

YADKIN VALLEY COMMUNITY SCHOOL



Thank you for your interest in the Yadkin Valley Community School! Please complete the application and submit in one of the following ways:

Email kim@yadkinvalleyschool.org

Mail PO Box 809
Elkin, NC 28621

Call 843.263.2059 or 336.526.2625 to schedule a time to deliver your submission packet to
246 East Main Street
Elkin, NC 28621

Application Process:

1. Complete the application
2. Include with your application a \$30.00 (non-refundable) application fee
Make check payable to Yadkin Valley Community School
3. Include with your application a copy of the following:
Current and previous year grades
Behavior and discipline records
Special placement information (Section 504 plan, IEP, etc.)
4. Personal interview will be scheduled after application is reviewed
5. Official notification of acceptance

If you have any questions, please call 336.526.0038 or email kim@yadkinvalleyschool.org.

The Yadkin Valley Community School admits students of any race, color, national or ethnic origin to all the rights, privileges, programs and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, national and ethnic origin in administration of its educational policies, admissions policy and other school administered programs.

Academic year for which you are applying:

Name of student:

Name student prefers to be called:

Male Female Date of Birth:

Current Grade Level:

Social Security Number:

Parent or Guardian Name(s):

Parents/Guardians are:

Married Separated Divorced Single Parent Domestic Partners

With whom is the child living?

Who is the legal guardian?

Parent/Guardian #1 Occupation:

Employer:

Employer's Address:

Work Phone:

Parent/Guardian #2 Occupation:

Employer:

Employer's Address:

Work Phone:

Home Address:

Mailing Address (if different from Mailing Address):

Home Phone:

Mobile Phone:

Email Address (primary point of contact):

Person Responsible for the Student's Tuition:

Name and Address to be used for billing:

Primary Language:

Other Languages Spoken:

Please list your child's strengths, interests and special talents:

Why are you interested in having your child attend this school?

Please list any organized groups in which your child participates and/or any special classes your child takes outside of school:

Please share any additional information you would like us to know about your child or your family, including any areas needing special attention, as well as your goals for your child at our school.

Previous school(s) attended, with dates of attendance.

Has your child ever experienced discipline challenges (including suspension or expulsion) in an educational setting?

FOR OFFICIAL USE

Date application was received

All application information received

Accepted

Denied

Waitlisted