

SPARHAWK ACADEMY

Student Application



STUDENT INFORMATION		
Student's Full Name:		
Current School:		
Applying for Grade:	Current Cumulative GPA:	
Place of Birth:	Date of Birth:	
Student's Religious Affiliation:		
Student's Parish or Affiliation:		
Student Address:		
SCHOOL HISTORY		
The above student is applying for admission to Sparhawk Academy. All information will remain confidential. The forms of students not admitted to Sparhawk Academy will be destroyed.		
Current School:		
Current School Full Address:		
Current School Phone Number:		
Current Estimated English GPA:	Current Estimated Math GPA:	
PARENT/GUARDIAN		
Full Name:		Relationship to Student:
Place of Employment:	Professional Position:	Place of Employment Full Address:
Email:	Work Phone:	Cell Phone:
Education (Please list names of schools, years completed, and degrees or diploma received)		

OTHER PARENT/GUARDIAN

Full Name:		Relationship to Student:
Place of Employment:	Professional Position:	Place of Employment Full Address:
Email:	Work Phone:	Cell Phone:
Education (Please list names of schools, years completed, and degrees or diploma received)		

OTHER APPLICANT INFORMATION

Sports Interests:
Interests/Hobbies:
Are there any family, health or learning difficulties (such as an IEP) of which the school should be made aware? Please provide details.
How did you hear about us? Please provide details (name of friend, social media, or publication).
Would you like to receive financial aid information?

SIGNATURES

Signature (person completing form)	Date:
Name Printed:	Relationship to Student:

Please email questions and completed application to:

Thomas Keefe

Director of Admissions

admissions@sparhawkacademy.org

Sparhawk Academy

376 Orchard Street • Millis, MA 02054