

**Kurios Academy Student Application**  
*Training Hearts and Minds for the Glory of God*  
**School Year: 2026-2027**

**Family Information**

**Parent/Guardian 1**

Name: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Email Address: \_\_\_\_\_  
Occupation: \_\_\_\_\_

**Parent/Guardian 2**

Name: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Email Address: \_\_\_\_\_  
Occupation: \_\_\_\_\_

**Home Address:** \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**Student Information**

1. **Student Name:** \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Grade Entering: \_\_\_\_\_
2. **Student Name:** \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Grade Entering: \_\_\_\_\_
3. **Student Name:** \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Grade Entering: \_\_\_\_\_

(If more students, please attach an additional sheet.)

## **Emergency Contact (other than parent/guardian)**

Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Phone: \_\_\_\_\_

## **Church Information**

Name of Church: \_\_\_\_\_

Pastor's Name: \_\_\_\_\_

Are you members?  Yes  No

## **Medical Information**

Does your child have any allergies, medical conditions, or special needs we should be aware of?

Yes  No

If yes, please explain:

## **Academic History**

Has your child attended another school, co-op, or homeschool program?

Yes  No

If yes, please list and briefly describe:

## **Next Steps**

Once completed, please **email this application** to: [KuriosAcademy7@gmail.com](mailto:KuriosAcademy7@gmail.com)

Upon approval you will then receive a link to schedule your **family interview** via SignUpGenius.