



# THE DANIEL ACADEMY

A SCHOOL FUELED BY PRAYER

[WWW.THEDANIELACADEMY.COM](http://WWW.THEDANIELACADEMY.COM)

310 W. 106TH STREET  
KANSAS CITY, MO 64114  
(816) 943-0923

To apply to The Daniel Academy, please drop off or mail the following items:

1. The attached **Parent Application** form
2. The background check form – one for each parent
3. The **Student Application** form, including 2 references for Junior High/High School students
4. The student's transcripts and records from their past school, including any IEPs
5. The student's current immunization records
6. Medical Consent/Medical History forms
7. Check payable to The Daniel Academy (or TDA) for the \$75 application fee per student. Payments can also be made through a money order or cash.

We will be emailing you within a week of receiving your application with more information.

Please email all questions regarding enrollment to Jasmine Small:

[jasminessmall@thedanielacademy.com](mailto:jasminessmall@thedanielacademy.com)



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## Parent Information | 2022-2023

Parents Names (if you are a blended family please list all names)	
Street Address	
Father's Cell Phone	Mother's Cell Phone
Father's Email Address	Mother's Email Address
What is your family church? How long have you attended there?	
Please list names and ages of all siblings of the applying student.	
Father's education background (including any degrees) and occupation.	
Mother's education background (including any degrees) and occupation.	
Please list father's skills and passions.	
Please list mother's skills and passions.	
Would you be willing to teach or tutor at TDA? If so, in what area?	

## **Personal Responses from Parents**

What is your definition of a Christian?

Based on this definition, are both parents Christians? Father? Mother?

Where/How did you hear about The Daniel Academy?

Please watch these videos (with your junior high/high school students) from [www.thedanielaacademy.com](http://www.thedanielaacademy.com):

Videos found under ABOUT TDA (please initial after watching each one):

ABOUT US - About the Daniel Academy

ABOUT US - Four Pillars

ABOUT US - The Daniel Academy Bible Track

OUR POLICIES - Our Policy of Opposite Gender

What specifically led you to apply to The Daniel Academy? Which parts of the vision and values do you most connect with?

What are you hoping your child/children will receive at The Daniel Academy?

What are your prayers/desires/hopes for your child in walking out the Daniel calling in the future?



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## **AUTHORIZATION AND REQUEST FOR BACKGROUND CHECK** - one per each parent

*In order for all our parents to be able to come and go in our school, we require this check on all parents and teachers.*

I, \_\_\_\_\_, hereby authorize The Daniel Academy from time to time, as deemed appropriate, to request any law enforcement or any other agency chosen by The Daniel Academy specifically for conducting this search to release information regarding any record of charges or convictions contained in its files, or any criminal file maintained on me, whether local, state, or national, and including but not limited to accusations and convictions or crimes committed against minors, to the fullest extent permitted by local, state and federal law. I do release said law enforcement agencies and any other entities from all liability that may result from any such disclosure made in response to this request.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Print Full Name: \_\_\_\_\_

Print all other names that have been used by applicant (if any): \_\_\_\_\_

Date of birth: \_\_\_\_\_

Place of birth: \_\_\_\_\_

Social Security Number (required): \_\_\_\_\_

Driver's license number: \_\_\_\_\_

State issuing license: \_\_\_\_\_

License expiration date: \_\_\_\_\_

Current Address: \_\_\_\_\_

Previous Address: \_\_\_\_\_

Have you ever been convicted of a felony? If so, please give details and when it occurred.

\_\_\_\_\_  
\_\_\_\_\_



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