

Upper Columbia Academy

3025 E. Spangle-Waverly Rd, Spangle, WA 99031-9799 – (509) 245-3600 – Fax: (509) 245-3643 – www.ucaa.org

Student Application

Personal Information

Name _____ Gender: M or F
Last First Middle

Address _____
Street/P.O. Box City State Zip

Home Phone (_____) _____ Cell Phone (_____) _____

E-mail Address _____ Age _____ Date of Birth ____/____/____

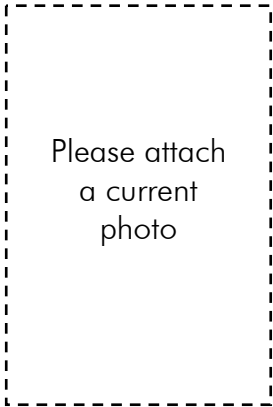
Place of Birth _____ Citizenship _____ Social Security Number _____-_____-_____

Church Affiliation _____ Have you been baptized? Yes No if so, when? _____

Home Church _____ Home Conference _____

Grade entering (circle one) 9 10 11 12 Year applying for _____ Where will you reside? Dorm Home

Personal Handicaps? Yes No If yes, please explain: _____



Family Information

Marital Status of Parents or Guardians: Married Divorced Single

	Father	Mother
Full Name:	_____	_____
Street Address:	_____	_____
City, State, Zip:	_____	_____
Home Phone:	(_____) _____	(_____) _____
Cell Phone:	(_____) _____	(_____) _____
E-mail Address:	_____	_____
Social Security No:	_____	_____
Present Employer:	_____	_____
Occupation:	_____	_____
Work Phone:	(_____) _____	(_____) _____
Church Affiliation:	_____	_____

If you are not living with your parents, or with only one parent, do you wish to have correspondence sent to more than one address? If so, please indicate the second address.

Name	Relationship
_____	_____
_____	_____

Street/P.O. Box City State Zip

Application Procedure

Thank you for your interest in Upper Columbia Academy. To complete the application process we need five items:
A) A completed application, with picture; **B)** Two character references from people not related to you: one from your pastor and one from your principal or teacher. Have them mail them directly to us; **C)** **\$25 application fee (\$100 international) which is non-refundable (please make check or money order payable to Upper Columbia Academy); **D)** A copy of your birth certificate; and **E)** A copy of your Social Security Card. Students cannot work without a Social Security Number and card. If you do not have one, apply today at your nearest Social Security Office.

**US Students: Fee waived if your application is received before June 1.

Admissions Policy

Student's Name _____

It is the policy of Upper Columbia Academy to admit students who already have a personal relationship with God and are living a Christian life-style, as well as those who are willing to experience the same. It is our policy to admit students who, by their behavior or declaration, show commitment to the principles found in Scripture. We strongly feel that there should be mutual accountability between the school, the parents and the student. This makes it a necessity for the student to be actively involved in the decision to apply to Upper Columbia Academy.

Student Contract

I have read and understand the admissions policy and it is my choice to attend Upper Columbia Academy. I am willing to participate in the religious training provided by the Seventh-Day Adventist Church. If accepted as a student, I agree to willingly obey all printed and announced regulations and contribute to a positive atmosphere. I also understand that any failure to do so may jeopardize my stay at Upper Columbia Academy.

Signature _____ Date _____

Have you been suspended or withdrawn from school within the past two years?

Yes No If so when? _____

Have you smoked within the past two years?

Yes No If so when? _____

Have you used alcohol or illegal drugs within the past two years? Yes No If so when? _____

Have you ever been arrested or convicted of a crime? Yes No If so when? _____

If you answered yes to any of the above, please explain: _____

Parental or Guardian Contract

I understand that it is the parent's responsibility to agree to support and uphold the policies and regulations of Upper Columbia Academy. My financial obligation is clearly understood, and I agree to pay my student's account each month, unless arranged otherwise in advance. I further agree that my student's account will be paid in full before transcripts are released. To the best of my knowledge the questions on the application have been answered honestly, and I will encourage the applicant to cooperate with the principles and spirit of Upper Columbia Academy.

Parent Signature _____ Date _____

Consent for Medical Treatment

I, the undersigned parent or guardian of this student, a minor, do hereby consent to any x-ray examination, immunization, anesthetic, medical or surgical diagnosis, treatment and/or hospital service that may be rendered to said minor under the general or specific instructions of a physician. It is understood that reasonable effort will be made by the attending physician to contact me so that the treatment necessary for the best interest of the student may be given.

Parent Signature _____ Date _____

Financial Information

Do you have an unpaid bill at any other school? Yes No if yes, what amount? _____

What school _____ Phone _____

Do you plan to apply for Financial Aid Funds? Yes No

Do either of your parents work for an S.D.A. organization? Yes No If yes, what organization? _____

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Recommendation Form

Recommender: Please fold, place in envelope, stamp and mail to the address on the back when finished. Thank you.

