they live. If both parents live in the same household, please record both parents' information under Household 1. If parents live in separate households, record one parent's information in the first section of Household 1 and the other parent's information in the first section of Household 2.

Parents' Marital status (relative to each other): Married Single Separated Divorced Widowed

Household 2 Information (Household 1 is the student's primary place of residence)

Permanent Address _____
Street

City State Country Zip Code

Home Telephone _____
(###) ###-####

Household 2 Parent/Guardian

Parent/Guardian Type: Father Mother Guardian

Name _____
Title First Middle Last Suffix

This Parent/Guardian has legal guardianship of the student.

Occupation/Title _____ Employer _____

Business Address _____

Daytime Telephone _____ Cell Phone _____ Fax (if any) _____
(###) ###-#### (###) ###-#### (###) ###-####

Preferred E-mail _____ Parent/Guardian's Place of Birth _____

College / Graduate School Attended (if any) and Degree Earned _____

High School Attended (if any) _____

Household 2 Parent/Guardian

Parent/Guardian Type: Father Mother Guardian

Name _____
Title First Middle Last Suffix

This Parent/Guardian has legal guardianship of the student.

Occupation/Title _____ Employer _____

Business Address _____

Daytime Telephone _____ Cell Phone _____ Fax (if any) _____
(###) ###-#### (###) ###-#### (###) ###-####

Preferred E-mail _____ Parent/Guardian's Place of Birth _____

College / Graduate School Attended (if any) and Degree Earned _____

High School Attended (if any) _____

Last Name: _____

Date of Birth: _____

First Name, Middle Name: _____

Parent/Guardian Statement

To be completed by parent(s) or guardian(s) At Corvid, we believe that the success of students is directly linked to the type of support and encouragement they receive from both their family and their school. We seek to form partnerships with our parents that will allow us to provide the best foundation of support for our students. The formation of that partnership begins during the application process. We hope you will answer the following questions in a way that will help us get to know your child as well as possible.

Student Name _____
Last First Middle Suffix

If you have any special living arrangements that may affect your receipt of mailings/notifications (which may have not already been referenced in the Family Information section of the Student Profile - Part 1) please call our office at 808.674.9597 to discuss.

Additional Information / Explanation

If you would like to provide any additional information that was not specifically requested or did not fit in the spaces provided, you may use the space below.

Attendance Information

Has the student ever been dismissed, suspended, placed on probation, or received other disciplinary sanction? Yes No
Has the student withdrawn from school voluntarily for an extended period of time for reasons other than health? Yes No

If the answer to either or both of these question is yes, please provide a full explanation in the "Parent Statement" section.

In consideration of the undertaking of the Office of Admission of Corvid Schools to process the undersigned student's application for admission and other related forms, the undersigned agree that the information furnished on the application for admission form, together with all information and materials of any kind received by the Office of Admission from any source or prepared by anyone at its request, shall be completely confidential and shall not be disclosed to anyone, including the student and his/her family, except that the Headmaster may, for official purposes at her discretion, disclose any part of or all thereof to such person as she deems advisable.

We certify that all information submitted in the admission process—including the Student Profile, other application materials, any supplements, and any other supporting materials—is factually accurate and honestly presented. We understand that the student may be subject to possible admission revocation should the information we have certified be false.

Student signature mm/dd/yyyy Parent/Guardian signature mm/dd/yyyy

The Corvid Academy reaffirms its longstanding nondiscriminatory policy and admits students of any religion, race, or national or ancestral origin to all rights, privileges, programs, and activities generally accorded or made available to students at Corvid Academy, and further states that Corvid Academy does not discriminate on the basis of religion, race, color, sex, gender identity, sexual identity, or national or ancestral origin in the administration of its educational policies, scholarship and loan programs, and other Academy-administered programs.

Last Name: _____ Date of Birth: _____
First Name, Middle Name: _____ Page 5

Signatures & Authorization

Signatures

In consideration of the undertaking by the admission offices at the school to which this Student Profile will be submitted, the undersigned agree that the information furnished on the final application forms, together with all information and materials of any kind received by the admission offices from any source, or prepared by anyone at its request, shall be completely confidential and shall not be disclosed to anyone, including the student and his/her family, except that the dean/director may, for official purposes at his/her discretion, disclose any part or all thereof to such person or persons as he/she deems advisable.

✦ Student Confirmation Signature _____ Date _____
mm/dd/yyyy

✦ Parent/Guardian Confirmation Signature _____ Date _____
mm/dd/yyyy

✦ Parent/Guardian Confirmation Signature _____ Date _____
mm/dd/yyyy

Authorization

By checking this box, I certify that all information submitted in the admissions process — including the Student Profile, other application materials, any essays, and any other supporting materials — is factually accurate and honestly presented. I understand that I may be subject to possible admission revocation should the information I've certified be false.

The required, nonrefundable application fee should be submitted to each school with the Student Profile.

Submission Instructions

Email:

- Save completed and signed form to your computer
- Open your email account in either browser or email client software
- Create new email
- Enter admission@corvidacademy.org as mail to address
- Attach your completed application PDF file
- In the subject line, enter your **child's name** and the **application type**.
 - Examples:
 - "Jon Doe Application for Summer School" - if applying for summer school
 - "Jane Doe Application for Admission" - if applying for full admission

Snail Mail:

- Save completed form to your computer
- Print it
- Sign it
- Mail it to:

Corvid Academy: Admissions
91-1003 Lehulehu St.
Kapolei, HI 96707

Our schools do not discriminate on the basis of gender identity, race, color, disability, religion, sexual orientation, or national origin in the administration of our admission policies and financial aid program

Last Name: _____

Date of Birth: _____

First Name, Middle Name: _____

Page 6