

Hargrave Military Academy

200 Military Drive; Chatham, VA 24531

Telephone: 800.432.2480 • FAX: 434.432.3129 • Email: admissions@hargrave.edu



Application for Admission - Summer 2019

Statement: I hereby make my application for the admission of the young man named herein to Hargrave Military Academy Summer Program. In doing so, I subscribe to the regulations and the spirit of discipline set forth by Hargrave Military Academy. Also, I agree to the financial terms as outlined in the current supplemental material and **I have enclosed a non-refundable \$75 application fee (\$150 International).**

I. Candidate Information

Name: _____
(First) (Middle) (Last) (Preferred Name)

Residential address: _____
(Street) (City) (Country) (State/postal code)

Social Security Number: _____ - _____ - _____ Date of birth: _____

Age: _____ Height: _____ Weight: _____ Have you ever attended Hargrave? Yes No

Which program are you applying for? Boarding Day Athletics Only

II. Academic Information

Current grade: _____ Current school: _____

School address: _____
(Street) (City) (Country) (State/Postal Code)
))

School phone number: _____

Does the candidate have special learning needs? Yes No

Please attach a copy of candidate's most recent report card to this application along with any active 504 Plan or an Individualized Educational Plan (IEP).

Questions? 1-800.432.2480 or admissions@hargrave.edu

III. Parent/Guardian Information

Relationship to candidate: Father Mother Grandparent Guardian Other _____

Name: _____

Residential address: _____

City: _____ State: _____ Country: _____ Postal Code: _____

Home: _____ Mobile: _____

Email: _____

Relationship to candidate: Father Mother Grandparent Guardian Other _____

Name: _____

Residential address: _____

City: _____ State: _____ Country: _____ Postal Code: _____

Home: _____ Mobile: _____

Email: _____

- Legal custody:
- Joint Legal custody with father and mother
 - Sole legal custody with father
 - Sole legal custody with mother
 - Legal guardian other than parents

IV. Academic and Extra Curricular Questionnaire

Please select two classes and two activities:

Class Descriptions: hargrave.edu/summer/

CIS Classes: (7 & 8th) Character & Leadership English Math STEM Projects English as a Second Language

Enrichment Classes: (9 - 12th) Advanced Reading / Creative Writing Aerodynamics / Drone Computer Science

Digital Literacy Entrepreneurship and Personal Investments Leadership & Ethics

SAT / ACT Prep STEM Projects English as a Second Language

Repeat Classes: (9 - 12th) Algebra I Common Core Math 1 / NC Math 1 English 9 English 10 English 11

* You may select the same activity twice. High Adventure is only available to boarding students. High Adventure takes the place of both activities. There is an additional charge for High Adventure and Leadership Challenge.

Questions? 1-800.432.2480 or admissions@hargrave.edu

V. Medical Information

Is the candidate currently taking any medications? Yes No

If yes, provide the information requested below:

Medication: _____ Dosage: _____

Reason: _____

Medication: _____ Dosage: _____

Reason: _____

Medication: _____ Dosage: _____

Reason: _____

Does the candidate have any **physical or emotional conditions**? Yes No

VI. Miscellaneous

How did you first learn about Hargrave Military Academy? _____

VII. Signature

(Please print the name of the parent and/or guardian who is responsible for the applicant named herein.)

Signature: _____ Date: _____

VII. Application fee & Enrollment Deposit

Pay Application Fee: I authorize Hargrave Military Academy to charge the credit card listed on the next page for the application fee (\$75 domestic; \$150 international) only.

Summer Enrollment Deposit: If the applicant names herein is accepted for enrollment, I authorize Hargrave Military Academy to charge the credit card listed on the next page for the \$750, nonrefundable enrollment deposit.

**Hargrave Military Academy is a college preparatory boarding school.
Our summer program is not a behavioral boot camp or in any way therapeutic.**

Questions? 1-800.432.2480 or admissions@hargrave.edu

----- **THIS DOCUMENT WILL BE SHREDDED.** -----

Hargrave Military Academy respects your privacy;
this entire page will be shredded after your payment is processed.
If you have any questions, please feel free to contact our business office.

IX. Credit Card Payment Information

Type of Credit Card: Visa MasterCard American Express Discover

Card Number: _____

Name on Card: _____

Expiration Date: _____ Security Code: _____

Residential address: _____

City: _____ State: _____ Country: _____ Postal Code: _____

Billing address (*if different*): _____

City: _____ State: _____ Country: _____ Postal Code: _____

Contact Phone Number: _____

Authorized Signature: _____ Date: _____

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Hargrave Military Academy admits students of any race, color, national and ethnic origin to all the rights, privileges, programs, and activities accorded or made available to its Cadets. Hargrave Military Academy does not discriminate by race, color, national and ethnic origin in administration of its educational policies, admissions policies, scholarship and loan programs, and athletic and all other school-administered programs.

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Request for Transcripts

To the Parent/Guardian: Please complete form and forward to the guidance office at the student's current school.

I hereby authorize _____
School Name

Address _____

City _____ Country _____ State/Postal Code _____ Phone _____

to release the following information on:

Student's Name _____

Parent/Guardian Signature _____

Date _____

To the Guidance Office: This student has applied to the Hargrave Summer Program.

- A COMPLETE TRANSCRIPT OF GRADES AND STANDARDIZED TESTS RESULTS
- SPECIAL EDUCATION INFORMATION (I.E., I.E.P., PSYCHOLOGICAL RECORDS, ETC.)
- DISCIPLINE RECORDS
- PRINCIPAL RECOMMENDATION
- HEALTH AND IMMUNIZATION RECORDS

Please send all applicable information listed above to:

**Hargrave Military Academy
Office of
Admissions 200
Military Drive
Chatham, Virginia 24531**

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200 Military Drive; Chatham, VA 24531

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Principal / Assistant Principal Recommendation

(Student's Name _____)

TO THE PARENT/GUARDIAN

Please give this form to the current or most recent principal or assistant principal and ask that it be completed and mailed as soon as possible to the Hargrave Military Academy, Admissions Office.

TO THE PRINCIPAL

Thank you for taking the time to complete this form. Please be assured that your evaluation and comments will be kept in strict confidence. Include a copy of the student's discipline report with your recommendation.

Please select the appropriate response:

- | | | |
|--|-----|----|
| 1. Has the student ever been suspended from your school? If yes, please list dates, circumstances, and punishment. | Yes | No |
| 2. Has the student ever had any drugs or alcohol related incidents at your schools? If yes, please explain. | Yes | No |
| 3. Has the student ever been involved in any violence related incidents? If yes, please explain. | Yes | No |
| 4. Would your student be allowed to enroll in your school based on the information you have available today? | Yes | No |
| 5. Is your school accredited? By whom? | Yes | No |

In the space provided below, please offer any additional observations or comments you think would assist us in evaluating this student's potential for being successful in a Military School boarding atmosphere.

Commendations/Concerns:

Name of School: _____ Fax: _____

Signature: _____ Date: _____

Email: _____ Phone: _____