



## Student Application

Application date: \_\_\_/\_\_\_/\_\_\_ For school year: \_\_\_\_\_ Grade Entering: \_\_\_\_\_ Dorm/Village \_\_\_\_\_  
mo / day / yr

\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_  
**Last name (printed)                      First (printed)                      Middle (printed)                      Nickname (printed)**

\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_  
**Street/Post Office Box                      City                      State/Province                      Country                      Zip Code**

\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_  
**Home Phone (with area code)                      Student Cell Phone                      Student Email Address**

(\_\_\_/\_\_\_/\_\_\_)      \_\_\_      **Gender:**      \_\_\_/\_\_\_  
**Birth date                      Age                      Male \_\_\_ Female \_\_\_                      Height (ft./in.) Weight**

\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_  
**Nationality                      Country of Citizenship                      Passport number (if non-US citizen)**

**Baptized SDA? Yes \_\_\_ No \_\_\_      Another church? Yes \_\_\_ No \_\_\_      What denomination? (If Other) \_\_\_\_\_**

**Do you attend church regularly? Yes \_\_\_ No \_\_\_      Home Church: \_\_\_\_\_**

**Family Information: Parent(s) is/are:      Married \_\_\_      Divorced \_\_\_      Separated \_\_\_      Single \_\_\_      Widowed \_\_\_**

	Father	Mother	Stepfather	Stepmother	Guardian
Name					
Occupation					
Church Membership					
Baptized SDA? (Yes or No)					
Street Address					
City/State/Zip					
Home Phone Number					
Work Phone Number					
Cell Phone Number					
Email Address					
I Live With (Please check)					
Send Grades To (Please check)					
Send Bill To (Please check)					
First Point of Contact (Please check)					

**Academic Information:**

Does your student demonstrate a need for special education services in order to experience school success?

Yes \_\_\_ No \_\_\_ If yes, explain? \_\_\_\_\_

\_\_\_\_\_

Here are the schools in which I have attended most recently, including address, phone number, and years attended.

Attach paper if needed.

School Name	Address	Phone #	Years Attended

Have you ever been suspended, dismissed or asked to withdraw from any school? Yes \_\_\_ No \_\_\_ If yes, explain?

\_\_\_\_\_

\_\_\_\_\_

**Other Information:**

Have you ever been arrested/convicted? Yes \_\_\_ No \_\_\_ If yes, explain?

\_\_\_\_\_

\_\_\_\_\_

Have you ever used? Tobacco: Yes \_\_\_ No \_\_\_ Drugs: Yes \_\_\_ No \_\_\_ Alcohol: Yes \_\_\_ No \_\_\_

If yes, most recent date: \_\_\_\_\_

\_\_\_\_\_

## Weimar Academy Financial Information Overview

Perhaps you feel that God wants your child to attend Weimar Academy, yet you may be wondering how to make it work financially. Pray and God will answer your heartfelt prayers, He always does.

We believe that if Weimar Academy is in God's will for your child, it will be possible. What God asks us to do, He also enables us to do as we stretch to our limit mentally, spiritually, physically, socially and yes, financially. If we do our best, we will see God's willingness to help.

Weimar Academy is committed to giving you the best education for the lowest possible cost, yet quality education is not cheap. Every student who chooses to enroll full-time in the Academy is expected to work on campus. Parents are expected to contribute to their utmost ability. Other sponsors and summer work may be necessary as well.

Please call us with questions (530-422-7947) and we are very willing to assist you in your financial planning. You will be asked to complete the following financial plan worksheet showing your payment plan.

### For Your Information:

- One month's tuition/room/board and the total registration fees (as listed in Section 1) are due at the time of registration.
- A monthly tuition/room/board payment will be due by the 15th of each subsequent month (September through May).
- A student will not be allowed to take their semester finals if they have a balance on their account. The only exception to this rule is if a plan has been submitted by the parents and been approved by the finance committee.
- A student may not draw funds from their tuition account, but you may open a separate account at the Business Office to care for your student's personal needs.

### Instructions:

**Section 1:** Based on the number of semesters your student will attend, complete the appropriate column for projected fees and deposits and total the column. Add the foreign student deposit and admission fees if applicable. Foreign student medical insurance is purchased individually. Uniform costs vary based on quantity purchased, but are approximately \$150. Foreign student admission fees are one-time only fees and are due at your first registration.

