



summit schools

brilliant beginnings, bright futures

Candidate Profile – Prospective Student

BIOGRAPHICAL INFORMATION

Name _____ DOB _____
First Middle Last mm/dd/yyyy

Permanent Address _____

City State Zip Code

Home Telephone _____ Gender (please circle) Male Female

Place of Birth _____ Primary Language _____
City State Country

Current School _____ Current Grade _____ Grade 2022/2023 _____

EDUCATION BACKGROUND

Name of Current School _____ Current Grade _____

School Address _____

City State Zip Code

School Type (Circle ALL that apply) Public Private Parochial Home School Other

Does this child have an IEP, 504, or other learning difference?* Yes No

If yes, please explain and attach a copy of their IEP/504 and testing materials.

*** Summit does not have a counselor or persons on staff to support students with significant academic or behavior IEPs and/or 504s. We will ask you to complete an "Exchange of Information" form in order for Summit to discuss your student's learning with your child's current educational team. We do this in order to ensure that your child is receiving the very best educational opportunity - whether it is at Summit or another school. We do not generally accept students with an IEP unless the underlying problem is reading or speech or a service that Grant Wood AEA would bring to Summit on a regular basis. If the student's IEP falls into this category, further inquiry will help determine the best fit for the student.**

FAMILY INFORMATION

Siblings - Please list all siblings, if any.

Last Name	First Name	Age	Gender	Most Recent School Attended	Summit Alum?

PARENT/GUARDIAN INFORMATION (Household 1)

Parents are listed according to the household in which the child lives. If your family has two parents living in the same household, please record this information in the parent sections under Household 1. If your family has two parents living in separate households, record one parent's information in Household 1 and the other parent's information in Household 2.

Household 1 Information (Household 1 is the candidate's primary place of residence)

Permanent Address _____

City _____

State _____

Zip Code _____

Telephone #1 _____ Telephone #2 _____

Household 1 Parent/Guardian 1

Parent/Guardian (circle one): Father Mother Guardian

Name _____
First Middle Initial Last

Occupation/Title _____ Employer _____

Business Address _____

Work Telephone _____ Cell Phone _____

Preferred Email _____

Household 1 Parent/Guardian 2

Parent/Guardian (circle one): Father Mother Guardian

Name _____
First Middle Initial Last

Occupation/Title _____ Employer _____

Business Address _____

Work Telephone _____ Cell Phone _____

Preferred Email _____

Summit Schools does not discriminate on the basis of gender identity, race, color, physical disability, religion, sexual orientation, or national origin in the administration of our admission policies and financial aid programs.

FINANCIAL AID

- I will not be applying for Financial Aid for the upcoming school year.

 - I will be applying for Financial Aid for the upcoming school year. I have included the following documents to be considered eligible for Financial Aid:
 - Financial Aid Application
 - Copy of Federal tax returns from 2021 (or 2020 if 2021 is not yet filed)
 - Copies of two most recent pay stubs from all income sources
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AUTHORIZATION

In consideration of the undertaking by Summit Schools to which this Candidate Profile will be submitted, the undersigned agree that the information furnished on the final application forms, together with all information and materials of any kind received by the school from any source, or prepared by anyone at its request, shall be completely confidential and shall not be disclosed to anyone, including the candidate and his/her family, except that the Director of Business & Management may, for official purposes at his/her discretion, disclose any part or all thereof to such person or person as he/she deems advisable.

- By checking this box, I certify all information submitted in the admissions process is factually accurate and honestly presented. I understand that I may be subject to possible admission revocation should the information I have submitted be false.**

Parent/Guardian Signature _____ Date _____

Parent/Guardian Signature _____ Date _____