



## **ADMISSIONS PROCESS**

Thank you for submitting your application to The Davis Academy. This document acknowledges receipt of your application and provides important information regarding the next steps of the admissions process.

### **Supplemental Admissions Forms:**

Please complete and sign the Authorization for Release of Educational Records Form and the consent statement at the top of the Confidential Teacher Recommendation Form. The current school must mail your child's school records and Teacher Recommendation Form to The Davis Academy. It cannot be hand-carried by the parent or student. In order to get a valid recommendation on your child, please do not submit the recommendation form to your child's teacher prior to December 1.

### **Admissions Screenings:**

Students applying for grades 1-8 will be asked to spend a school day at The Davis Academy. Applicants for grades 1-5 will participate in an educational evaluation during their visit. The Admissions Office will schedule appointments for these assessments.

The screenings and/or educational evaluations completed on applicant are for admission purposes only and cannot be interpreted independently of the teacher recommendations and school records. Therefore, this information will not be reviewed with applicants or their families, or shared with anyone other than members of the Admissions Committee. Disabled candidates should identify themselves early in the application process so that accommodations can be arranged, if feasible, in admission testing procedures. Auxiliary aids and services will be made available on request.

Notification of acceptance for admission by the Admissions Committee will be mailed on **March 30**. In order to have your child's application reviewed in time for our admissions decisions, all applications and supporting materials must be in our office **by February 15**.

### **The Davis Academy Tuition Rates (2018-19)**

<b><u>Grade</u></b>	<b><u>Tuition</u></b>
Mechina	\$18,503
Kindergarten	\$19,514
1-5	\$22,757
6-8	\$24,909

Supply fee and dining program are included in the tuition total. Supply fee includes books and other consumable text materials, school supplies, cultural activities, local field trips, and student accident insurance. Fees for overnight field trips are not included in the supply fee.

There are three payment plans available, a One Payment Plan, Two Payment Plan, and Nine Payment Plan. A payment option must be chosen at the time an enrollment contract is signed. The deposit fee of \$1,800 is due when the enrollment contract is accepted. There is a sibling discount of \$300 for the third child enrolled at Davis.

### **Tuition Assistance**

Tuition assistance may be available for families with special financial needs. FACTS: Grant & Aid Assessment, an impartial service located in Lincoln, Nebraska, validates assistance for each family. Once FACTS makes its determination, The Davis Academy makes every effort to meet the demonstrated need. Please apply to FACTS online at [www.factstuitionaid.com](http://www.factstuitionaid.com). All your supporting documents must be mailed to FACTS at P.O. Box 5688 Lincoln, Nebraska 68505 no later than February 15. Also, families should provide FACTS with a letter stating the reasons and circumstances of your request along with copies of all W-2 and 1099 forms, form 1040 and supporting schedules for the 2018 tax year. Families who are applying for tuition assistance will need to file an early tax return in order to meet FACTS deadline.

### **The Davis Fund Annual Giving Campaign**

Tuition at The Davis Academy is kept below the full cost of education to make a day school education a reality for as many students as possible. Each year, parents are asked to make a meaningful, tax-deductible contribution to the school's Davis Fund. It is expected that 100% of our families will participate at a suggested minimum gift of \$500 or more. Those giving \$2500 or more are recognized as part of the school's Geshet Society. Gifts to The Davis Fund are unrestricted and enhance the school's annual operating budget. Every student and member of our faculty and staff benefit from our annual fundraising campaign. Your charitable contribution supports professional development for our teachers, maintenance of our campus, expansion of enrichment programs, the arts, athletic programs and annual recurring expenses.



## **AUTHORIZATION FOR INFORMATION & RELEASE OF EDUCATIONAL RECORDS**

***Parents/Legal Guardians:*** Please complete this form and forward it to your child's current school. The school must send the records directly to The Davis Academy.

I give permission for

\_\_\_\_\_

Current School

\_\_\_\_\_

Address/ Phone Number

\_\_\_\_\_

City/ State/ Zip/County

to release complete school records, including report cards, standardized/other test results, and discipline records regarding my child,

\_\_\_\_\_

Student's Name

to The Davis Academy.

I also authorize current school to send all final report cards and test scores at the end of the year to The Davis Academy immediately upon availability.

Please forward the records at your earliest convenience to

**The Davis Academy  
Director of Admissions  
8105 Roberts Drive  
Atlanta, Georgia 30350-4120**

\_\_\_\_\_

Parent Signature

\_\_\_\_\_

Date

## The Alfred and Adele Davis Academy

### Confidential Teacher Recommendation Form for First through Third Grade

**To Parent(s) of Applicant:**

To Parent/Legal Guardian: Please print or type this section and deliver this form to your child's teacher. The evaluator should mail these forms directly to The Davis Academy Admission Office. By submitting this evaluation form and in consideration of having this evaluation and your application considered by The Davis Academy, you hereby release its employees and representatives, the evaluator and the evaluator's employer from any and all claims and liability that may arise from the providing, obtaining, or using the form and the substance of the information provided by the evaluator. *All information provided on the attached evaluation form will be held in strictest confidence and will not be shared with students, parents, or guardians. This evaluation will remain confidential and not become part of the student's permanent academic record.*

Name of Applicant: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Parent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

This child is applying for admission to The Davis Academy. We would appreciate your observations about the areas listed below. Your candid estimate of the applicant will be of invaluable assistance to our Admissions Committee and will remain confidential.

