



Admissions Application

Educating. Inspiring. Transforming.

admissions overview

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Application for Admission
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Student Statement
Core Subject Teacher Recommendation
Guidance Counselor/Teacher Recommendation
Most recent Federal Income Tax Return
(Form 1040 or equivalent)
Most recent W-2 Form(s)

Thank you for your interest in Serviam Girls Academy. Applications are now being accepted for the fifth and sixth grade classes. Serviam Girls Academy (SGA) is a private school for low-income girls. In a faith-based environment, SGA provides rigorous academic curriculum with high behavior expectations. Students who are accepted attend on full scholarship with the exception of a \$200 yearly parent fee. SGA prepares students to attend the area's finest college preparatory high schools by **educating**, **inspiring**, and ultimately **transforming** them into Delaware's next generation of women leaders. The school does not discriminate on the basis of race, gender, color, religion, origin, ancestry, physical disability, or sexual orientation.

Educating – In order to maximize your daughter's educational potential, SGA provides small class size, an extended school day, and an extended school year with a mandatory, month-long summer program.

Inspiring – Serviam Girls Academy students are exposed daily to enrichment activities such as art, music, life skills, technology, and sports. Through religion class and daily prayer, students are inspired by Christian values.

Transforming –By living the Serviam values of community, respect, responsibility, integrity, service, and pride, Serviam students can transform themselves, their families, and their communities.

Our primary goal for admission is to offer enrollment to students who will thrive at Serviam Girls Academy. In considering an application, the Admissions Committee looks at a variety of factors. Foremost is the ability and desire of the applicant and his or her family to support the mission and philosophy of the school. Other factors include, but are not limited to, a student's academic transcripts, teacher evaluations, standardized test scores, personal interests and talents, and qualities of character, motivation and attitude. We also consider the school's and the family's mutual understanding of the educational goals for the applicant.

The Admissions Committee's desire is to find the right match between the applicant and the school. When the match between the school, a student, and a student's family is right, the school becomes a vital extension of the home experience and a partner in the growth of the student as well as the family. All factors being equal, the Admissions Committee gives special consideration to applicants who have an affiliation with the school (e.g., applicants who are siblings of current or prior students, who have previously attended the school, or who are children or step-children of graduates or faculty of the school). If a class is full, we maintain a waiting pool for qualified applicants. The school is not always able to meet the needs of every applicant. In some cases, the Admissions Committee may conclude the child would be better served in a different educational setting than Serviam Girls Academy offers. We welcome your application and invite you to call the Director of Admissions at 302.651.9700 if you have any questions about our admissions policy or application procedures.

application procedure

As part of the admissions process, the school requires specific documents to assist in the selection of students. The school cannot make enrollment decisions until all documents have been received. Below is an admissions checklist. We accept applications on a rolling basis for the following school year. Please be certain that all required steps are taken to ensure that documents are completed and sent to the Admissions Office promptly.

Serviam's tuition is \$16,000 a year. Students who are accepted attend on full scholarship with the exception of a \$200 yearly parent fee.

Once all documents have been received an Admissions representative will contact you to set up your admissions interview. **Both** parent and student must be present for the interview.

Application for Admission Complete and submit form. Applications may be submitted by mail (14 Halcyon Drive New Castle, DE 19720; by fax (302.651.9703); or by dropping it off to the school's main office.

Applicant Photo *Optional* Please include a photo of the applicant with the application form.

Parent Statement Complete and submit form as soon as possible.

Applicant Response Complete and submit form by application deadline.

Core Teacher Recommendation Form: Give one Core Teacher Recommendation form with an envelope to current teacher (you will need to provide a stamp for enclosed return envelope).

Guidance Counselor/Teacher Recommendation Form: Give one Guidance Counselor recommendation form with an envelope to current counselor/teacher (you will need to provide a stamp for enclosed return envelope).

Completed Information Release Form: This form allows us to receive your daughter's records from her current school.

Income Eligibility: Since families must qualify for free or reduced lunch through the National School Lunch Program, there are income eligibility requirements to attend Serviam Girls Academy. Therefore your application must include copies of your **most recent Federal Income Tax Return** (Form 1040 or equivalent) and **W-2 form(s)** for all persons living in the household. If you do not file tax returns, you must submit an authorized letter or form from a state or federal agency stating your sources and amounts of income aid. *We will not admit students to the school without current family income information.*

Visit Following the receipt of the complete admissions application, the Director of Admissions will contact you in order to schedule your parent & student interview. Tours are conducted following interviews. If you would like to visit prior to submitting your application stop by anytime during the day on Tuesdays for Touring Tuesdays Informational Tours OR call to set up a tour date.

