



Ascend Academy Inc.

Application 2025-2026

Father's name: _____

Mother's name: _____

Primary Address: _____

Father's phone number: _____

Father's email: _____

Father's employer: _____

Mother's phone number: _____

Mother's email: _____

Mother's employer: _____

Are both parents living in the same household? _____

Primary email for school communication. Father, Mother, or Both? _____

Name of all students attending, ages, and grades.

Name:Age:Grade 25/26:

Please complete the back of this form.

List all schools in the past five years and years attended:

Why did you leave?

Have any of your children been dismissed from any school program? _____ If yes, please explain:

How did you hear about Ascend Academy Inc.?

Do any of your children have allergies? If so, please list them here:

Do any of your children have learning differences? If so, please list them here:

Do any of your children have behavior issues? If so, please list them here:

List two references who are not family members:

Name:Email:
