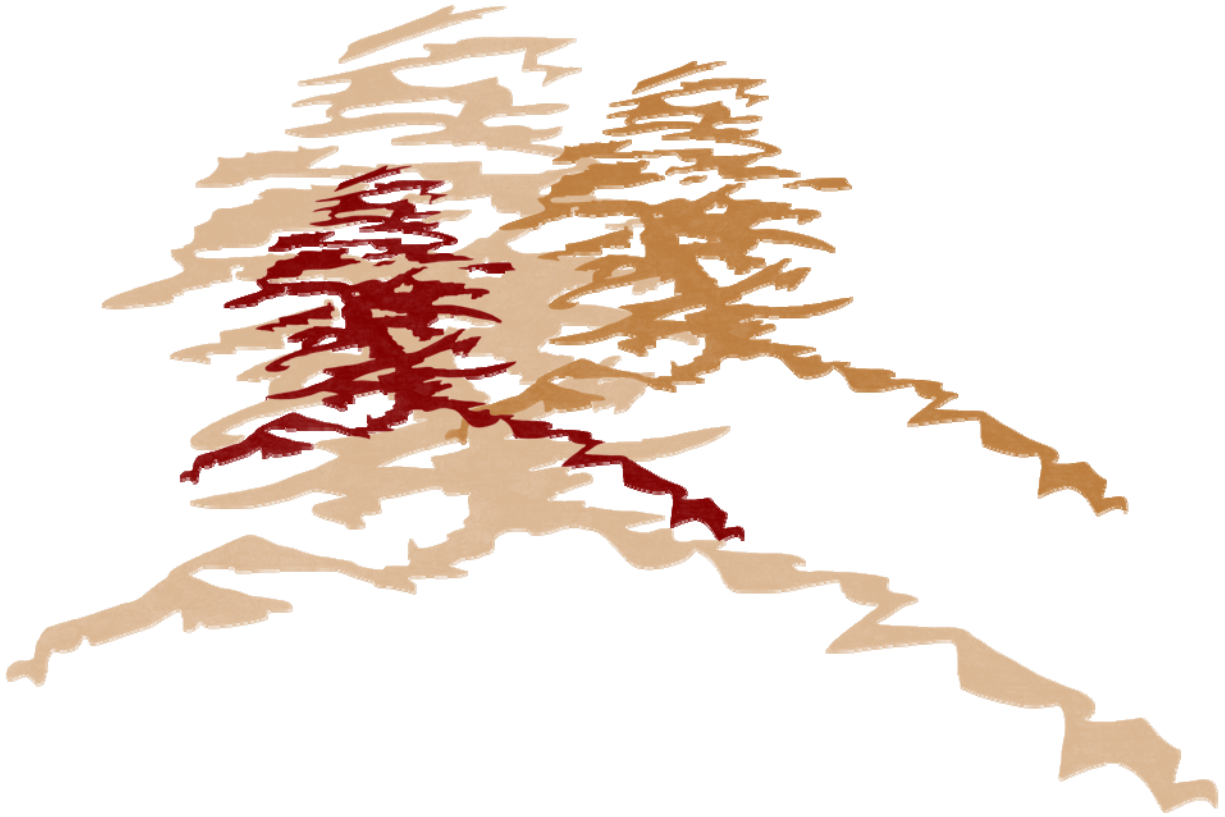


# *Cedar Ridge Academy*

A FULL-SERVICE BOARDING SCHOOL DESIGNED TO TAKE YOU FROM CREDIT RECOVERY TO COLLEGE



## ADMISSION APPLICATION FORM

# APPLICATION PROCESS CHECKLIST

Included in this application packet are all of the forms you need to apply to Cedar Ridge Academy. Please be aware that we enroll students on any date of the year and there is no specific deadline for submitting your application. However, we cannot accept or enroll applicants until these forms are submitted and the entire application process is complete. Please follow up with those whom you've asked to submit a form to ensure that they return it to us in a timely manner.

Throughout this process, keep in contact with the Dean of Admissions at 435-353-4498 ext. 117.

