



TLE Christian Academy, 2765 S Main Street, Kennesaw GA 30144; 770-218-1790

# AUTHORIZATION TO RELEASE RECORDS

## 1. PERMISSION TO RELEASE STUDENT RECORDS:

I (Parent/Guardian) authorize: ..... to release all records including academic, disciplinary, and Special Education/504 records (if applicable ) of student:

.....  
**(PLEASE PRINT ) Student's Last Name First Name Middle initial**

Student's Date of Birth: .../.../..... Student's current Grade Level:.....

The records are to be released for the purpose of enrollment in a school in compliance with O.C.G.A. 20-2-670.

.....  
**(Signature of Parent/Guardian) Date**

## 2. REQUEST FOR RECORDS

The Student is enrolled at TLE CHRISTIAN ACADEMY as of **Date:..../..../.....**  
Phone: (770) 218-1790

PLEASE SEND ALL RECORDS REQUESTED BELOW TO ATTENTION:

John Ahlberg  
2765 S Main B  
Kennesaw, GA 3144

- |                       |                           |
|-----------------------|---------------------------|
| 1. Cumulative records | 4. Discipline Record      |
| 2. Report Card        | 5. Special Ed/504 Records |
| 3. Test Data          |                           |

.....  
**John Ahlberg, President/Dean Date**

Initials: .....



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## Student Background Information

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_

**\*\*Please fill in student background information for each child you wish to enroll.**

*Does the student have any behavioral issues like anger, bullying that has caused him/her to be expelled/suspended? Is the student under therapy for behavioral issues?*

No:\_\_\_ Yes:\_\_\_ Explain

*Is the student exceptionally gifted in a certain area? No:\_\_\_\_\_ Yes:\_\_\_\_\_ Explain*

*Does the student have any emotional issues like anxiety? Is the student under counseling for emotional issues? No\_\_\_ Yes \_\_ Explain.*

*Has the student been diagnosed for ADD/ADHD? Is this student currently taking any medication? No:\_\_\_ Yes\_\_\_ What and for what?*

*How would you describe the students social skills? Does he/she have friends that you approve of?*

*Does the student receive SB10/IEP? Has the student any learning problems? Has the student gone through a psychological evaluation: No:\_\_\_\_\_ Yes:\_\_\_\_\_ Please explain below and provide copy of the report, IEP Calculation*

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*Has this student ever repeated a grade or been recommended to be retained (is he/she on grade level)?*

No\_\_\_ Yes\_\_\_ *If yes, which grade(s) /subject(s)\_\_\_\_\_ Reason:*

*Is the student receiving or has received tutoring in an area? No\_\_\_ Yes\_\_\_*

*If yes, which grade(s) /subject(s)\_\_\_\_\_ Reason:*

*Has the student been refused admission to another school? No\_\_\_ Yes\_\_\_ Please explain:*

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### **CHILDHOOD YEARS**

*The early childhood years are critical to the development of the child. It is not so much what has happened but how he/she reacted to it. A child's reaction/learning whether, unconsciously or consciously, often dictate student growth and actions later in life. Therefore, any information you may share with us will assist us in better understanding our abilities to serve you and your child. Your cooperation is appreciated.*

*Is the child adopted/a foster child? No\_\_\_ Yes\_\_\_ If Yes*

*- at what age was the child adopted/put in foster care? \_\_\_\_\_*

*- please explain the situation the child grew up in.*

*During the first 6 years of the child's life, pregnancy included, did the child experience any trauma, such as but not limited to these:*

*- difficult birth or pregnancy: No\_\_\_ Yes\_\_\_ Please elaborate*

*- divorce, sudden death of one parent, financial or physical hardship: No:\_\_\_ Yes\_\_\_*

*- child accident, bullying by peers, abuse etc No:--- Yes\_\_\_*

*- other issues during this early childhood time you would like to share with us?*

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- *have you seen a major behavior change during the years? No: \_\_ Yes: \_\_ When? What do you think could have caused it?*

- **SCHOOL: HISTORY .**

<i>School Year:</i>	<i>Schooling:</i>	<i>Performance</i>	<i>Reason for Leaving</i>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

*Last school attended:* \_\_\_\_\_

- *Please attach: 🍏 Progress Report 🍏 Test results 🍏 Behavioral and Attendance Report*

*Why is the student leaving his/her present school?*

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*What are your desires/expectations for a new School?*

*At TLE Christian Academy our focus is to Equip students for life. What top areas would you like to see the school address in order to get him or her Equipped like: Academics, Presentation skills, Social Skills, Work skills, Character? Please explain why.*

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### **HOME SITUATION**

*Could you please describe the environment at home*

*- does the student has his/her own room/ study area where he/she can get the peace to focus on studying? Yes:\_\_\_ No:\_\_\_ Describe::*

*- are both parents married to one another and live with the child? Yes:\_\_\_ No:\_\_\_ Explain:*

*- on what activities does the student spend time when coming home, please prioritize*

*\_\_\_ watching TV, playing games, listening to music and or on internet*

*\_\_\_ playing in the neighborhood with friends or socialize with family members*

*\_\_\_ extra curricula activities like music, athletics*

*\_\_\_ doing tasks at home or for a business, church groups or community service*

*\_\_\_ staying in his/her room*

*- does the students have siblings at home? No:\_\_\_ Yes:\_\_\_ Please give age, gender and if going to school where:*

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- how does the child relate to authorities? Would you call him/her defiant? Or rebellious – only obeying when he she wants to? No: \_\_\_ Yes: \_\_\_ Describe please

*We are a non-denominational school with parents and students of different walk with Christ. However, for us Christian means reconciling relationships with God, Self, Others and the Rest of the Creation. Though we do not have a course per se we do have daily worship and prayers and the staff walk to honor God and live according to the Bible. We also know from experience that a student who accept the authority of God in their lives also will honor parents and teachers. Therefore, it is important to us that we give the child teaching of similar values. We would appreciate if you could share where you are spiritually.*

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## **Covenant Student** *School Year: 2016-2017*

Student's Last Name: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_

I desire to attend TLE Christian Academy or am willing to be under the authority of my parents in submitting and deferring to their wishes concerning enrollment at TLE.

I understand that TLE Academy's teachers are united and committed with my parents to give me the training I need for a Life-Long Success. I will obey their decisions and promise to do all I can at TLE.

In order for me to be able to learn I expect the correct learning conditions. Here is a list of them, and the list is not complete. I want to be respected:

- By students, which means: no bullying, no name calling, no threats of any kind, no physical touch. Instead I want them to accept me and show me respect and encourage me when I do well.
- By teachers, which means: support and respect me, give me help when I need, try to take the time to teach me so I can understand, be available when I need

I agree to treat all the students at TLE Academy the same way as I expect to be treated. I further will do my very best to treat others outside TLE according to these principles.

I understand that because we are in such a small environment TLE Academy has some demands on all of us that makes the environment at TLE the best for all of us:

- No dating between students at TLE. If I would be involved in that I understand I will be expelled from TLE.
- I will obey what teachers and various student leaders say and not speak back to them or be rebellious. At the same time TLE promises to be willing to listen to what I have to say and not just disregard me.

I understand that that our highest desire, including myself, is for all of us to grow that is why we have the best at heart for one another.

I understand that willful disobedience of these principles may result in my dismissal from TLE Christian Academy.

\_\_\_\_\_  
**Print Student's name**

\_\_\_\_\_  
**Student's signature**

\_\_\_\_\_  
**Date**

Initials: .....



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