



INHOME Academy

Application Form

INHOME Academy believes in giving children and youth the very best in true education. The object of true education is to get to know God. This knowledge leads to eternal life.

Name of Student: _____
Last Name First Name MI

Date of Birth: _____, _____
Month Day Year

Grade Level: K _____ 3 _____ 6 _____ 9 _____
(Check one*) 1 _____ 4 _____ 7 _____ 10 _____
2 _____ 5 _____ 8 _____ 11 _____
12 _____

* Please note that for some classes (i.e., Math and Language Arts), the instructor may administer an assessment to determine whether the student is ready to work at that grade level.



We throughout the school year

Our school year starts on **Tuesday, September 2, 2025**

School will be closed on U.S. federal holidays, fall, winter, and spring breaks.

Tuition: \$200.00 per month

Discounts

- 50% discount per additional child in same family
- 10% savings by paying annually (full amount by September 30th)

Contact Information:

Parent/Guardian Name: _____ Cell Phone: _____

Home Phone: _____ Email Address: _____

Address: _____

Parent/Guardian Name: _____ Cell Phone: _____

Home Phone: _____ Email Address: _____

Address: _____

Emergency Contact Name: _____ Cell Phone: _____

Home Phone: _____ Email Address: _____

Address: _____

Student and Parental Agreement

Please read our school policies carefully and sign:

- I agree to treat my teachers and classmates with respect, love, and kindness; I expect to receive the same respect, love, and kindness.
- I agree to complete and submit my assignments and homework in a timely fashion.
- I agree to be present and on time for my classes, recognizing the importance of faithful and punctual attendance to my academic success.
- I agree to avoid unnecessary upheaval to the learning process caused by habitual tardiness/absences.
- I agree to find a relatively quiet environment where I can participate in online class discussions without distractions or disrupting noise. I will not split my attention with games during class, but I will give my full attention to my teacher during classes.
- I agree to cooperate with my teachers and with the learning process.
- I understand that deliberately causing or threatening to cause physical or emotional harm to another student may result in my dismissal.
- I agree to refrain from name-calling, harassment, and bullying in any form; when I attend a class on-site, I will keep my hands and feet to myself.
- I will not make false accusations about my fellow students or teachers; I understand that habitually lying about others may result in my dismissal.
- I agree to respect school property and the property of others while attending class onsite or using school materials such as books; I understand that vandalization and theft will not be tolerated.
- I agree to dress modestly, with undergarments covered; I will dress appropriately (not in pajamas) for my online classes.
- I agree to check with and to ask permission from the teacher before going somewhere unsupervised, when attending class onsite.
- I agree to not share my food when attending class onsite without permission from my teacher, since this may result in harm to another student.
- I agree to stay home when sick, especially if a fever is present, to avoid spreading infection.
- I agree to avoid familiarity (no kissing, etc.) and to not pursue romantic relationships with other students at INHOME Academy due to my young age.

- I understand that use of tobacco, non-medical drugs/narcotics, marijuana, and/or alcohol is not permitted at INHOMe Academy and may result in dismissal.
- I will uphold Christian standards in my department and speech (reverence for the name of God, no profanity/swearing, etc.) while I attend INHOMe Academy.

Student signature: _____ Parent signature: _____

Pick-up authorization (in case of on-site classes and field trips):

The following people are authorized to pick up this student:

Name: _____

Phone: _____ Relationship to child: _____

Name: _____

Phone: _____ Relationship to child: _____

Please call, then follow-up with written confirmation (text/email), to authorize someone new to pick up your child. ***Be sure to sign the student in or out*** with a teacher or administrator.

Medical and Special Needs

Has your child been diagnosed with any special medical conditions about which we should know (ADHD, learning or physical disabilities, asthma, peanut or other food allergy, etc.)? If so, please specify.

_____.

If your child has been diagnosed with asthma or food allergy, if necessary, please provide the appropriate medicine with your child while they attend onsite classes, and let the instructor know if precautions should be taken.

Has an IEP been created for your child?

_____.

If you have a copy of an IEP that has been created for your child, please submit it with your application.

Please tell us about your student. The first section can be filled out by the parent; the second section can be filled out by the student.

PARENT

How would you describe your student?

What are the major hobbies / interests of your student?

What is the language spoken at home? _____.

With whom does the child reside? _____

Who else lives in the home (siblings, extended family members)?

Does the child/family follow a special diet? If so, please explain, so we can honor those needs or preferences when appropriate.

Is the child baptized? ____ Is the child part of a church family? If so, what is your religious preference?

Does the family have special family customs or cultural traditions that you would like to share?

STUDENT

How would you describe yourself?

What are your hobbies / interests?

Recommendation forms (2) – for new students:

Remember to submit two recommendation forms, which should be from someone who is well acquainted with your child. The forms can be filled out by your pastor, church officer, elder, principal, treasurer, or teacher. You can then have the individuals recommending your student send the forms to us via email or to our mailing address below.

Has your child ever been suspended? If so, what was the nature of the offence? _____

Has your child ever been expelled? If so, what was the nature of the offence? _____

Please submit your completed enrollment package

- application form
- two recommendation forms (new students only)
- parental agreement
- report card (most recent)
- checks / money orders, made payable to INHOM

to the following address:

**2058 County Road 88
Fort Payne, AL 35968**

The enrollment package can also be emailed to us via admin@inhomeacademy.org. Please call us at 256-384-1777 prior to emailing the enrollment package or for any questions you may have.

Thank you for entrusting your child to us. Please keep us in prayer as we continue by the grace of God to educate head, heart, and hand for today, tomorrow, and eternity.