**Section 2:** Enter all financial resources. If your funding resources will cover all anticipated costs, skip to Section 4. If present resources are not sufficient, please obtain sponsorship forms from Academy Admissions and complete Section 3. You may get the forms at <http://weimaracademy.org/documents/>, call (530) 422-7947 or email [academy@weimar.org](mailto:academy@weimar.org) to coordinate getting the forms. Family members, church members, co-workers, etc. make great sponsors.

**Section 3:** Speak to your church pastor and request assistance from the church's worthy student fund or from your local conference. Total all sponsorship funding available to you. To prevent delay in processing your application, make sure to provide any needed sponsorship agreement forms. Without the proper sponsorship agreements (if applicable), your application will be incomplete.

**Section 4:** Summarize your financial plan by adding the totals from Sections 2 and 3 (line B) and subtracting that amount from the total from Section 1 (line A). If there is an amount remaining (line C), please explain on line D how the remainder will be covered.

## FINANCIAL PLAN WORKSHEET

Student's Name (print): \_\_\_\_\_ Date \_\_\_\_\_

Please complete this Financial Plan and return with the application. For further information regarding projected costs, please refer to the financial section of the Weimar Academy Handbook. The following is my financial plan for 2021-22. I am projecting costs on the assumption that I will attend Weimar Academy for the whole year as a dorm student. Village and staff students will not have Room and Board or Room Deposit Fees and their registration fees are only \$725.

### Section A: Summary of My Costs

Application Fee – Due with application	\$ 50
Tuition	\$ 7,725
Room	\$ 3,315
Meal Plan (\$5,900 - 3 Meal Plan) (\$4,935 - 2 Meal Plan)	\$ 5,900
Non-Refundable Registration Fees – Dorm (\$900), Village/Staff (\$725)	\$ 900
Refundable Room Deposit	\$ 100
Subtotal – Projected fees and deposits (Dorm Student on 3 meal plan)	\$ 17,940
Foreign Student Admission Fee (if applicable)	\$ 1,350
Foreign Student Deposit (if applicable)*	\$ 1,350

\* \$2,700 is due up front before we issue an I-20 - \$1,350 is applied to the first month's bill, \$1,350 is held on deposit until the student leaves Weimar Academy and is transferred out of SEVIS.

Additional Fees: Graduation Fee (Seniors Only) - \$150, Fees for College Classes (Seniors Only) – See College, Foreign Student Medical Insurance - Purchased Individually, Uniforms – See Uniform policy – Approximately \$155 (varies on quantity).

**A. Total Projected Fees and Deposits** \$ \_\_\_\_\_

### Section B: My Expected Financial Resources

Family \$ \_\_\_\_\_  
 Summer Earnings \$ \_\_\_\_\_  
 Savings \$ \_\_\_\_\_  
**B. Total Personal Resources** \$ \_\_\_\_\_

### Section C: Other Possible Financial Resources

Sponsor: Local Church Worthy Student Fund \$ \_\_\_\_\_  
 Sponsor: Local Conference \$ \_\_\_\_\_  
 Other Sponsors: (please list) \$ \_\_\_\_\_  
**C. Total Sponsor Resources** \$ \_\_\_\_\_

### Section D: Summary

1. Total projected fees and deposits (Section A) \$ \_\_\_\_\_  
 2. Total resources available (Add Section B and C Together) \$ \_\_\_\_\_  
**3. Total (subtract line 2 from line 1)** \$ \_\_\_\_\_

D. If line 3 (above) did not equal zero (\$0), please explain how and when the remainder will be funded:

\_\_\_\_\_

\_\_\_\_\_

There is an unpaid bill at another school.  Yes  No If yes, how much? \_\_\_\_\_

Name of School: \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_

The above information has been completed to the best of our/my ability and is an accurate statement of both expense projections and of our/my plan to cover the costs involved.

Person(s) assuming responsibility: (print) \_\_\_\_\_ Relationship to student: \_\_\_\_\_

Signature(s): \_\_\_\_\_ Date: \_\_\_\_\_





## 2 Page Personal Essay for Parent or Guardian of the Applicant

Please provide for us a 2 page essay addressing the following issues below:

- why you desire the applicant to attend Weimar Academy
- a description of the spiritual atmosphere at home
- strengths and weaknesses of the applicant
- how you resolve conflict as a family
- any other information that you would like us to know about your family

Once completed, please attach to this application.

