

Thomas Sumter Academy

5265 Camden Highway
Rembert, South Carolina 29128
Telephone (803) 499-3378
Fax (803) 499-3391
E-mail tsa.admissions@thomassumter.org
www.thomassumter.org



Our mission at Thomas Sumter Academy is to develop, in a safe Christian environment, well-rounded individuals who are fully prepared for college and for life.

APPLICATION FOR ADMISSION

Application for Grade _____ Application for year beginning ____/____/20____

Name of Applicant _____
Last First Middle

Name Preferred _____

Home Address _____

City State Zip Telephone

Date of Birth ____/____/____ Gender M or F

After school care Y or N

FOR OFFICE USE ONLY

Date Application Received ____/____/20____ Tour Date ____/____/20____ Assessment Date ____/____/20____

Contract Offered ____/____/20____ Contract Received ____/____/20____ Start Date ____/____/20____

FAMILY INFORMATION

Father's Name _____
(or Guardian) First Middle Last

Name Preferred _____

Home Address _____

City State Zip

Home Telephone _____

Cell Telephone _____

E-mail Address _____

Employer _____

Profession _____

Position Held _____

Employer's Address _____

City State Zip

Telephone _____

Mother's Name _____
(or Guardian) First Middle Last

Name Preferred _____

Home Address _____

City State Zip

Home Telephone _____

Cell Telephone _____

E-mail Address _____

Employer _____

Profession _____

Position Held _____

Employer's Address _____

City State Zip

Telephone _____

The student lives with: **(Check any that apply)**

Both parents _____ Mother _____ Father _____ Stepmother _____ Stepfather _____ Other (Relationship) _____

Check any that apply: If parents are divorced, a copy of legal custody papers are required with submission of the application.

Father is deceased _____ Mother is deceased _____ Parents are divorced _____ Parents are separated _____

Father has custody _____ Mother has custody _____ Student is adopted _____

Financial responsibility will be assumed by

Both parents _____ Mother _____ Father _____ Stepmother _____ Stepfather _____ Other (Relationship) _____

Are other members of family presently attending Thomas Sumter Academy? Yes _____ No _____

If so, please list name and relationship to applicant. If more than three, list on a separate sheet of paper.

Name _____ Relationship _____ Class of _____

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Name _____ Relationship _____ Class of _____

Is either parent or grandparent a graduate of Thomas Sumter Academy? Yes _____ No _____

If so, please list full name as when enrolled at TSA and year of graduation. If more than one, list on a separate sheet of paper.

Name _____ Class of _____

Are any members of your family former students of Thomas Sumter Academy? Yes _____ No _____

If so, please list name and relationship to application. If more than one, list on a separate sheet of paper.

Name _____ Relationship _____ Years Attended _____

GRANDPARENTS

Paternal

Living _____ Deceased _____

Grandfather's Name _____
First Middle I. Last

Home Address _____

City _____ State _____ Zip _____

Telephone _____

E-mail _____

Living _____ Deceased _____

Grandmother's Name _____
First Middle I. Last

Home Address _____

City _____ State _____ Zip _____

Telephone _____

E-mail _____

Maternal

Living _____ Deceased _____

Grandfather's Name _____
First Middle I. Last

Home Address _____

City _____ State _____ Zip _____

Telephone _____

E-mail _____

Living _____ Deceased _____

Grandmother's Name _____
First Middle I. Last

Home Address _____

City _____ State _____ Zip _____

Telephone _____

E-mail _____

ACADEMIC INFORMATION

Name of School Currently Enrolled in _____

School Address _____

City _____ State _____ Zip _____ Phone _____

Name of Principal, Headmaster or Guidance Counselor _____

Has applicant ever previously attended Thomas Sumter Academy? Yes _____ No _____

Dates and reason for leaving _____

Has applicant ever repeated a grade, skipped a grade, or been in accelerated instruction? Yes _____ No _____

If yes, please describe the circumstances _____

Has applicant ever been referred for academic evaluation, testing, or remedial instruction? Yes _____ No _____

If yes, please describe the circumstances _____

Has applicant ever been suspended or dismissed for academic, disciplinary or other reasons? Yes _____ No _____

If yes, please describe the circumstances _____

From what source did you hear about Thomas Sumter Academy? _____

Should the applicant be admitted to Thomas Sumter Academy, there are additional mandatory forms and documents to be completed and submitted such as South Carolina immunization records before the application process is considered to be complete. The applicant will also be required to complete an entrance assessment.

FOR UPPER SCHOOL (GRADES 6-12) APPLICANTS

In your own words and handwriting, please respond below to the following:

- A) What personal interests and talents do you possess that could help you contribute in a positive way to student life at Thomas Sumter Academy?
- B) What do you expect to gain from attendance at Thomas Sumter Academy?

Thomas Sumter Academy does not discriminate on the basis of race, color, creed, sex*, national or ethnic origin in administration of its educational policies, admission policies, financial aid programs, and athletic and other school administered programs.

*A student's sex is identified by the original birth certificate.