



## DELPHI ACADEMY™ of Los Angeles

11341 Brainard Avenue • Lake View Terrace, CA 91342 • (T) 818-583-1070 • (F) 818-583-1082

### APPLICATION FOR ADMISSION

Dear Parents and Applicant:

Since Delphi students are all on highly individualized programs, it is generally possible for qualified students to begin their programs at any point in the year, provided space is available. Priority is given to those eligible students first completing the full application procedure.

#### APPLICATION PROCEDURE

Application Form: Applicant should carefully complete Part A in his or her own handwriting (the parent may help for younger applicants). Some essays may be written on a separate sheet of paper, as indicated. Both parents should complete Part B and insure Part A is complete.

Application Fee: After completing the application, please return it along with the non-refundable \$100 application fee. For international applicants, a \$200 application fee is required.

To Secure Applicant's Place: A non-refundable tuition deposit of \$350 is required to secure a place in the school.

Report Cards: If the applicant has been enrolled in a school, provide copies of the most recent year's report cards.

Letters of Recommendation: Please give the recommendation forms to three individuals who know the applicant well and can comment on his/her academic performance. Teachers familiar with his/her English and mathematics basics should be included if at all possible. Completed recommendations should be mailed or faxed directly to Delphi Academy.

Enrollment Forms must be completed and returned to the school prior to enrollment, along with a copy of the student's immunization records.

Interview: All applicants receive personal interviews and testing prior to acceptance and enrollment.

*Delphi Academy admits students of any race, color, and national or ethnic origin.*

**Part A – To be completed by applicant (parent help only as necessary):**

Name of Applicant \_\_\_\_\_ Nickname \_\_\_\_\_

Date of Birth \_\_\_\_\_ Age \_\_\_\_\_ Place of Birth \_\_\_\_\_

Present or Most Recent Educational Level \_\_\_\_\_ Most recently enrolled at: \_\_\_\_\_

Applying for Enrollment from \_\_\_\_\_, 20\_\_\_\_\_ to \_\_\_\_\_, 20 \_\_\_\_\_

Has applicant ever attended Delphi before? ( ) No ( ) Yes If “yes”, when? \_\_\_\_\_

How did you hear about Delphi? \_\_\_\_\_

1. Which subjects are you most interested in? Why?
  
2. Are there any subjects in which you feel you need help? If so, which ones and what do you feel is causing the difficulty?
  
3. What would you like to accomplish at Delphi? (Please be specific)
  
4. Name one or two books you have read in this past year. What type of book do you enjoy reading the most?
  
5. Have you ever skipped or repeated a grade or educational program? \_\_\_\_yes \_\_\_\_no. If yes, which one?
  
6. Please check the appropriate boxes to indicate your talents and interests. Also place an X by any area in which you have received an award or honor:

Subject	Reading	Math	Science	Creative Writing	History	School Leadership	Drama	Music	Art	Computers	Team Sports
Very Interested											
Not Interested											
Would like to try at Delphi											

**Writing Sample (younger students, up through grade 6):**

Please choose one of the following topics to write about. On a separate sheet of paper write about it as much as you like. We would like you to write 100 words or more (younger applicants may write as much as they are able).

- A. If you could take a month out of the year to do whatever you want, describe in detail what you would do and why.
- B. Tell us about a favorite book, piece of music, film, or hobby and what you enjoy about it and why.
- C. Write about a current world event in detail covering what you feel is important about it and why.



**Part A, continued - FOR ALL APPLICANTS:**

12. The Delphi spirit is based on integrity, honesty, trust, responsibility and open communication. Please write a statement in your own words that shows that you have read and understood the *Student and Parent Handbook* and agree to abide by the rules and principles therein. (Younger students should show they have gone over it with an adult and understand these important points.)

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Signature of Applicant \_\_\_\_\_

Date \_\_\_\_\_

**Part B – Family Information:**

**FATHER**

**MOTHER**

Name \_\_\_\_\_

Name \_\_\_\_\_

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

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

State/Zip \_\_\_\_\_

State/Zip \_\_\_\_\_

Home Phone (\_\_\_\_) \_\_\_\_\_

Home Phone (\_\_\_\_) \_\_\_\_\_

Cell Phone (\_\_\_\_) \_\_\_\_\_

Cell Phone (\_\_\_\_) \_\_\_\_\_

Work Address \_\_\_\_\_

Work Address \_\_\_\_\_

State/Zip \_\_\_\_\_

State/Zip \_\_\_\_\_

Work Phone (\_\_\_\_) \_\_\_\_\_

Work Phone (\_\_\_\_) \_\_\_\_\_

Occupation \_\_\_\_\_

Occupation \_\_\_\_\_

Age \_\_\_\_\_

Age \_\_\_\_\_

Highest Education Level \_\_\_\_\_

Highest Education Level \_\_\_\_\_

Income \_\_\_\_\_

Income \_\_\_\_\_

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

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

If parents are separated or divorced, with whom does the applicant reside? \_\_\_\_\_

Who has legal custody? \_\_\_\_\_

**Applicant's Brothers and Sisters:**

<u>Name</u>	<u>Age</u>
_____	_____
_____	_____
_____	_____

<u>Name</u>	<u>Age</u>
_____	_____
_____	_____
_____	_____

**Part B, continued – Parental Questionnaire and Confidential Preliminary Health Report**

1. What would you like to see your child accomplish through his or her education at Delphi?
  
2. Which of your child’s qualities do you respect and admire most?
  
3. In extracurricular activities does your child generally continue with his or her interests once begun?
  
4. How does your child usually spend his or her free time?
  
5. Is there an area of potential in your child that you would especially like developed further?
  
6. Are there any academic areas or areas of personal development in which you would particularly like to see your child improve?
  
7. What types of things upset your child?
  
8. Describe briefly the relationship of your child to each parent.

**If the answer to any of the following questions is *yes*, please explain in full detail on a separate sheet of paper:**

9. Has your child ever had physical, mental, emotional, scholastic, or disciplinary difficulties?      \_\_\_yes \_\_\_no
10. Has he or she ever been prescribed medicine for a learning disability or hyperactivity?      \_\_\_yes \_\_\_no
11. Are there any restrictions regarding his or her physical activities?      \_\_\_yes \_\_\_no

**I certify that the above is complete and true and that the applicant is a normal child who is a safe companion for other children.**

\_\_\_\_\_  
*Signature of Parents or Guardian with Legal Custody*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Signature of Parents or Guardian with Legal Custody*

\_\_\_\_\_  
*Date*

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