*Please make copies of all of your application forms before submitting them to Cedar Ridge Academy.*

—— *APPLICATION FORM*

—— *INTERVIEW*

We prefer a personal interview on our campus, but we will conduct a phone interview when needed to streamline the admission process. Please call the Dean of Admissions to schedule your interview.

—— *SCHOOL TRANSCRIPT*

Request that an official, sealed transcript be sent directly from your current or most recent school to Cedar Ridge Academy, 4270 W. 5625 N., Roosevelt, Utah 84066.

—— *STUDENT QUESTIONNAIRE*

This should be completed in the student's own handwriting, completely on the form pages, or on additional attached sheets. Do not type.

—— *PARENT QUESTIONNAIRE*

This should be completed by the student's parents or legal guardian.

—— *TEACHER RECOMMENDATIONS*

These forms are confidential and should be mailed directly to Cedar Ridge Academy from the teachers. Please provide an addressed, stamped envelope so that your teachers may submit the forms in a timely manner.

—— *FINANCIAL AID*

Please contact the Dean of Admissions.

—— *APPLICATION FEE*

This is a non-refundable fee of \$50.00 USD and must be submitted with the application.

Cedar Ridge Academy admits students of any race, religion, sexual orientation, or national or ethnic origin to all rights, privileges, programs, and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, religion, sexual orientation, or national or ethnic origin in administration of its educational policies, scholarship, athletic and other school-administered programs.

*Cedar Ridge Academy*

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# ADMISSION APPLICATION FORM

**Instructions:** Carefully and legibly complete this form and submit it to the Cedar Ridge Academy Dean of Admissions, 4270 W. 5625 N., Roosevelt, Utah 84066. Distribute the teacher recommendation forms to the appropriate individuals and provide them with an addressed, stamped envelope to ensure that they submit the forms in a timely manner. If you have any questions during this process, please contact the Dean of Admissions at 435-353-4498 ext. 117.

## Applicant Information

First Name	Middle Name	Family Name	Preferred Name/Nickname		
Home Address		City	State/Province	Country	Zip/Postal Code
<input type="checkbox"/> Male	Age	Date of Birth (Mo/Day/Year)	Country of Birth	Country of Citizenship	
<input type="checkbox"/> Female	Social Security Number (optional)		Email Address		
Home Telephone (include country, city, and area codes)			Fax Number (include country, city, and area codes)		
Month/Year of Proposed Entrance	Current Grade Level by Credits	Grade Level by Age	Approx. #Credits Behind (if any)		
Interested in Cedar Ridge Academy for: (Check all that apply)			<input type="checkbox"/> Credit Recovery	<input type="checkbox"/> Residential Life	Residential Status
			<input type="checkbox"/> College Prep.	<input type="checkbox"/> Summer Bridge Program	<input type="checkbox"/> Boarding
			<input type="checkbox"/> Day		
			<input type="checkbox"/> Summer		

## Family Information

### Parent/Guardian

Name	Occupation	Name of Company			
Home Address	City	State/Province	Country	Zip/Postal Code	
Business Address	City	State/Province	Country	Zip/Postal Code	
Business Telephone (include country, city, and area codes)	Home Telephone (include country, city, and area codes)				
Fax Number (include country, city, and area codes)	Email Address				

### Parent/Guardian

Name	Occupation	Name of Company			
Home Address	City	State/Province	Country	Zip/Postal Code	
Business Address	City	State/Province	Country	Zip/Postal Code	
Business Telephone (include country, city, and area codes)	Home Telephone (include country, city, and area codes)				
Fax Number (include country, city, and area codes)	Email Address				

*Cedar Ridge Academy General Information*

**Applicant Name:** \_\_\_\_\_

Applicant lives with:  Father  Mother  Both  Other \_\_\_\_\_

Where should enrollment materials be sent?  Father  Mother  Both  Other \_\_\_\_\_

Where should bills be sent?  Father  Mother  Both  Other \_\_\_\_\_

Check if Appropriate:  Father Deceased  Parents Divorced  Father Remarried  Living Outside U.S.  
 Mother Deceased  Parents Separated  Mother Remarried

If parents are divorced or separated, who has legal custody of the applicant? \_\_\_\_\_

Are you applying for financial aid?  Yes  No If yes, please contact Dean of Admissions, 435-353-4498, ext. 117.

