# Application for Admissions



500 Baptist Dr., Chester, VA 23836 Office: (804)200-8662 Fax: (703)893-9001 admission@reagansecondary.us

## **APPLICATION PROCEDURE**

- 1. Contact the Admissions Office at (804) 200-8662, if there are any pre-application question or to request additional information.
- 2. Complete the application (online or paper) and submit the application fee \$100. The application will not be processed by the Admissions Office until the application fee is paid.
- 3. Attach the required transcripts to the application.

For current eighth grade students a copy of each of the following:

- Attendance records for 6th, 7th, and 8th grade
- Transcript grades for 6th and 7th grade
- Most recent grade report for 8th grade

For current high school students a copy of each of the following:

- Attendance records for the past three years (including the current year)
- Transcript grades for the past two school years (not including the current year)
- Most recent grade report for current academic year
- 4. Submit the Parent Cooperation Agreement.
- 5. Submission of the following items is optional, but may improve the standing of the application: English/Math teacher recommendation, personal recommendation, additional materials for consideration.

### **International Admissions**

International students interested in studying at RRSS must follow a modified application process. This process is designed to ensure that all incoming RRSS students are a good fit at RRSS, and that all the proper international requirements are fulfilled. All new applicants pay an application fee of \$100. International students must pay tuition costs in advance of attendance. Additional English-support tutoring fees may also be required. Upon acceptance, a \$200 non-refundable fee is due prior to the issuing of an I-20 visa. Parents will also have to provide evidence of financial support for the first year of study. International students must comply with our Health Insurance Requirements for International Students.

## **IMPORTANT NOTES:**

- A check or money order in the amount of \$100 payable to RONALD REAGAN SECONDARY SCHOOL must accompany this application.
- · Paper or Online Applications received without the Application fee will not be reviewed.
- Applications will not be considered complete until all Academic Records have been received by the Admissions Office.

# Complete and return this application with fee to:

Ronald Reagan Secondary School, Office of Admissions 8227 Old Courthouse Road, Suite 304, Vienna, VA 20128

### PLEASE TYPE OR PRINT ALL INFORMATION.

Student's Information:

Last Name	First Name			Middle Name	
				Gender Male Female	
Preferred Name	SSN (if app	olicable)			
Date of Birth (MM/DD/YY) City/State	of Birth	Studen	t's Email Address		
Grade Student Applying For (Check one):	9th 10th	]11th	grade applicants are o	only considered if new to metro region.)	
Current Grade Name of Cur	rent School	School Phone	Number	School Fax Number	
Street Address	City		State	Zip Code	
Applicant's Primary Residence:					
Street Address	City		State	Zip Code	
Applicant lives with: Please check one:  Mother & Father  Mother and Stepfather  Legal Guardian:  Please specify name and relationship	nd Stepmother .				
Home Phone Cell F	hone				
Primary language spoken at home:					
<b>Relative(s)</b> who have attended Ronald Re Name	eagan Secondary S Relationship	chool	Year of G	raduation	
Siblings					
Name	Age	Grade	Current So	chool	

# **Custodial Parent/Guardian Information: Mother/Female Guardian**

ast Name	t Name First Name		Middle Name	Preferred Title (Ms., Mrs. Dr., etc.)				
Street Address		City		State	Zip Code			
Home Email Address		Home P	hone		Cell Phone			
ccupation		Employer						
Vork Email Address	rk Email Address			Work Phone				
Custodial Parent/Guardian Inf	ormation: Father/Male G	uardian						
ast Name	First Name		Middle Name		Preferred Title (Ms., Mrs. Dr., etc			
Street Address		City		State	Zip Code			
Home Email Address	e Email Address		hone	Cell Phone				
Occupation	ation		Employer					
Work Email Address	mail Address			Work Phone				
Non-Custodial Parent Informat	tion (if applicable)  First Name		 Middle Name		Preferred Title			
Last indille	HISTNAME		Wildale Name		(Ms., Mrs. Dr., etc			
Street Address		City		State	Zip Code			
ome Email Address		Home P	hone	Cell Phone				
Occupation	upation			Employer				
Work Email Address	 Work Pr	Work Phone						

parent, etc):	School Fair Direct M	ailing Scho	ool visits, advertising, current student/ ol Visit rtisement					
Please indicate the co-curricular ac program.)	tivities in which you have an	interest: (Student governm	nent, clubs, athletics, and Fine Arts					
Please indicate the co-curricular ac	tivities in which you currently	y participate. Include any h	nonors or awards that you have earned.					
Signature of Applicant (Required)		Date						
Signature of Parent/Guardian (Requ	uired)	Relationshi	p to Applicant					
FOR OFFICAL USE ONLY								
Student ID Number Application Fee Registration Received Data Processing	Number	Initials	Date					

### POLICY OF NON-DISCRIMINATION

Ronald Reagan Secondary School admits students of any race, color, national and ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students. Ronald Reagan Secondary School does not discriminate on the basis of race, color, national and ethnic origin in the administration of education policies, admissions policies, scholarship and loan programs, and athletic or other school administered programs. To the extent required by Title IX, Ronald Reagan Secondary School does not discrimanate against any applicant, employee or student because of gender.