Date _____

2022-2023

APPLICATION

DESERT ADVENTIST ACADEMY

74-200 Country Club Dr.
Palm Desert, CA 92260
760-779-1799
www.desertadventistacademy.org

Office Use Only	**Date**
Application Received	_____
References Received	_____
Physical Received	_____
Immunization Received	_____
New Student interview	_____

Financial Clearance

$320 Registration Fee ☐ Tuition Agreement ☐
Return_____ Accept _____
New _____ Deny _____
I-20 _____ Date Started _____
Cum file requested ☐

Student's Name _____ Grade entering _____
first middle last
Preferred Name _____
Address _____Phone _____
_____ SS # _____
Sex ___ Age ___ Birth date _____ Birthplace _____Date of Baptism _____

Father's Name _____
first middle last
*Address (or mailing address) if different:
_____
_____
Home Phone (if different) _____

Occupation _____
Employer _____

Work Phone _____
Cell Phone _____
Email Address _____
Social Security # _____
SDA Church Member Y / N
Religion/Church Affiliation_____

Mother's Name _____
first middle last
*Address (or mailing address) if different:
_____
_____
Home Phone (if different) _____

Occupation _____
Employer _____

Work Phone _____
Cell Phone _____
Email Address _____
Social Security # _____
SDA Church Member Y / N
Religion/Church Affiliation_____

In case of emergency, we will make every effort to notify parents. In case we are unable to reach you please give an emergency contact name and number, your child's doctor, and your hospital preference.
Emergency name _____ Phone _____
Doctor _____ Phone _____
Hospital _____ Phone _____

Has this student been previously identified as qualifying for a special education program? No___ Yes___ If yes,
What kind? _____ When? _____ By Whom? _____

Previous School _____ Address _____
Is there an outstanding balance for Tuition or other charges from your child's previous school? No ____ Yes ____ Amt. $_____
It is DAA's policy that no child will be admitted whose account from a former school has not been paid in full. Any request for exception to this policy will be considered on an individual basis.

I understand and am in harmony with the regulations and policies as stated in the current Desert Adventist Academy Handbook. I recognize that regulations adopted by the school administration and publicly announced will be as binding as those printed in the Handbook. Application to DAA gives consent for administration to use student pictures and video for marketing purposes.

X_____ X_____
Student Signature Parent Signature