First language, if other than English \_\_\_\_\_ Language spoken in the home \_\_\_\_\_

Information about brothers and sisters (use additional sheets if necessary)

Name Age School

Name Age School

Name Age School

Name Age School

**Education**

Independent

**Present School**

Private

Public

School Name \_\_\_\_\_ Dates of Attendance \_\_\_\_\_

Address City State/Province Country Zip/Postal Code

Telephone (include country, city, and area codes) \_\_\_\_\_

Fax Number (include country, city, and area codes) \_\_\_\_\_ Email Address \_\_\_\_\_

**Other schools attended in the past three years**

School Name City State/Province Dates of Attendance

School Name City State/Province Dates of Attendance

School Name City State/Province Dates of Attendance

**Signatures**

*Signature of Applicant* \_\_\_\_\_ *Date* \_\_\_\_\_

*Signature of Parent/Guardian* \_\_\_\_\_ *Date* \_\_\_\_\_

Application Fee of \$50.00 USD Enclosed



# ADMISSION APPLICATION FORM

**Instructions:** Complete this form carefully and legibly in your own handwriting and submit it to Cedar Ridge Academy along with your general information. Make a photocopy for your personal records before mailing it to Cedar Ridge Academy, 4270 W. 5625 N., Roosevelt, Utah 84066. If you have any questions about this form, please contact the Dean of Admissions at 435-353-4498 ext. 117.

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## Applicant Information

Name of Student		Current Grade	
Current School		Applying for Grade	
Home Address	Street/PO Box	City	
	State/Province	Country	Zip/Postal Code

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1. List and describe your level of interest and participation in school activities (school, volunteer groups, athletics, music, etc.).

2. List and describe your level of interest and participation in summer activities (camps, jobs, travel, etc.). What did you enjoy about your experience(s)?

3. List and describe your level of interest and participation in hobbies, activities, and groups not associated with school.

4. What has been your favorite class? Why?

*Cedar Ridge Academy Applicant Questionnaire*

*Applicant Name:* \_\_\_\_\_

5. In what kind of setting do you prefer to learn? Please describe.

6. What kinds of assignments do you enjoy?

7. What experience(s) would you like to have at school?

8. What would you like to accomplish/prepare for by attending Cedar Ridge Academy boarding school?

9. Please choose one of the following prompts and write a 250–500 word response. Use additional sheets if necessary.

- Describe a person whom you admire or who has influenced you a great deal.
- What do you want to be when you 'grow up'?
- Explain the impact of an event or activity that has created a change in your life or in your way of thinking.

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*Signature of Applicant*

*Date*



## ADMISSION APPLICATION FORM

**Instructions:** Complete this form carefully and legibly in your own handwriting and submit it to Cedar Ridge Academy along with your student's general information. Make a photocopy for your personal records before mailing it to Cedar Ridge Academy, 4270 W. 5625 N., Roosevelt, Utah 84066. If you have any questions about this form, please contact the Dean of Admissions at 435-353-4498 ext. 117.

*Applicant Name:* \_\_\_\_\_

1. What do you like about your child?

2. What are your concerns about your child?

*Cedar Ridge Academy Parent Questionnaire*

*Applicant Name:* \_\_\_\_\_

3. What do you recognize as your child's specific strengths and weaknesses?

4. What do you see as your role in your child's education?

5. What do you feel we should know in considering your child for enrollment in Cedar Ridge Academy?

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*Signature of Parent/Guardian*

*Date*





# ADMISSION APPLICATION FORM

*To the Applicant:* Please fill out the information below, sign, and then give this form to your current or most recent Principal, Head, or Counselor. Attach an addressed, stamped envelope to Cedar Ridge Academy so those filling out this form in support of your application may mail it in a timely manner. If you have any questions about this form or the admission process, please contact the Dean of Admissions at 435-353-4498 ext. 117.

## Applicant Information

Name of Student \_\_\_\_\_ Applicant to Grade \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

## To the Parent/Guardian

*Please read and sign the statement below.*

I acknowledge that I waive my right to read the confidential teacher recommendation and the school report for the student listed above. (Please have grade reports, attendance records, standardized test scores, and teacher reports/comments forwarded to Cedar Ridge Academy.)

