

MEADOW OAKS ACADEMY

1412 S. Beltline Road

Mesquite, Texas 75149

(972) 285 - 6895

Fax (972) 285 - 7647

ADMISSIONS PROCEDURE

We welcome your interest in seeking admission for your child in Meadow Oaks Academy. Our primary purpose is to provide an excellent education that is well balanced; Accelerated academic, physical education, to enable students to become outstanding leaders in our society. We look forward to meeting with you concerning your student's academic future.

In an effort to expedite the enrollment process, listed below are the documents necessary to complete the application for K – 5th grades. Please make sure all paperwork is included before submission. The packet can not be accepted if it is incomplete.

The procedures for admittance and the required supplementary materials are outlined as follows:

_____1. The following documents are completed and returned.

- _____ Application for admission (one per child)
- _____ Copy of recent report card
- _____ Copy of Standardized Test Scores
- _____ Current Immunization Records
- _____ Copy of Birth Certificate
- _____ Automatic Payment Authorization form (EFT) (By Check or Credit Card)
- _____ Picture/Video Release
- _____ Tuition Agreement
- _____ Parent Agreement
- _____ Sugar Policy / Snack Policy
- _____ Parker Uniform
- _____ Registration fee accompanies the application \$_____
- _____ Elementary School Policy

_____2. After steps 1 is completed and received, the application and test results will be reviewed.

_____4. After the review time, families will be notified by mail, phone or interview regarding the status of official acceptance.

2011/2012 FINANCIAL POLICY

MEADOW OAKS ACADEMY

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PARENT COPY

FINANCIAL POLICY

- Monthly tuition payments are due on the 1st Monday of each month and are considered late if not received prior to 6:00pm on the 2nd day of each month. If the 1st or 2nd falls on a Sat. /Sun., payment is due the following Monday and is considered late if not received prior to 6:00 p.m. after the weekend.
- Weekly tuition payments are due each Monday of the month. Payment is considered late if made on the Tuesday following the Monday it was due.
- Semi – Monthly fees are due on the 1st and 15th and are considered late on the 2nd and 16th of each month.
- A \$25.00 late fee will be charged per invoice (per student).
- A \$35.00 NSF charge on all return checks. If we receive 2 returned checks on your students account, you will be required to pay by money order. **NO CASH, NO EXCEPTIONS.**
- Non-receipt of a statement does not release you from your obligation to make all payments in a timely manner.
- Students will not be allowed to attend class if account is not current.
- Note your ID number on your check or money order to ensure that your payment is recorded correctly.

SIGNED CONTRACT

- All signed contracts for returning students must be returned one (1) month prior to the selected billing cycle (Monthly (10) - Weekly (43) or Bi-Weekly).
- Ten (10) month contracts must be returned for returning students no later than June 1st and payments are to begin on August 1st.
- Payment-in-full contract for returning students must be returned one (1) month prior to the selected billing cycle or a 10 month contract will be filled out.

All signed contracts are to be submitted to the school office. Please submit all money due with the contract (i.e. if you do not turn in your Ten-Month contract until after the due date – you will need to submit your first monthly payment when you submit your contract.)

If you have any questions concerning this procedure please call the school office. Remember – all accounts must be current prior to your student (s) being admitted to class and to receive final report card.

STATEMENTS

The “Billing Date” on the statement reflects the date the charges are applied, not the actual date the statement was printed. Statements are usually printed and handed to the parent each week. Non-receipt of a statement does not release you from your obligation to make all payments in a timely manner.

STUDENT REMOVAL FROM CLASS

Students will not be allowed to attend class if account is over due by (1) one month for monthly paying parents. If parents pay weekly, student will not be allowed to attend class if account is over due by (2) two weeks. For Bi-monthly parents, students will not be allowed to attend class if account is over due by (1) bi-monthly payment. This will result in the generation of a list of students who will be refused admission to their respective class. As a courtesy, a removal slip will be sent home or a phone call will be place informing the parent/guardian that the account is past due and the student may not attend until the account is current nor will the report card information be released.

Important Note: *the removal slip is a courtesy only and does not excuse your student from the attendance policy in place. You should stay informed on the status of the account.*

Students sent to school in disregard of this “no attendance” policy will be kept in the school office by the administrator. An additional charge of \$15.00 per hour will be applied to your account as a “drop-in” fee until arrangements are made to pick up the student. These charges will be added to the balance that must be paid prior to re-admittance.

