



Tri-Cities **PREP**

Application for Admission

Non-Refundable Application Fee of \$100 due with application (applies towards registration fee upon acceptance)

9612 Saint Thomas Drive, Pasco, Washington, 99301,

(509)546-2465, (509)546-2490 FAX, www.tcprep.org

Grade at Tri-Cities Prep for which you are applying (please circle one)	9	10	11	12
---	---	----	----	----

Student's Full Name

Last	First	Middle
------	-------	--------

Prefers to be called	Male	Female
----------------------	------	--------

Home Address

Street	City	State	Zip	Phone
--------	------	-------	-----	-------

Date of Birth	Place of Birth
---------------	----------------

Religion	Practicing	Yes	No
----------	------------	-----	----

Place of Worship	Current School
------------------	----------------

Brothers and Sisters Name	Age

Do you have any relatives who have attended Tri-Cities Prep? If so, please list names and relationships

Name	Relationship	Years in Attendance

Student: Please state why you want to attend Tri-Cities Prep. Please write or print clearly in your own handwriting. Do not type or attach a separate sheet.

Signature of Student	Date
----------------------	------

Parent/Guardian Information

Father/Guardian (Please Circle)

Last	First	Middle
------	-------	--------

Home Address

Street	City	State	Zip	Phone
--------	------	-------	-----	-------

e-mail Address	Religion
----------------	----------

Place of Birth	US Citizen	Yes	No
----------------	------------	-----	----

	Marital Status	Married	Single
--	----------------	---------	--------

Occupation	Name of Business	Business Phone
------------	------------------	----------------

Stepfather's name	Stepfather's occupation
-------------------	-------------------------

Mother/Guardian (Please Circle)

Last	First	Middle
------	-------	--------

Home Address

Street	City	State	Zip	Phone
--------	------	-------	-----	-------

e-mail Address	Religion
----------------	----------

Place of Birth	US Citizen	Yes	No
----------------	------------	-----	----

	Marital Status	Married	Single
--	----------------	---------	--------

Occupation	Name of Business	Business Phone
------------	------------------	----------------

Stepmother's name	Stepmother's occupation
-------------------	-------------------------

Ethnic Origin
(check all that apply)

Caucasian		Vietnamese	
African-American		Chinese	
Asian Indian		Filipino	
Alaska native or American Indian		Japanese	
Pacific Islander		Korean	
Other Hispanic or Latino		Other	

Does your student have any emotional or physical conditions, including diagnosed learning disabilities, of which the school should be aware? Please explain (Please type or attach a computer generated response)

Is your child now receiving medical treatment, medication, or counseling? Please explain (Please type or attach a computer generated response)

Parent: Please state why you want your child to attend Tri-Cities Prep. (Please print clearly or attach a computer-generated response)

Parent/Guardian Signature

Date

Note to Parent/Guardian

While final placement will be determined by our placement exams in May (or high school transcripts for transfer students), to help with preliminary scheduling please indicate which level of Math and Spanish you believe you student is prepared for

Math:	Algebra I		Spanish:	Spanish I	
	Geometry			Spanish II	
	Algebra II			Spanish III	

Activities

Please list any activities in which you have participated in the past three years. Include school, church, sports, community, music, arts, and job. You may also include any honors or awards.

Activity	Dates Involved	Activity	Dates Involved

Student Essay

Please use the space below to tell the Admissions Committee something important about yourself. Some topics might include an important event in your life, a person who has influenced you, goals or hopes for the future, what you value, or an activities that is important to you. You may want to do a rough draft before writing your final copy here. Your essay is a very important piece of the application process. You will be evaluated on your writing skills.

Please write or print clearly in the space provided. Do not type or attach a separate sheet.

Interest/Talents (please check all that apply)					
Baseball	<input type="checkbox"/>	Band	<input type="checkbox"/>	Basketball	<input type="checkbox"/>
Choir	<input type="checkbox"/>	Cross Country	<input type="checkbox"/>	Drama	<input type="checkbox"/>
Football	<input type="checkbox"/>	Golf	<input type="checkbox"/>	Student Government	<input type="checkbox"/>
Softball	<input type="checkbox"/>	Soccer	<input type="checkbox"/>	Tennis	<input type="checkbox"/>
Track	<input type="checkbox"/>	Swim Team	<input type="checkbox"/>	Volleyball	<input type="checkbox"/>
Wrestling	<input type="checkbox"/>	Other Activities	<input type="checkbox"/>		<input type="checkbox"/>