Name of Parent or Guardian \_\_\_\_\_

Signature of Parent or Guardian \_\_\_\_\_ Date \_\_\_\_\_

## To the Principal/Head/Counselor:

This recommendation will remain confidential and will not become part of the student's permanent record. When you have completed it, please photocopy it and send it to Cedar Ridge Academy in the envelope provided by the applicant. Be sure the parent/guardian has signed the form in the space above. Feel free to use additional sheets if necessary.

Your Name \_\_\_\_\_ please print \_\_\_\_\_ Title \_\_\_\_\_

Name of School \_\_\_\_\_ Date \_\_\_\_\_

## Form Questions

How well do you know the student academically?

As a person?

Please submit these materials with this recommendation:  Recent teacher reports  Available grades or unofficial transcript  
 School profile  Any available testing

What are the first three words that come to mind to describe this student?

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

*Cedar Ridge Academy Principal/Head/Counselor Form*

**Applicant Name:** \_\_\_\_\_

What is the student's academic standing? Please explain.

Has the student ever been dismissed, suspended, placed on probation, or received other serious disciplinary sanction?     Yes     No

Has he or she withdrawn from school voluntarily for an extended period of time for reasons other than health?     Yes     No

If the answer to either or both of these questions is yes, please provide a full explanation on an additional sheet of paper.

Please place check marks at the points that represent your evaluation of the student in comparison to other students in his or her age group with whom you have worked. Cedar Ridge Academy is most appropriate for a student with average to excellent academic potential and below average or average academic achievement. If you have no fair basis for judgment, please say so.

	Excellent	Above Average	Average	Below Average	No Basis
Academic Potential					
Academic Achievement					
Intellectual Curiosity					
Effort/Determination					
Ability to Work Independently					
Organization					
Creativity					
Willingness to Take Intellectual Risks					
Concern for Others					
Honesty/Integrity					
Self-Esteem					
Maturity (relative to age)					
Responsibility					
Respect Accorded by Faculty					
Respect Accorded by Peers					
Emotional Stability					
Overall Evaluation as a Person					
Overall Evaluation as a Student					

If the student is relatively weak or strong in any areas listed above, please elaborate.

Please comment on this student's character, citizenship, and contributions to your school community.

Please add any additional information that will give us a more complete picture of the student.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State/Province \_\_\_\_\_ Country \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_

Email Address \_\_\_\_\_ Telephone (with all area codes) \_\_\_\_\_



# ADMISSION APPLICATION FORM

*To the Applicant:* Please fill out the information below, sign, and then give this form to your current or most recent Mathematics Teacher. Attach an addressed, stamped envelope to Cedar Ridge Academy so those filling out this form in support of your application may mail it in a timely manner. If you have any questions about this form or the admission process, please contact the Dean of Admissions at 435-353-4498 ext. 117.

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## Applicant Information

Name of Student	Applicant to Grade
Signature	Date

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## To the Parent/Guardian

*Please read and sign the statement below.*

I acknowledge that I waive my right to read the confidential teacher recommendation and the school report for the student listed above. (Please have grade reports, attendance records, standardized test scores, and teacher reports/comments forwarded to Cedar Ridge Academy.)

Name of Parent or Guardian	
Signature of Parent or Guardian	Date

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## To the Teacher

This recommendation will remain confidential and will not become part of the student's permanent record. When you have completed it, please photocopy it and send it to Cedar Ridge Academy in the envelope provided by the applicant. Be sure the parent/guardian has signed the form in the space above. Feel free to use additional sheets if necessary.

Your Name	please print	Title
Name of School	Date	

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## Form Questions

How well do you know the student academically? \_\_\_\_\_ As a person? \_\_\_\_\_

In what years did you teach the student? \_\_\_\_\_ How large was the class? \_\_\_\_\_

What course(s)? \_\_\_\_\_

Briefly describe your course.

Next year, what math course would be the most appropriate placement for the student?

*Cedar Ridge Academy Mathematics Teacher Form*

**Applicant Name:** \_\_\_\_\_

What are the first three words that come to mind to describe this student?