The student must have a return slip from the school office to present to their teacher before they will be allowed to attend class. Be sure to request this return slip, one for each student, when you make your payment.

RETURNED CHECKS

All checks must be written to Meadow Oaks Academy. Each check must include the driver’s license number, date of birth and current address of the account holder. The account holder’s name should be legible and printed on the check.

You will receive notification after a check has been presented twice for payment and still been returned for any reason. A \$35.00 fee will be added and payment will be received only by money order or cashier’s check within five (5) days of notification. A student’s account will be placed on a “**MONEY ORDER OR CASHIER’S CHECK ONLY**” status for the remainder of the school year when two checks have been returned for Non-Sufficient Funds or other non-payment reasons.

REGISTRATION FEES

All appropriate registration fees and documentation must be received with the completed application and will be processed upon receipt. Registration fees are **non-refundable**.

LATE FEES

Our afterschool program ends at 6:00 p.m. If you are late picking up your student you will be required to pay the late fee of \$5.00 per 15 minute periods, per student. ***THIS IS DUE AND PAYABLE TO THE STAFF PERSONNEL ON DUTY.*** We do not pay salaries after 6:00 p.m. If you are late the staff personnel stay late will need to be paid. ***NO ECXEPTIONS.***

PARENTAL SUPPORT STATEMENT
MEADOW OAKS ACADEMY

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PARENT COPY

VISION STATEMENT:

Our primary purpose is to provide an excellent education that is well balanced; and based on truth, academic excellence, physical education, to enable students to become outstanding leaders in our society.

Academic Excellence:

To help students know, understand, and apply what they are learning.

To help students have the truth to question, solve problems, and make wise decisions.

To help students be committed to a life time of learning.

To help students become more proficient in Mathematics, Science, Language, Reading, and other cultures.

Physical Education:

To teach students to be a good steward of their bodies.

To teach students good health habits along with physical fitness.

Outstanding Leaders:

To teach and develop character principals in their relationship with fellow students.

To teach and develop character living for a life of leadership and service to their community.

To teach and develop character principals in the home, school and every day living.

STATEMENT OF PURPOSE FOR PARENTS:

I/We will take an active role in my/our student's education. This will include communication; with school personnel, support with academic assignments, and participation in school activities and events.

I/We will encourage my/our student to comply with all school regulations and standards.

I/We give the administration and faculty discretion to employ such discipline as is deemed wise for my student.

I/We agree to accept the responsibility for any damage done by my/our student at the school.

I/We agree to abide by all Meadow Oaks Academy rules and regulations.

I/We agree to immediately notify the School Office of any changes in address, phone number, employment, or emergency number.

I/We understand that the school reserves the right to dismiss any student who does not respect its standards or cooperate in the school's academic program.

I/We agree that the home and school must work together as one in training students to achieve in their academics and in becoming a productive part of society.

PLEDGE/HONOR CODE

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PARENT COPY

PLEDGE:

AMERICAN FLAG

I pledge allegiance to the flag of the United States of America, and to the republic for which it stands; one nation, under God, indivisible, with liberty and justice for all.

TEXAS FLAG

Honor the Texas flag;

I pledge allegiance to thee,

Texas, one state under God, one and indivisible. *Texas Statutes, Government Code, Title 11, Subchapter C, Sections 3100.101-3100.104.*



Meadow Oaks Academy

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1412 S. Beltline Road Mesquite, Tx 75149

(972) 285-6895 X228 (972) 285-7647 FAX

Private PRESCHOOL 18m to k-4

Private ELEMENTARY K - 5th grades

ON SIGHT Before Care After Care Public School Pick-up

WWW.MEADOWOAKSACADEMY.COM

APPLICATION FOR ADMISSION

Academic Year _____ Grade Applying for _____ Grade Completed _____

New Student _____ Transfer Student _____ Date: _____

Applicant's Full Name _____ Last _____ First _____ Middle _____

Name usually Called _____

Applicant's Address _____ City _____ State _____ Zip _____

Applicant's Home Telephone () _____

Gender: Male Female Social Security _____

Birthday _____ Birthplace _____ Citizenship _____

Student Adopted _____ At what age _____ (MOA needs a copy of custody arrangements)

