



Victory Ridge Academy Student Application 2021-2022

Thank you for your interest in Victory Ridge Academy (VRA). Please complete this application and submit a copy of your child's IFSP or IEP.

Today's Date: _____

Student's Full Legal Name: _____

DOB: _____ Current Grade Level: _____ Sex: M F

Race: White African American/Black Asian other Home Language: _____

Parent/Guardian's name: _____

Parent/Guardian's name: _____

Address: _____ City: _____ Zip: _____

Home Phone Number: _____ Cell Phone Number: _____

Email Address: _____

Last school attended: _____ State: _____ County: _____

IEP Primary Exceptionality: _____

IEP Secondary Exceptionality: _____

Student is (circle all that apply): Sibling of current student Child of Staff/Board Member Not Applicable

If yes, name of person: _____

Have you previously applied to VRA: _____

Has the student ever been expelled from any school, had an arrest which resulted in a charge, had any other Department of Juvenile Justice actions against him/her, or been referred for mental health services? Yes No

If yes, briefly describe: _____

Florida Statute 837.06 provides that whoever knowingly makes a false statement in writing with the intent to mislead a public servant in the performance of his official duty shall be guilty of a misdemeanor of the second degree.

Therapies needed (circle all that apply): Speech Language Occupational Physical

Medical/Nursing Services needed (if applicable) (circle all that apply):

G-tube O₂ Tracheotomy Seizures Diabetes Other: _____

How did you hear about VRA: _____

Parent/Guardian Signature: _____ Date: _____