If you have any questions about the application procedures, please do not hesitate to contact the Director of Admissions at 302.651.9700. **Admission notification** is on a rolling basis and will be at least 4-6 weeks after parent and student interview depending on the time of year.

application for admission

Date _____

APPLICANT INFORMATION (Please print)

Last Name _____ First Name _____ M.I. _____

Age _____ Date of Birth _____ Grade applying for _____

Current School _____ Grade _____

Has the student had any significant academic difficulties? Yes No If so, please explain _____

Are there any special circumstances in your child's life of which you would like us to be aware? _____

CONTACT INFORMATION

Parent/Guardian Name _____ Relationship to student: _____

Mailing Address _____

Street Address _____

Employer _____

Position _____

Home Phone _____ Business Phone _____

Cell Phone _____ Email Address _____

Parent/ Guardian Name _____ Relationship to student: _____

Mailing Address _____

Street Address _____

Employer _____

Position _____

Home Phone _____ Business Phone _____

Cell Phone _____ Email Address _____

If parents are separated or divorced, with whom does the applicant reside? _____

Sibling Name _____ Date of Birth _____

Sibling Name _____ Date of Birth _____

Sibling Name _____ Date of Birth _____

Parent/Guardian Signature _____

Additional Information

Please check all that apply:

Asian _____ Black (Non-Hispanic) _____ Hispanic _____ Native American _____

White (Non-Hispanic) _____ Other: _____

Primary Language(s) spoken at home:

Religious Affiliation:

How did you hear about SGA?

Does the student have access to a computer at home? Yes _____ No _____

Please note: You must submit copies of your most recent Federal Income Tax Return (Form 1040 or equivalent) and W-2 forms for all persons living in the household with this application. If you do not file a tax return, you must submit an official letter or form from a federal or state agency stating the source and amount of your income/aid. Special circumstances may be explained on a separate sheet of paper.

Annual Family Income: _____ Number of Dependents: _____

Does the student qualify for the National School Lunch Program (for free or reduced school lunch)? Yes _____ No _____

Policy of Non-Discrimination

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

I/We understand that Serviam Girls Academy offers an academically challenging program of studies with a rigorous code of conduct, and that the participation and support of parents or guardians (including arranging transportation and attending parent/teacher report card conferences) are required for the success of the program.

I/We understand that parent(s)/guardian(s) are required to pay a minimal yearly fee and to support the school program through volunteer support activities. A description of the volunteer requirements will be detailed during the interview process. I/We further understand that the school will readmit each year only those students whose record of academic progress and of personal behavior is satisfactory, and whose parent(s)/guardian(s) have demonstrated their commitment to the goals of the school.

I/We affirm that the above information is true. Omissions or making false statements will result in this application being voided.

Parent/Guardian Signature: _____ Date: _____

parent/guardian statement

Thank you for your interest in Serviam Girls Academy. We consider parents/guardians to be an integral part of a child's education. Your description of your child will help us understand her better.

Please use an additional sheet of paper if necessary.

1. Describe your child, including strengths and weaknesses, motivation, and needs.

2. Describe your child's previous school experiences. What were the positive aspects? What were the difficulties? How does your child's academic record reflect his/her efforts?

3. Describe the ways in which you support the education of your child at home.

4. What are your short-range and long-range goals for your child's education?

5. Why would you like your child to attend Serviam Girls Academy?

When making admission decisions, we look at four major areas when considering a match between the student and school: academics, character, social interaction, and extracurricular participation. It is sometimes helpful to call a student's teacher. By signing this document, you give us permission to contact your daughter's teachers.

Parent/Guardian Signature _____ Date _____

student statement

Applicant's Name (Please print) _____

Complete the following questions in your own handwriting. Please write legibly. Use an additional sheet if necessary.

Why do you wish to attend Serviam Girls Academy? What are your goals?

Complete the sentence!

I feel most comfortable _____

I feel uncomfortable _____

I admire _____

Something surprising about myself is _____

People think that I am _____

The person who would star in the movie about my life is _____

My greatest strength is _____

My greatest weakness is _____

My proudest accomplishment is _____

I worry _____

I secretly _____

I would change _____

I am most annoyed by _____

After middle school/high school/college, I would like to _____

My favorite web site is _____

Applying to Grades 5-7

guidance counselor/teacher recommendation form

Applicant's Name (Please print) _____ Applying to Grade _____

INSTRUCTIONS Please give this form with a stamped envelope to the appropriate teacher at your current school.

TO THE TEACHER

Person Completing Form _____

Subject/Grade Level Taught _____ School _____

Mailing Address _____

Phone _____

Recognizing that completing this form is not part of your official duties, the school greatly appreciates your helping the applicant by supplying the information requested. Please return the evaluation form in the envelope provided to Serviam Girls Academy at the address **OR** fax number printed below. The information submitted will be considered confidential and will not become part of the student's school records. Your candor will benefit the applicant and the school.

