



**The J. Frank White Academy  
of Lincoln Memorial University  
Application for Admission**



*An official transcript from the school last attended must be sent to the Academy before the application will be considered. Please note the transcript must come directly from the school to the Academy and it is the responsibility of the parent/guardian to request those records be sent.*

**Applying for Fall 20**\_\_\_\_\_

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

**Application for Grade**\_\_\_\_\_

**SSN:** \_\_\_\_\_

**Applicant's Full Name** \_\_\_\_\_

**Mailing Address** \_\_\_\_\_

**Telephone Number**\_\_\_\_\_ **Email address**\_\_\_\_\_

**Parent/Legal Guardian Name**\_\_\_\_\_

**Address if different from applicant** \_\_\_\_\_

**School where applicant is currently enrolled** \_\_\_\_\_

**School Address** \_\_\_\_\_

**School Phone Number** \_\_\_\_\_

**Has applicant ever received any special education services?** \_\_\_yes \_\_\_no

**If yes, please describe type of service** \_\_\_\_\_

**Please list any allergies or medical conditions that you would want us to be aware of:**

**Has applicant previously applied to the Academy?** \_\_\_yes \_\_\_no

**List any extracurricular activities applicant would be interested in pursuing**

**Has the applicant ever been suspended or expelled from a school?** \_\_\_\_ **If yes, please provide details**\_\_\_\_\_

**How did you hear about The J. Frank White Academy?**\_\_\_\_\_

**If transportation were available to and from the Academy would you take advantage of the service for an additional charge?** \_\_\_yes \_\_\_no

(over please)

## ***Application Checklist***

**Please be sure you have completed the following before submitting this application:**

- **Application is filled in completely.**
- **Applicant has completed the writing sample.**
- **Request for records to be sent to the Academy has been sent to school most recently attended.**
- **Principal's recommendation form has been sent to school most recently attended.**
- **A recent photo of the applicant is attached to the application.**
- **The Application Policy Agreement below has been signed by applicant and parent or legal guardian.**
- **The non-refundable \$25 application fee is included with the application.**

### ***Application Policy Agreement***

**I declare that all information submitted on the application and any related documents are accurate. I understand the information furnished on the application form and related documents, including related information gathered by the Academy, shall be confidential. I further understand that all students admitted to the Academy are accountable for all policies and procedures outlined in the *Student Handbook* in effect at the time of enrollment.**

\_\_\_\_\_  
Parent or Legal Guardian/Date

\_\_\_\_\_  
Applicant's Signature/Date

**Mail completed packet to The J. Frank White Academy, 6965 Cumberland Gap Parkway, Harrogate, TN 37752**

**Phone: 423-869-6234**

**FAX: 423-869-6425**

The J. Frank White Academy is fully accredited by SACS/CASI  
The Southern Association of Colleges and Schools/Council on Accreditation and School Improvement

The J. Frank White Academy does not discriminate on the basis of national or ethnic origin, gender, sexual orientation, race, handicap, color or creed.