

THE KING'S ACADEMY

ISP Application Form

If you are the Independent Student or Parent, skip down to student Information section.

If you are a Third Party Applying on Behalf of the Student (Education Consultancy/ School Counselor/ Agency, etc) please fill out the Organization section (required).

Name of Person filling out Application:

Name of Organization (required):

Street Address:

City:

Region / Province / State:

Country:

Postal Code:

Phone Number (Including country code):

Email Address:

Student Information

Last Name (Family):

First Name (Given):

American Nickname:

Gender:

Current Grade Level: 7th 8th 9th 10th 11th 12th (Mark with an "X")

Grade applying for: 8th 9th 10th 11th 12th (Mark with an "X")

Have you ever had, or plan to have before enrolling at TKA, a gap in traditional enrollment in school (ex. extended language schooling, homeschooling, or extended travel)?

If so, please describe the length and nature of this experience.

Are you applying to advance to the next grade level or intentionally repeat your current grade?

Term Applying for: Fall 2019 Fall 2020 (Mark with an "X")

Desired Program Length: 1 Year (10 months) Multi-Year (Diploma Seeking)

(Mark with an "X")

Do you plan to seek a diploma from The King's Academy?

Yes No

If so, do you plan to attend college/university in the United States?

Yes No

Date of Birth:

City of birth:

Country of birth:

Street Address:

City:

Region / Province / State:

Country:

Postal Code:

Phone Number (Including country code):

Email Address:

Family Information

Parent 1 (Guardian's) Full Name:

Parent 2 (Guardian's) Full Name:

Relationship to Applicant:

Please fill out the information below if it's different from applicant

Street Address:

City:

Region / Province / State:

Country:

Postal Code:

Phone Number (Including country code):

Mobile Phone Number:

Email Address:

Occupation and Job Title:

Employer:

Please list those family members that live in your home
(including siblings):

Family Member #1

Last Name:

First Name:

Age:

Relationship:

Family Member #2

Last Name:

First Name:

Age:

Relationship:

Family Member #3

Last Name:

First Name:

Age:

Relationship:

Academic Information

Current / Previous School:

Years Attended:

Address:

Phone Number:

Applicant Questionnaire

How did you hear about The King's Academy?

Website Brochure Social Media Student Fair Agency / Consultancy
School Counselor Recommendation of a friend or family member Other:

If Student fair, Which Fair & City?

If Agency/Consultancy, which one?

If other, please describe:

Why do you want to apply to The King's Academy?

Is TKA your first choice amongst the schools you are applying to?

What languages do you speak fluently?

Which academic subjects interest you the most? Please explain.

What type of extracurricular activities do you enjoy (sports, musical instruments, clubs etc.)? Please explain your level of interest and experience in each area.

Have you ever traveled abroad? Please explain.

What can you offer as a member of the TKA community?

What has been your greatest accomplishment? Why?

What are your future goals (university, career, etc.)?

How would your teachers describe you?

On a scale of 1-10 how hard working do you think you are; 1 being very lazy / 10 being the hardest worker. Explain your answer.

If asked you to try something new, would you rather be the first, second, or last person to do it? Why?

Would you be ok living in either a residential dormitory or a host family? If given a choice, which would you prefer?

Describe your ideal host family or dorm parents.

Are you ok with pets in the home?

Are you ok with other children in the home?

List any special dietary restrictions (ex. vegetarianism, food allergies) or other allergies or concerns that would help us to place you in the best possible residential environment?

Anything else you would like to share with us?

-----End of Application-----

Please email a copy of this application to: isp@tka.net