AREAS	5	4	3	2	1	YOUR RATING
<b>Academic Ability</b>	Superior	Fine Student	Capable of Good Work	Marginal Ability	Poor Academic Risk	
<b>Independent Work and Study Habits</b>	Excellent	Well Above Average	Average	Weak	Unsatisfactory	
<b>Conduct and Integrity</b>	Outstanding in Every Respect	Generally Excellent	Good or Acceptable	Weak or Questionable	Poor	
<b>Attentiveness to Tasks</b>	Always	Almost Always	Usually	Mild Attention Problem	Severe Attention Problem	
<b>Motivation</b>	Excellent	Well Above Average	Average	Occasionally Weak	Poor	
<b>Attitude</b>	Outstanding	Generally Excellent	Satisfactory	Less than Satisfactory	Poor	
<b>Social Skills</b>	Positive Leadership	Cooperates with Peers	Average Skills	Little Interaction	Isolated	
<b>Maturity and Stability</b>	Excellent	Well Above Average	Average for Age	Below Expected Level	Poor	
<b>Recommendation as a Student</b>	Outstanding	Excellent	Good	Fair	Poor	

**In the following section please mark a check next to the appropriate responses:**

1. Does the candidate have any outstanding abilities or deficiencies not covered by the above categories? YES\_\_\_\_ NO\_\_\_\_

If yes, please explain: \_\_\_\_\_

2. Does the candidate reproduce sounds correctly and without difficulty? YES\_\_\_\_ NO\_\_\_\_

3. Has the candidate mastered phonics? YES\_\_\_\_ NO\_\_\_\_

4. Does the candidate read? YES\_\_\_\_ NO\_\_\_\_

5. Has the child been exposed to any language other than English? YES\_\_\_\_ NO\_\_\_\_

If yes, please explain: \_\_\_\_\_

6. Do you feel the candidate would have difficulty learning another language? YES\_\_\_\_ NO\_\_\_\_

If yes, please explain: \_\_\_\_\_

7. How do you consider the candidate's parents? Very cooperative \_\_\_\_\_ Usually cooperative \_\_\_\_\_  
Rarely cooperative \_\_\_\_\_ Follows through with suggestions \_\_\_\_\_ Has realistic picture of their child's ability \_\_\_\_\_  
Never had any communication with parents \_\_\_\_\_

8. Please indicate whether the candidate has ever been recommended for any of the following programs:

Speech \_\_\_\_\_ Hearing \_\_\_\_\_ Impaired Vision \_\_\_\_\_ Gifted \_\_\_\_\_ Learning Disabled \_\_\_\_\_

If yes, in which program did/does the child participate? \_\_\_\_\_

9. Has the candidate been given an educational evaluation by a diagnostician or psychologist? YES \_\_\_\_\_ NO \_\_\_\_\_

If yes, when? \_\_\_\_\_ For what purpose? \_\_\_\_\_

10. Does the candidate have any significant limitations that may affect his/her academic progress? YES \_\_\_\_\_ NO \_\_\_\_\_

If yes, please explain: \_\_\_\_\_

11. Is the candidate in good standing and eligible to remain if you offer the next grade level? YES \_\_\_\_\_ NO \_\_\_\_\_

12. Has any disciplinary action been taken regarding this student? YES \_\_\_\_\_ NO \_\_\_\_\_

If yes, please explain: \_\_\_\_\_

13. How would you rate this candidate overall?

Superior \_\_\_\_\_ Outstanding \_\_\_\_\_ Above Average \_\_\_\_\_ Fair \_\_\_\_\_ Weak \_\_\_\_\_ Unable to Rate \_\_\_\_\_

14. How would you rank the candidate's performance in your class? Above Level \_\_\_\_\_ On Level \_\_\_\_\_ Below Level \_\_\_\_\_

**PLEASE COMMENT ON THE FOLLOWING:** Attach an additional sheet if necessary.

Areas in which the student excels: \_\_\_\_\_  
\_\_\_\_\_

Areas in which the student has the greatest needs: \_\_\_\_\_  
\_\_\_\_\_

What strategies have you used to support the child's needs? \_\_\_\_\_  
\_\_\_\_\_

Please write any additional comments about this student that would be helpful to us, as well as the student. Please give your estimate of the candidate's possible success in and contribution to The Davis Academy. You are encouraged to comment candidly on those characteristics of the candidate that seem to you to distinguish him or her from other students with whom you have been associated. Illustrate by example when appropriate:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Thank you for your time and effort in evaluating this student and assisting both the candidate and The Davis Academy. Please be assured that your information will remain confidential. After completion of this form, please submit to the Director of Admissions in one of the following ways:

**Email: [admissions@davisacademy.org](mailto:admissions@davisacademy.org)**

**Fax: 770-671-8838**

**Mail: Director of Admissions, The Davis Academy, 8105 Roberts Drive, Atlanta, GA 30350**

Teacher's Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
Email: \_\_\_\_\_

In what capacity have you known the applicant? \_\_\_\_\_ Length of acquaintance: \_\_\_\_\_

School Address: \_\_\_\_\_

Teacher's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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