



Saint Nicholas Orthodox Academy

A Ministry of St. John the Wonderworker Orthodox Church
543 Cherokee Avenue
Atlanta, Georgia 30302
(404) 584-6088

Student Application 2022-2023

Student's Full Name _____

*Nickname, if commonly used _____

Date of Birth _____

*Date of Baptism: _____

*Saint's Name/Name Day _____

Address _____

Phone(main): _____

(other) _____

County & School District in which this student resides:

*Please list schools your child previously attended

School _____

Dates _____

Grade(s) completed _____

May we publish your email in our school directory? YES____ NO____

**If your child is homeschooled, do you seek to receive credit for your home studies through St. Nicholas Orthodox Academy? If yes, please complete the Home School Accreditation Information Sheet.

Does your child have special needs? YES____ NO____

*If your child has special needs, does he/she have a current IEP? YES____ NO____

Please attach any relevant information.

Has the applicant ever been expelled or suspended from a school? If yes, please explain.

FAMILY PROFILE

Father's Name _____

Phone (main) _____

Address (if different from student's home address)

Mother's Name _____

Phone (main) _____

Email _____

Address (if different from student's home address)

Church Membership _____

*Other Children: Name

DOB

School

MEDICAL FORM

Name _____ DOB _____

Allergies (food, medications, seasonal):

Prescribed Medications currently being taken:

Past Medical History:

History of asthma or reactive airway disease?

If yes, what is the child's asthma action plan?

History of severe allergic reaction or anaphylaxis?

***If yes, please send an epipen to school**

Past Surgical History

IN CASE OF EMERGENCY, CONTACT

Name (relationship) _____

Phone _____

Physician _____

Phone _____

Hospital of Choice _____

Insurance Carrier _____ Group Code # _____

Policy # _____ Preferred Provider _____

AUTHORIZATION FOR EMERGENCY MEDICAL CARE

I/we hereby give permission to St. Nicholas Orthodox Academy to call for medical care for my/our child. I/we understand that, should an emergency arise, St. Nicholas Orthodox Academy will make a conscientious effort to locate me/us before emergency action is taken. However, if this is not possible, the expenses of all such medical care and treatment will be accepted by me/us.

Parent/Guardian Signature(s) _____ Date _____

MEDIA RELEASE AUTHORIZATION

I hereby give my consent to all photographs, audio recordings, academic work and/or video recordings taken of me or my minor(s) by St. Nicholas Orthodox Academy staff or volunteers. I understand that any such photographs, audio recordings, academic work and/or video recordings become the property of St. Nicholas Academy and may be used by the school for educational, instructional, or promotional purposes determined by the school in broadcast and media formats now existing or created in the future.

Parent/Guardian Signature(s) _____ Date _____

AUTHORIZATION FOR TRIPS

I/we give permission for my/our child to go on organized field trips away from the premises of St. Nicholas Orthodox Academy, in the company of and supervised responsible adults, acting on behalf of St. Nicholas Orthodox Academy, whether on foot or by vehicle.

Parent/Guardian Signature(s) _____ Date _____

**AUTHORIZATION FOR CHILD TO BE PICKED UP
BY A PERSON OTHER THAN PARENT OR GUARDIAN**

Name _____

Phone (main) _____ (other) _____

Email _____

I authorize _____ to pick up my/our child(ren)
_____ from St. Nicholas Orthodox Academy.

Parent/Guardian Signature(s)

Date _____

Upon enrolling my/our child(ren) in St. Nicholas Orthodox Academy, I/we agree to the following:

- **In case of school absence greater than four days due to illness, a doctor's note must be supplied on return to school.**
- **All restrictions or modifications to normal physical activities must have a documented physician's note detailing need for this restriction and time period.**

Therefore,

- We will do our best to augment the efforts of the St. Nicholas Orthodox Academy by making our home a learning environment, providing materials, atmosphere and attention to the growth of our child's spirit and intellect.
- We will work with our children's teachers in ensuring that all projects and assignments are completed on time and as directed.

- We will ensure that our children act respectfully and positively in the learning environment where traditional Christian values are taught and supported, including regular respectful attendance and participation in services of prayer and worship
- We agree to adhere to the guidelines and rules of the St. Nicholas Orthodox Academy.
- If our child(ren) is uncooperative in class and refuses correction, or has any other disciplinary problems which require parental involvement, I/we agree to attend a parent/teacher meeting at the school. Furthermore, I/we agree to remove our child from school, if necessary.
- I/we agree to give 30 days notice before withdrawing our child(ren) from school.
- I/we agree to pay tuition promptly.

Parent/Guardian Signature(s)

Date _____

St. Nicholas Orthodox Academy admits students of any race, color, and national or ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, national or ethnic origin in administration of educational policies, admissions policies, scholarship, loan programs, athletic and/or any other school-administered programs.