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

In which manner/environment/situation does this student prefer to learn?

What types of assignments does this student seem to prefer or avoid?

Please place check marks at the points that represent your evaluation of the student in comparison to other students in his or her age group whom you have taught. Cedar Ridge Academy is most appropriate for a student with average to excellent academic potential and below average or average academic achievement. If you have no fair basis for judgment, please say so.

	Excellent	Above Average	Average	Below Average	No Basis
Academic Potential					
Academic Achievement					
Intellectual Curiosity					
Effort/Determination					
Ability to Work Independently					
Organization					
Creativity					
Willingness to Take Intellectual Risks					
Concern for Others					
Honesty/Integrity					
Self-Esteem					
Maturity (relative to age)					
Responsibility					
Respect Accorded by Faculty					
Respect Accorded by Peers					
Emotional Stability					
Overall Evaluation as a Person					
Overall Evaluation as a Student					

If the student is relatively weak or strong in any areas listed above, please elaborate.

Please comment on this student's character, citizenship, and contributions to your school community.

Please add any additional information that will give us a more complete picture of the student.

Signature \_\_\_\_\_ Date \_\_\_\_\_ Telephone \_\_\_\_\_

Mailing Address \_\_\_\_\_ Email Address \_\_\_\_\_



## ADMISSION APPLICATION FORM

*To the Applicant:* Please fill out the information below, sign, and then give this form to your current or most recent English Teacher. Attach an addressed, stamped envelope to Cedar Ridge Academy so those filling out this form in support of your application may mail it in in a timely manner. If you have any questions about this form or the admission process, please contact the Dean of Admissions at 435-353-4498 ext. 117.

### Applicant Information

Name of Student	Applicant to Grade
Signature	Date

### To the Parent/Guardian

*Please read and sign the statement below.*

I acknowledge that I waive my right to read the confidential teacher recommendation and the school report for the student listed above. (Please have grade reports, attendance records, standardized test scores, and teacher reports/comments forwarded to Cedar Ridge Academy.)

Name of Parent or Guardian	
Signature of Parent or Guardian	Date

### To the Teacher:

This recommendation will remain confidential and will not become part of the student's permanent record. When you have completed it, please photocopy it and send it to Cedar Ridge Academy in the envelope provided by the applicant. Be sure the parent/guardian has signed the form in the space above. Feel free to use additional sheets if necessary.

Your Name	please print	Title
Name of School		Date

### Form Questions

How well do you know the student academically? \_\_\_\_\_ As a person? \_\_\_\_\_

In what years did you teach the student? \_\_\_\_\_ How large was the class? \_\_\_\_\_

What course(s)? \_\_\_\_\_

Briefly describe your course.

How accurately does the student read and understand what he or she has read?

*Cedar Ridge Academy English Teacher Form*

**Applicant Name:** \_\_\_\_\_

How well does the student write in comparison with other students whom you have taught? Please be specific about areas of strength and weakness.

How well does the student accept advice or criticism?

In which manner/environment/situation does this student prefer to learn?

What types of assignments does this student seem to prefer or avoid?

Please place check marks at the points that represent your evaluation of the student in comparison to other students in his or her age group whom you have taught. Cedar Ridge Academy is most appropriate for a student with average to excellent academic potential and below average or average academic achievement. If you have no fair basis for judgment, please say so.

	Excellent	Above Average	Average	Below Average	No Basis
Academic Potential					
Academic Achievement					
Intellectual Curiosity					
Effort/Determination					
Ability to Work Independently					
Organization					
Creativity					
Willingness to Take Intellectual Risks					
Concern for Others					
Honesty/Integrity					
Self-Esteem					
Maturity (relative to age)					
Responsibility					
Respect Accorded by Faculty					
Respect Accorded by Peers					
Emotional Stability					
Overall Evaluation as a Person					
Overall Evaluation as a Student					

If the student is relatively weak or strong in any areas listed above, please elaborate.

Please comment on anything else you feel would help us evaluate this student as a candidate for Cedar Ridge Academy.

