Hagia Sophia Classical Academy

Family/Student Application





MISSION STATEMENT

Hagia Sophia Classical Academy will provide a curriculum that emphasizes mastery, connection between disciplines, knowledge with purpose, wisdom, and virtue. We will prepare our students to approach life and vocation with exceptional skill, faith, humility, and honor, having as its source Jesus Christ – the Wisdom, Word, and Son of God. We will educate the whole human person: mind, heart, and body. We will educate students based upon Classical academics combined with Orthodox Christian values. We will offer the Classical curriculum of the seven liberal arts and the four sciences.

VISION STATEMENT

We desire that all students embrace a lifelong love of Wisdom and learning. We believe that God made each child a rational being with the desire and ability to learn and grow in Truth. All Truth, Goodness, and Beauty in creation are a witness to God's love for us. We desire that each child comes of age with a strong mind and heart, learning virtue and character to live purely, work eagerly, contemplate clearly, listen attentively, discern wisely, reason rightly and articulate accurately. We desire that our children will do all this willfully from their hearts as an act of worship for the glory of the Triune God – the Father, the Son, and Holy Spirit.

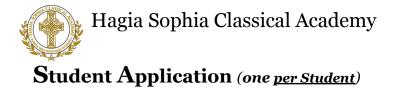


Family Application (One Per Family) Father

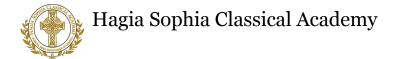
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name (please include title – Dr., Mr., Rev., etc.)			cell phone			
street			work phone			
city	state	zip	home phone			
employer	positi	on	email			
highest degree and area of education				ded (if applicabl	e)	
Mother						
name (please incl	ude title – Dr., Mr., Re	v., etc.)	cell phone			
street			work phone			
city	state	zip	home phone			
employer	positi	on	email			
highest degree an	d area of education		college(s) atten	college(s) attended (if applicable)		
Church Affiliat	ion		# Children in the	Household _		
L	ist All Children In	Household	Birth Date	Rising Grade Applying for Admission		
					\Box Yes \Box No	
					\Box Yes \Box No	
					\Box Yes \Box No	
					\Box Yes \Box No	
					\Box Yes \Box No	
					\Box Yes \Box No	
Parent(s) are	Ma	arried _	Separated	Divorced	Single	
List any curre	ent HSCA familie	es we may conta	ct for a reference			
How did you	learn about HSC	A?				
We certify that a	all the information o	n this application is	s true and complete.			
Parent's/Guardian's Signatures			-	Da	ate	
,	0			D	ate	

Hagia Sophia Classical Academy, a co-educational parochial school of Sts. Constantine and Elena Orthodox Church warmly welcomes 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, or national and ethnic origin in the administration of our educational policies, admissions policies, scholarship & loan programs, & athletic and other school-administered programs.



Student's Name	Applying for grade
Current School	Applying for grade
Student's current grade (recently complete	d grade for summer applicants)
Date of Birth//	
Gender: \Box Boy \Box Girl Student's Social Security N	umber
With whom does the student live? \Box Both Parents	\Box Mother \Box Father \Box Guardian \Box Other
Submit the following with your application	\Box Report card \Box Immunization records
Describe the applicant's education history (previou	s schools, classes, curriculum used).
Describe the applicant's extracurricular history or a	achievements.
Has the applicant been tutored?	□Yes □No
Has the applicant been subject to disciplinary action	
Has the applicant skipped or repeated a grade?	
Has the applicant had any learning problems? Has the applicant had any behavioral problems?	□Yes □No □Yes □No
Does the applicant have any physical disabilities of	
Are you aware of any issues that may affect the app	
If yes to any of these questions, please provide a co attach a separate page.	mplete explanation. If more space is required,



Student Release Information

Each child will be released only to a parent or a person named by the parent. Please list the person or persons authorized by you to pick up your child.

Name	_Phone ()
Name	_Phone ()
Name	_Phone ()
Name	_Phone ()
***Name of person(s) not authorized to pick up yo	our child:

Publicity Authorization

Hagia Sophia Classical Academy anticipates using children's pictures and names for publicity and news stories. Please mark the appropriate information for your child.

I do give permission to Hagia Sophia Classical Academy to use my child's picture and first name for publication purposes.

_____ I **do not** give permission to Hagia Sophia Classical Academy to use my child's picture and first name for publication purposes.

Emergency Contacts

Please list below the names and phone numbers of persons to contact if your child becomes ill at school and you cannot be reached.

Name	_Phone ()
Name	_Phone ()
Name	_Phone ()
Name	_Phone ()

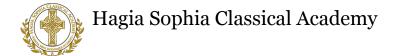


Authorization for Medical Treatment of Minors

	Date of Birth		
Allergies, special conditions, or medications	:		
I/we being the parent(s) or legal guardian(s faculty and staff of Hagia Sophia Classical A unexpected medical, dental, hospitalization, the period of my/our absence. This docume appropriate hospital representative at such surgical care may be required.	cademy to act on my/ , and surgical care for nt shall be presented	our behalf in author the above-named i to a physician, dent	orizing minor during tist, or
Insurance company/government program: _			
ID, group or contract number:			
Preferred hospital(s):			
Family physician or pediatrician:		_Phone ()	
Physician's Address:			
Physician's Address:	City	State	Zip Code
Physician's Address:		Date	

Signature of Parent or Guardian ______Date_____Date_____

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Students Short Answer Questions

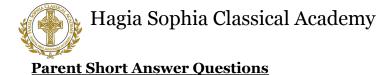
Do you want to attend Hagia Sophia Classical Academy? Please tell us why in your own words?

Do you assent to the Parent-Student Handbook?

What is your favorite book? Why?

What is your favorite subject in school? Why?

Describe a hobby, activity, or cause that means a lot to you and tell us why.



Instructions: In addition to the mission and vision statement above, please read the HSCA Parent-Student handbook before answering each question below with three or four sentences. Feel free to expound more if necessary. We assume the answers are representative of both parents' views. If there is a difference between views, please include the other parent's response.

Please describe the strengths and the weaknesses of your child's current/previous education.

What are the three top reasons you have chosen HSCA?

What are your three top educational priorities for your child?

We do not teach gender identity as a social construct, sex education, nor do we teach Critical Race Theory. Is this a problem? Why or why not?



Hagia Sophia Classical Academy

While embracing all Christians, we teach from a perspective of Orthodox Christian values? Do you see this as a problem? If so, what are those concerns or questions?

HSCA has a classical curriculum. Do you have questions about a classical curriculum?

What is something significant about which you have changed your mind?

How does your child feel/think about the possibility of attending Hagia Sophia Classical Academy? If you are applying for more than one child, please answer separately for each child.