Does the student know? _____ Both Parents living together? _____

Divorced _____ Separated _____ Stepmother _____ Stepfather _____

Student's Current School () _____ Telephone # of Current School _____

Address of Current School () _____ Fax# of Current School _____

Custodial Parent or Guardian _____ Spouse _____

Occupation/Title _____ Occupation/ Title _____

Employer _____ Employer _____

() _____ Business Telephone# _____ () _____ Business Telephone # _____

Cellular Phone# _____ Cellular Phone # _____

Pager # _____ Pager # _____

E-Mail Address _____ E-Mail Address _____

S.S. Number _____ S.S. Number _____

Tx DI# _____ Tx DI# _____

AI _____ ool Student _____

BA _____ B _____ A _____

Applicant lives with (Check any that apply):

Mother Stepmother Father Stepfather

Other _____

Relationship

Who lives at home with the student?

(Please list all members that are living at home and their relationship to your student. Include name and age)

Name

Age

Grade

School/Relationship

| Name | Age | Grade | School/Relationship |
|-------|-------|-------|---------------------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

Check any that apply:

Father Deceased – Date _____

Mother deceased – Date _____

Parents Separated - Date _____

Parents Divorced - Date _____

Does the student have siblings that do not live in this home? _____

Please state why you would like to enroll this student at Meadow Oaks Academy:

Has the student ever repeated a grade or grades? _____ If yes, which one (s)? _____

Please explain _____

Has student ever had any serious discipline problems, been suspended, or expelled from school? _____

If yes, please explain _____

Has the student ever been tested or received special help for reading or learning differences? _____

If yes, please explain _____

Please list any mental, emotional, or physical challenges which may effect the student's activities or progress.

Does the student regularly require any medication? _____

If yes, please explain the types _____

Other children living in the family:

Name

Age

Grade

School

| Name | Age | Grade | School |
|-------|-------|-------|--------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

Who has legal custody of applicant? _____

Financial Responsibility for applicant will be assumed by: _____

If different from Mother and/or Father on Page 1, please provide the following information:

Name Social Security # Home Telephone# Work Telephone #

Address City State Zip

Please review Tuition and Fee Schedule and make the appropriate method of payment:

_____ Monthly _____ Weekly _____ Bi-Monthly _____ In Full

All information regarding grades, transportation, and correspondence should be sent to:

Mother Father Both Other _____

Is a language other than English spoken in your home? _____ Yes _____ No

If Yes, which language? _____

Limitations in your child's physical activities or other health concerns about which the school should be aware:

M.O.A. has my permission to use my child's picture in any, publications, advertisements in local newspapers, television, etc. Yes No

How did you hear of Meadow Oaks Academy? _____

Has your student previously attended Meadow Oaks Academy? _____ If so, what year? _____

It is understood that this application is made to the terms of admission, acceptance by School Administration, and tuition rates are in effect at the time of entrance to Meadow Oaks Academy.

Signature of Parent/Guardian _____ Date _____

Meadow Oaks Academy does not discriminate on the basis of national or ethnic origin, race, gender, color, or disability in administrating its educational policies, financial assistance program or other school programs.



B/A B A

School #:

Enrollment Date

Emergency Contacts

Please list emergency contacts and those authorized to pick up your child.

Allergies

Name

Relationship to Child

Phone Number

TX DL#

Previous Serious Illness?

Long Term Medications?

Does child have permission for :

- Field Trips Yes / No
- Swimming Yes / No
- Water Play Yes / No
- (Includes Sprinklers, Wading Pool, Water Table Play)
- Transportation Yes / No
- Evacuation Yes / No
- Video / Programs Yes / No

Pediatrician:

Pediatrician's Number:

Prior School History

Previous schools/preschool your child has attended:

In case of an emergency, I authorize Meadow Oaks Academy to seek medical care or treatment for my child at:

**Dallas Regional
1011 N. Galloway Ave.
Mesquite, TX 75149
214-320-7000**

OR Alternate Hospital:

**Children's Medical Center
1935 Motor Street
Dallas, Texas 75207
214-456-7000**

Parent/Guardian Signature:

Date: _____