Signature \_\_\_\_\_ Date \_\_\_\_\_ Telephone \_\_\_\_\_

Mailing Address \_\_\_\_\_ Email Address \_\_\_\_\_

## DEAN OF ADMISSIONS



CEDAR RIDGE ACADEMY  
4270 WEST 5625 NORTH  
ROOSEVELT, UTAH 84066

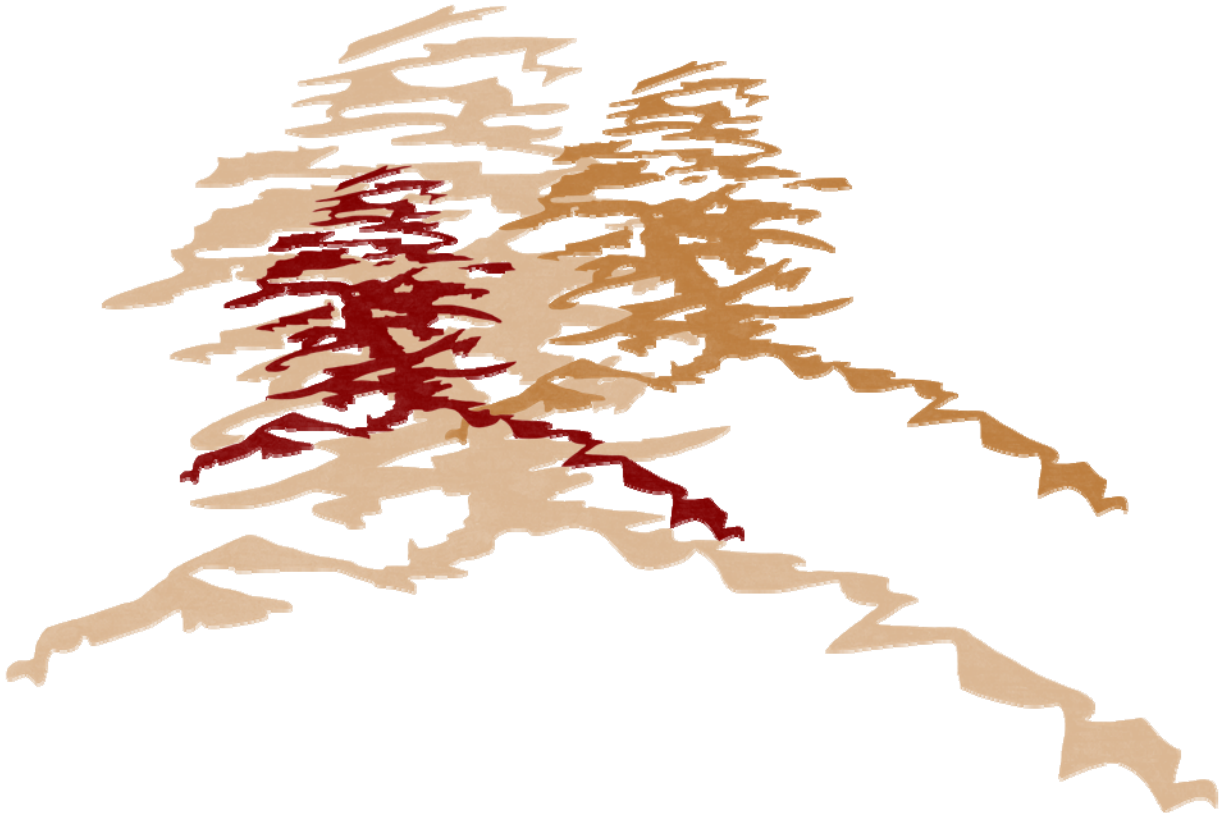
PH. 435-353-4498 EXT. 117

FAX 435-353-4898

WWW.CEDARRIDGEACADEMY.NET

Cedar Ridge Academy admits students of any race, religion, sexual orientation, or national or ethnic origin to all rights, privileges, programs, and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, religion, sexual orientation, or national or ethnic origin in administration of its educational policies, scholarship, athletic and other school-administered programs.

*Accelerate • Achieve • Actualize*



*Accelerate • Achieve • Actualize*

*Cedar Ridge Academy*

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