The confidential recommendation below is for:

(Student's Name) _____

How well do you know this student: Well Some Little Records Only

How many years have you known this individual? _____

Please check the adjectives that most nearly describe the applicant's standing in the areas listed below:

TRUSTWORTHINESS

- Very trustworthy
- Generally trustworthy
- Tends to be dishonest

LOYALTY TO LEADERSHIP

- Loyal and dependable
- Satisfactory
- Disloyal

COOPERATION

- Helpful
- Works well with others
- Critical

HEALTH

- Very strong and healthy
- Average health
- Weak, low vitality

CHURCH ATTENDANCE

- Attends regularly
- Rarely attends
- Never attends

PERSONAL APPEARANCE

- Well groomed
- Neat and clean
- Careless

INDUSTRIOUSNESS

- Resourceful and enthusiastic
- Average worker
- Works only under pressure
- Not interested in work

INTELLECTUAL APTITUDE

- Very quick to learn
- Learns easily
- Must study hard to learn
- Educational disabilities

CHOICE OF FRIENDS

- Chooses wisely
- Somewhat wisely
- Somewhat carelessly
- Chooses carelessly

STRENGTH OF CHARACTER

- Firm, Steady, Consistent
- Fairly Stable
- Weak, easily influenced

FINANCIAL RESPONSIBILITY

- Meets obligations promptly
- Usually meets obligations
- Does not meet obligations

CHRISTIAN EXPERIENCE

- Active
- Passive
- Disinterested
- Antagonistic

Do you recommend the applicant as a desirable student for UCA? Yes No With Reservation

Would you feel comfortable with this individual rooming with your son or daughter? Yes No

Your Name _____ Position _____

Signature _____ Date _____ Phone (____) _____

Remarks _____

UCA Student Application

Work Information

Name _____ Gender M F Birth Date ____ / ____ / ____

Upper Columbia Academy, through campus employment and industries, provides the opportunity for students to earn a portion of their school fees.

I would like to be employed at UCA I plan to have employment off campus. Please specify:

I do not plan to be work while at UCA – Note: students receiving financial aid are required to work.

Requirements for Acceptance and Employment

The following documents must be on file in the Business Office:

1. Birth Certificate or Passport: A copy of your **certified** birth certificate.
2. Social Security Number and Card: A copy of your Social Security Card.
3. Photo Identification: A copy of a photo ID (drivers license, state ID, passport, school ID)

Job Preferences

While specific jobs cannot be guaranteed, Upper Columbia Academy will endeavor to place you according to your age, skills, and experience. Students must be at least 16 years of age to work in some jobs, including industry. Please indicate your choice of work by number. (1,2,3,etc.)

_____ Reader/Teacher's Assistant _____ Food Service _____ Maintenance/Grounds _____ Janitorial
_____ Clerical (Office) _____ Tutor _____ Library _____ Industrial Arts _____ Industry

Do you desire to work in an industry when you are 16 (if you are not now)? Yes No

Qualifications

Please list any classes taken or skills acquired that would assist us in your job placement.

1. Typing Yes No If yes, how many words per minute? _____
2. Computer experience? Above average Average None Type of computer? PC MAC
3. _____
4. _____

List any conditions that would cause you to be unable to work in certain areas, (i.e. allergies, chronic illnesses, etc.)

Experience

List any employment or experience you have had that would qualify you for a specific area of work.

1. _____
2. _____
3. _____
4. _____

Interests: List any subjects or areas that you are especially interested in.

1. _____
2. _____

Educational Information

List the schools attended from the 8th grade to the current year.

Student's Name _____

8th Year _____ School _____ Phone _____

Address _____

9th Year _____ School _____ Phone _____

Address _____

10th Year _____ School _____ Phone _____

Address _____

11th Year _____ School _____ Phone _____

Address _____

List the subjects and grades you received at your previous schools. It is very important that you be as complete as possible.

8th Grade		9th Grade		10th Grade		11th Grade	
Course	Grade	Course	Grade	Course	Grade	Course	Grade

Are you enrolled in any correspondence courses? Yes No If yes, please list the school and the subjects.

School _____ Subject _____

School _____ Subject _____

Do you have any difficulty in your studies? Yes No If yes, please explain. _____

Do you desire special help in any subject? Yes No If yes, which? _____

Do you play a musical instrument? Yes No If yes, which one(s)? _____

Do you have any brothers or sisters? Yes No If yes please complete

Name _____ Year in School _____ Name _____ Year in School _____

Name _____ Year in School _____ Name _____ Year in School _____

Who actively recruited your son/daughter?
(please indicate their name)

A UCA recruiter _____

A pastor _____

A UCA student _____

A UCA alumnus _____

Other _____