

Welcome to Meridian Academy

Alternative secondary programs are those that provide special instructional courses and offer special services to eligible at-risk youth to enable them to earn a high school diploma. Listed below are the student qualifications for attending Meridian Academy. Please check all that apply.

- | | |
|---|--|
| <input type="checkbox"/> Student has repeated at least one (1) grade. | <input type="checkbox"/> Student has substance abuse behavior. |
| <input type="checkbox"/> Student has absenteeism that is greater than ten percent (10%) during the preceding semester. | <input type="checkbox"/> Student is pregnant or a parent. |
| <input type="checkbox"/> Student has an overall grade point average that is less than 1.5 (4.0 scale) prior to enrolling in an alternative secondary program. | <input type="checkbox"/> Student is an emancipated youth |
| <input type="checkbox"/> Student has failed one (1) or more academic subjects. | <input type="checkbox"/> Student is a previous dropout |
| <input type="checkbox"/> Student is two (2) or more semester credits per year behind the rate required to graduate. | <input type="checkbox"/> Student has serious personal, emotional, or medical problems. |
| | <input type="checkbox"/> Student is a court or agency referral. |
| | <input type="checkbox"/> Upon recommendation of the school district as determined by locally developed criteria for disruptive student behavior. |

Date: _____

LAST NAME: _____ FIRST NAME: _____ MI: _____

Grade: _____ Sex: _____ Date of Birth: _____ Home Phone: _____

Address: _____ City _____ Zip _____

Lives with: Father _____ Mother _____ Step Parent _____ Guardian _____ Self _____

Father/Stepfather/Guardian _____
First Last

Occupation _____ Place of Employment _____

Work Phone _____ Cell Phone _____

Mother/Stepmother/Guardian _____
First Last

Occupation _____ Place of Employment _____

Work Phone _____ Cell Phone _____

Parent/Guardian E-Mail _____

Other Emergency Contact _____ Phone _____

Last School Attended _____ City/State _____

Current Grade Level: _____ Number of Credits Earned: _____

Home High School (circle one) EHS CHS MHS MVHS OTHER _____

Are you currently receiving special services?

NO _____ YES: IEP _____, 504 _____ Please explain _____

Parent/Guardian Signature: _____



MERIDIAN ACADEMY

2311 E. Lanark • Meridian, ID 83642
Phone (208) 855-4315 • FAX (208) 855-4326

Character **H**onor **O**pportunity **I**nquiry **C**ommunity **E**xcellence

Joe Palaia
Principal

Registration Checklist

The following must be submitted with the application.

Please have your counselor send the following information along with the application to Meridian Academy.

- _____ Application Form
- _____ Transcript
- _____ Current Schedule
- _____ Current IEP*
 - _____ IEP service area:
 - Written Language discrepancy _____
 - Math discrepancy _____
 - Reading discrepancy _____
- _____ Current 504
- _____ ISAT Scores
 - Math _____
 - Language _____
 - Reading _____
- _____ Math Placement for 2006-2007 (tentative)

If student is from outside of the Meridian District, copies of the following must be included.

Birth Certificate _____

Immunization Records _____

***If student is on an IEP a transition meeting must be scheduled.**