

HAGIA SOPHIA CLASSICAL ACADEMY

Family/Student Application



Return Applications to:

10107 Guilford Ave.
Indianapolis, IN 46280
(Business mailing address)

317-500-HSCA (4722)

www.hagiasophiaclassical.com

Application Process

1. Submit application with a recent photograph of the applicant and a \$100 application fee per family. Submit copies of the most recent standardized test results, attendance record, report card, and teacher recommendation.
2. Our admissions staff will contact you to schedule testing.
3. If accepted, reserve your spot by returning the enrollment form and deposit with 14 calendar days.

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Hagia Sophia Classical Academy warmly welcome students and families of all Christian expressions, other faiths, or of no faith, as long as they understand who we are and are willing to participate with us in a genuine, reflective and respectful manner. We admit students of any race, color, national and ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. We do not discriminate on the basis of race, color, national and ethnic origin in administration of our educational policies, admissions policies, scholarship & loan programs, & athletic and other school-administered programs.



# HAGIA SOPHIA CLASSICAL ACADEMY

Date Received: \_\_\_\_\_  
Application Fee: \_\_\_\_\_  
Handled By: \_\_\_\_\_  
(For Office Use Only)

## FAMILY APPLICATION (ONE PER FAMILY)

### Father

name (please include title - Dr., Mr., Rev., etc.) \_\_\_\_\_

cell phone \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

street \_\_\_\_\_

work phone \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

city \_\_\_\_\_ state \_\_\_\_\_ zip \_\_\_\_\_

home phone \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

employer \_\_\_\_\_ position \_\_\_\_\_

email \_\_\_\_\_

highest degree and area of education \_\_\_\_\_

college(s) attended (if applicable) \_\_\_\_\_

### Mother

name (please include title - Dr., Mrs., Miss., Rev., etc.) \_\_\_\_\_

cell phone \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

street \_\_\_\_\_

work phone \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

city \_\_\_\_\_ state \_\_\_\_\_ zip \_\_\_\_\_

home phone \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

employer \_\_\_\_\_ position \_\_\_\_\_

email \_\_\_\_\_

highest degree and area of education \_\_\_\_\_

college(s) attended (if applicable) \_\_\_\_\_

Church Affiliation \_\_\_\_\_

# Children in Household \_\_\_\_\_

| List All Children In Household | Birth Date | Rising Grade | Applying for Admission                                   |
|--------------------------------|------------|--------------|----------------------------------------------------------|
| _____                          | _____      | _____        | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| _____                          | _____      | _____        | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| _____                          | _____      | _____        | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| _____                          | _____      | _____        | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| _____                          | _____      | _____        | <input type="checkbox"/> Yes <input type="checkbox"/> No |

Parent(s) are \_\_\_Married \_\_\_Separated \_\_\_Divorced \_\_\_Single

List any current HSCA families we may contact for a reference. \_\_\_\_\_

How did you learn about HSCA? \_\_\_\_\_

Please mail with a \$100 application fee to:  
Hagia Sophia Classical Academy, 10107 Guilford Ave, Indianapolis, IN 46280.

We certify that all the information on this application is true and complete and authorize Hagia Sophia Classical Academy to contact the applicant's previous school(s) and teachers to obtain records and opinions regarding the applicant(s).

Patent's/Guardian's Signatures \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_ Date \_\_\_\_\_

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HAGIA SOPHIA CLASSICAL ACADEMY

STUDENT APPLICATION *(ONE PER STUDENT)*

Please attach photo of applicant here.

Student's Name _____ Applying for grade _____

Current School _____ Applying for year _____

Student's current grade _____ (recently completed grade for summer applicants)

Date of Birth _____/_____/_____

Gender: Boy Girl Student's Social Security Number _____

With whom does the student live? Both Parents Mother Father Guardian Other _____

Submit the following with your application

- Most recent standardized testing
- Attendance record
- Recent photo of applicant
- Report card
- Teacher recommendation

Describe the applicant's education history (previous schools, classes, curriculum used).

Describe the applicant's extracurricular history or achievements.

- Has the applicant been tutored? Yes No
- Has the applicant been subject to disciplinary action? Yes No
- Has the applicant skipped or repeated a grade? Yes No
- Has the applicant had any learning problems? Yes No
- Has the applicant had any behavioral problems? Yes No
- Does the applicant have any physical disabilities or illnesses? Yes No
- Are you aware of any issues that may affect the applicant's behavior or academics? Yes No

If yes to any of these questions, please provide a complete explanation. If more space is required, attach a separate page.



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