

## OpenHands Academy - Application Form

### Instructions:

Please fill out this application form completely and accurately. Submit the completed form along with the required documents to [info@openhandsacademy.com](mailto:info@openhandsacademy.com) or visit our admissions office at our academy's address.

### Section 1: Student Information

- Full Name: \_\_\_\_\_
- Date of Birth (MM/DD/YYYY): \_\_\_\_\_
- Gender:  Male  Female  Other
- Home Address: \_\_\_\_\_
- City/State/ZIP Code: \_\_\_\_\_
- Country: \_\_\_\_\_
- Primary Language(s) Spoken: \_\_\_\_\_

### Section 2: Parent/Guardian Information

- Parent/Guardian Full Name: \_\_\_\_\_
- Relationship to Student: \_\_\_\_\_
- Email Address: \_\_\_\_\_
- Phone Number: \_\_\_\_\_
- Alternative Phone Number: \_\_\_\_\_
- Home Address (if different from above): \_\_\_\_\_

### Section 3: Educational Background

- Current or Previous School Name: \_\_\_\_\_
- Grade Level Completed: \_\_\_\_\_
- Does the student have an Individualized Education Plan (IEP)?  Yes  No

## OpenHands Academy - Application Form

- Special Needs/Diagnosis (if applicable): \_\_\_\_\_

- Additional Educational Support Received: \_\_\_\_\_

### Section 4: Health and Medical Information

- Does the student have any medical conditions?  Yes  No

- If yes, please specify: \_\_\_\_\_

- Does the student require any medications during school hours?  Yes  No

- If yes, please list: \_\_\_\_\_

- Emergency Contact Name: \_\_\_\_\_

- Emergency Contact Phone Number: \_\_\_\_\_

### Section 5: Program Selection

-  Early Intervention Program (Ages 3-6)

-  Primary Program (Grades 1-6)

-  Middle School Program (Grades 7-9)

-  High School Program (Grades 10-12)

### Section 6: Parent/Guardian Consent

By signing below, I confirm that the information provided is accurate to the best of my knowledge. I agree to comply with OpenHands Academy's policies and procedures and give permission for my child to participate in all school activities.

Signature of Parent/Guardian: \_\_\_\_\_

Date: \_\_\_\_\_

Required Documents Checklist:

## OpenHands Academy - Application Form

- Completed Application Form
- Birth Certificate or Proof of Age
- Medical/Diagnostic Reports
- Previous School Records (if applicable)
- Passport-Sized Photograph (2 copies)

### Submission Options:

- Email: Send the completed form and documents to [info@openhandsacademy.com](mailto:info@openhandsacademy.com).
- In Person: Visit our admissions office during working hours.