How long have you known the applicant? _____

How well do you know the student academically? Personally? _____

What are the first few words that come to mind to describe the applicant? _____

ACADEMIC QUALITIES

Compared to other students you have taught at this grade level, how would you rate this student in terms of:

NO BASIS		EXCELLENT	ABOVE AVERAGE	AVERAGE	BELOW AVERAGE	COMMENTS
	Study Habits					
	Academic Skills					
	Motivation					
	Intellectual Curiosity					
	Works Independently					
	Creative Problem-Solving					
	Critical/Abstract Thinking					
	Works Cooperatively					
	Communicates & Organizes Ideas					
	Intellectual Risk Taker					

PERSONAL QUALITIES

Compared to other students you have taught at this grade level, how would you rate this student in terms of:

NO BASIS		EXCELLENT	ABOVE AVERAGE	AVERAGE	BELOW AVERAGE	COMMENTS
	Leadership					
	Peer Relations					
	Sense of Humor					
	Reaction to Criticism					
	Concern for Others					
	Self-Confidence					
	Integrity					
	Willingness to take risks					
	Responsibility for Own Actions					
	Conduct					
	Parent Involvement & Cooperation					

ADDITIONAL INFORMATION

Please comment on the applicant's strengths as a student. _____

Please comment on the applicant's weaknesses as a student. _____

Please describe the relationship between the student's level of effort and his/her academic achievement. _____

Please mention any additional information you think might help the school make an informed decision. _____

If the school needs clarification, may we contact you by phone? Yes No Phone _____

Signature _____ **Date** _____

Applying to Grades 5-7

core teacher recommendation form

(**Core Teacher:** Math OR English/Language Arts teacher)

Applicant's Name (Please print) _____ Applying to Grade _____

INSTRUCTIONS Please give this form with a stamped envelope to the appropriate teacher at your current school.

TO THE TEACHER

Person Completing Form _____

Subject/Grade Level Taught _____ School _____

Mailing Address _____

Phone _____

Recognizing that completing this form is not part of your official duties, the school greatly appreciates your helping the applicant by supplying the information requested. Please return the evaluation form in the envelope provided to Serviam Girls Academy at the address **OR** fax number printed below. The information submitted will be considered confidential and will not become part of the student's school records. Your candor will benefit the applicant and the school.

How long have you known the applicant? _____

How well do you know the student academically? Personally? _____

What are the first few words that come to mind to describe the applicant? _____

ACADEMIC QUALITIES

Compared to other students you have taught at this grade level, how would you rate this student in terms of:

NO BASIS		EXCELLENT	ABOVE AVERAGE	AVERAGE	BELOW AVERAGE	COMMENTS
	Study Habits					
	Academic Skills					
	Motivation					
	Intellectual Curiosity					
	Works Independently					
	Creative Problem-Solving					
	Critical/Abstract Thinking					
	Works Cooperatively					
	Communicates & Organizes Ideas					
	Intellectual Risk Taker					

PERSONAL QUALITIES

Compared to other students you have taught at this grade level, how would you rate this student in terms of:

NO BASIS		EXCELLENT	ABOVE AVERAGE	AVERAGE	BELOW AVERAGE	COMMENTS
	Leadership					
	Peer Relations					
	Sense of Humor					
	Reaction to Criticism					
	Concern for Others					
	Self-Confidence					
	Integrity					
	Willingness to take risks					
	Responsibility for Own Actions					
	Conduct					
	Parent Involvement & Cooperation					

ADDITIONAL INFORMATION

Please comment on the applicant's strengths as a student. _____

Please comment on the applicant's weaknesses as a student. _____

Please describe the relationship between the student's level of effort and his/her academic achievement. _____

Please mention any additional information you think might help the school make an informed decision. _____

If the school needs clarification, may we contact you by phone? Yes No Phone _____

Signature _____ **Date** _____

school records request

TO THE PARENTS OF THE APPLICANT

1. Please fill in your daughter's name and information for her current school in the spaces below
2. Sign and date this form.
3. Fax or deliver this form to Serviam Girls Academy in one of the enclosed return envelopes.

To: _____
(Applicant's Current School)

(School Address)

Re: _____
(Applicant's Name) (Applicant's Birthdate or Student ID#)

(Applicant's Address)

I hereby give permission to the school listed above to release information to Serviam Girls Academy as requested below.

Signature _____ **Date** _____

Dear School Registrar,

The student named above, who is currently enrolled in your school or who recently attended your school, is an applicant for admission to Serviam Girls Academy. We would appreciate receiving copies of:

1. Her most recent report card
2. Her report card from the previously completed school year
3. Her standardized test scores
4. Her current IEP (if applicable)

Please mail OR fax records to the address at the bottom of this form.

Thank you for your prompt assistance.

SERVIAM GIRLS ACADEMY
14 Halcyon Drive | New Castle, DE 19720
302.651.9700 | fax 302.651.9703
www.serviamgirlsacademy.org