



Main Line Classical Academy

Current Families: Application for Admission 2022-2023

NOTICE: This application is a request for admission. It becomes binding upon the parents and the school only when the applicant has been formally interviewed and accepted and a contract has been signed.

A NON-REFUNDABLE APPLICATION FEE of \$60 PER CHILD must accompany this application.

Please fill out the application completely. Please print clearly.

STUDENT

Application for Grade _____ **2021-2022** (mid-year transfer) or **2022-2023**

Name (Last, First, Middle) _____

Preferred Name _____ Date of Birth _____

Home Address (Street, City, State, Zip Code) _____ Best Parent Phone Number: _____

_____ Best Parent Email:: _____

STUDENT'S PREVIOUS SCHOOLING

Current School _____

Years Attended _____

Please list below all other prior schools, years attended, and reason for leaving:

MAIN LINE CLASSICAL ACADEMY

455 S. Roberts Rd, Bryn Mawr, PA 19010

www.mainlineclassical.org 610.525.2300

Because children are never too young to learn great things



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PARENT 1

(Mrs./Mr./Ms./Dr.) _____

Cell Phone # _____

Email _____

Applicant lives with:

Both Parents Mother Father

Who has financial responsibility for the applicant?

Both Parents Mother Father

PARENT 2

(Mrs./Mr./Ms./Dr.) _____

Cell Phone # _____

Email _____

Is any language other than English spoken at home? Yes No

If yes, what language(s)?

Parent's Marital Status:

Married Separated Divorced

Always? Most of the time? Sometimes

SIBLINGS

Sibling 1

Full Name _____

Date of Birth _____

Current Grade _____

Current School _____

Sibling 2

Full Name _____

Date of Birth _____

Current Grade _____

Current School _____

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We want to learn more about your child - his/her needs, interests, hobbies, character:

Please tell us about your child’s academic interests:

Please note any special concerns or questions to which you would like to draw our attention:

Has your child received any early intervention services, i.e. occupational, physical, speech therapy or psychological services?

Yes No

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If so, please explain:

Does your child have any chronic conditions? Yes No If so, please explain:

What books have you enjoyed reading with your child?

Does your child play a musical instrument? If yes, please tell us for how many years they have been playing and which music school they attend.

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Ideally, for how long do you plan for your child to attend MLCA? Would you like to continue through our Middle School? Our High School?

MLCA requires vaccinations to be up to date for all students. Check to mark you have understood

By signing this form, I understand that my child will be considered for the grade and year indicated. Main Line Classical Academy may contact and request information about my child from previous schools. All information I provide is accurate.

Parent's or Guardian's Signature: _____

Date: _____

Please submit your application together with a non-refundable \$60 application fee. Checks should be made payable to Main Line Classical Academy

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