**Parent/Guardian Pledge:** I have checked the information in the first sections of this application and have found it to be correct. I believe my daughter/son fully understands and commits to the Student's Pledge. I have also read the upcoming year's handbook and am willing to support the guidelines which help make a boarding school safe and a place where young people can live as mature, Christ-like adults. I fully support the staff of Weimar Academy as it continues the process of preparing my teenager to be an honorable member of God's family—on this earth and in the earth made new. I am responsible for all financial needs and will pay all school-related bills promptly.

Signature: \_\_\_\_\_

Date \_\_\_\_\_



## RECOMMENDATION FORM

Applicant's Name: \_\_\_\_\_

The above named person has applied for admission to Weimar Academy and has given your name as a reference. Please be honest and candid in your evaluation. This referral will be kept strictly confidential. Since this form must be on file before his/her admission can be considered, please return it promptly. You may also fill this out online at: <http://weimaracademy.org/student-reference-form/>. You may email, fax or mail it back.

*Weimar Academy, PO Box 486, Weimar, CA 95736; Fax 530-422-7910; academy@weimar.org*

1. How long have you known the applicant? \_\_\_\_\_ In what capacity? \_\_\_\_\_
2. What do you believe are the applicant's greatest strengths? \_\_\_\_\_  
\_\_\_\_\_
3. In what ways might the applicant need to experience positive growth? \_\_\_\_\_  
\_\_\_\_\_
4. Do you have any information about the applicant's life or background which you believe might be of particular concern to Weimar Academy? If so, please explain: \_\_\_\_\_  
\_\_\_\_\_
5. Additional comments? (optional) \_\_\_\_\_  
\_\_\_\_\_

6. Please circle the number which best describes the applicant in each of the areas of growth listed below. Note: 5 indicates the applicant is most like the characteristics on the left side, and 1 the characters on the right side. If you feel you cannot honestly evaluate a certain characteristic, please circle the letters N/A on the right.

SOCIABILITY	secure, outgoing, friendly	5	4	3	2	1	shy, introverted, unsocial	N/A
SPIRITUALITY	strong, stable, growing	5	4	3	2	1	immature, shaking, stagnating	N/A
JUDGMENT	sound, careful, teachable	5	4	3	2	1	rash, impulsive, headstrong	N/A
SERVICE ATTITUDE	compassionate, unselfish	5	4	3	2	1	indifferent, self-centered	N/A
INDUSTRIOUSNESS	diligent, thorough	5	4	3	2	1	lazy, incomplete, needs supervision	N/A
CHOICE OF FRIENDS	high standards, careful	5	4	3	2	1	no standards, careless	N/A
HEALTHY LIFESTYLE	healthful, conscientious	5	4	3	2	1	uninformed, careless, seems sickly	N/A
INFLUENCE ON OTHERS	good, helpful, OK	5	4	3	2	1	passive detrimental	N/A
TRUSTWORTHINESS	conscientious, dependable	5	4	3	2	1	needs guidance, irresponsible	N/A
INTELLECT	vigorous, creative, learning	5	4	3	2	1	slow, unmotivated, self-satisfied	N/A
FINANCES	account current, will be paid	5	4	3	2	1	can't make ends meet, high risk	N/A
EMOTIONAL STABILITY	solid, positive, secure	5	4	3	2	1	dependent, weak, troubled	N/A
ATTITUDE TO AUTHORITY	teachable, obedient	5	4	3	2	1	rebellious, querulous, resentful	N/A

7. Considering the applicant for acceptance as a student at Weimar Academy:

- |  |   |
|--|---|
| <input type="checkbox"/> I recommended without reservation   | <input type="checkbox"/> I do not recommended under present circumstances |
| <input type="checkbox"/> I recommended with some reservation | <input type="checkbox"/> I do not recommended under any circumstances     |

Your Name \_\_\_\_\_ Position/Title \_\_\_\_\_ Date \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Country \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_





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\_\_\_\_\_
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4. Do you have any information about the applicant's life or background which you believe might be of particular concern to Weimar Academy? If so, please explain: \_\_\_\_\_  
\_\_\_\_\_
5. Additional comments? (optional) \_\_\_\_\_  
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7. Considering the applicant for acceptance as a student at Weimar Academy:

- I recommended without reservation
  I do not recommended under present circumstances  
 I recommended with some reservation
  I do not recommended under any circumstances

Your Name \_\_\_\_\_ Position/Title \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Country \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_



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 I recommended with some reservation       I do not recommended under any circumstances

Your Name \_\_\_\_\_ Position/Title \_\_\_\_\_ Date \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Country \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_