



Georgia Knights Prep Academy

Admission Application Form

Applicant Information

Full Name: _____ Date of Birth: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Primary Phone: _____ Phone Carrier: _____ Email: _____

Social Security Number: _____ Gender: Male Female Race: _____

If under 18 yrs old,
 Guardian Full Name: _____ Relationship: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Primary Phone: _____ Phone Carrier: _____ Email: _____

Educational Information

High School: _____ City: _____ State: _____

From: _____ To: _____ Did you graduate? YES NO Anticipated Graduation Date: _____

Current GPA: _____ Current Grade: _____ Have you taken the ACT/SAT Test? YES NO ACT Score: _____ SAT Score: _____

Current/Anticipated College/University: _____ City: _____ State: _____

From: _____ To: _____ Currently enrolled in college? YES NO Degree: _____

Have you ever been convicted of a felony? YES NO If yes, explain: _____

Will you need Financial Assistance for academics? YES NO Have you applied for Financial Assistance? YES NO

Athletic Information

Program Applied for: Basketball - Men Basketball - Women Football Other: _____

Registered for the NCAA Clearinghouse? YES NO Need assistance registering for Clearinghouse? YES NO

Have you obtained a physical? YES NO Do you currently have medical insurance coverage? YES NO

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge. If this application leads to admission to GKPA, I understand that false or misleading information in my application or interview may result in my release with no refund of already paid fees.

I understand that a \$50 non-refundable application fee is to be submitted with this application. In addition, I understand that a \$500 fee to secure my roster spot is to be submitted no later than 20 days after signing this application. If either is not received, my application will be void.

Signature: _____ Date: _____

Parent Signature: _____ Date: _____
 (if applicant is under 18 yrs old)

Administrative Office Use Only: Administration: _____ Admissions/Academic: _____ Athletic: _____