



Enrollment Application

*A non-refundable fee of \$100 made payable to Walton Academy must be enclosed with this application.
Submission of this application does not guarantee admission into the academy.

Applicant Information

Student Information:

Last Name	First Name	Middle Name	Preferred Name
Home Address			
City	State	Zip Code	
Date of Birth	Current Grade/School		

Family Information

Parent Information

Mother's Full Name/Title		
Home Address (If different from applicant's)		
City	State	Zip Code
Occupation/Title		
Business Name		
City	State	Zip Code
Business Telephone	Cell Phone	
Mother's Email Address		

Father's Full Name/Title		
Home Address (If different from applicant's)		
City	State	Zip Code
Occupation/Title		
Business Name		
City	State	Zip Code
Business Telephone	Cell Phone	
Father's Email Address		

Applicant Education

Present School

Present Teacher

School Address

City

State

Zip Code

Head of the School or Counselor

Telephone

Dates of Attendance

Previous School

Location

Dates of Attendance

Previous School

Location

Dates of Attendance

Behavioral & Support History:

Has your child ever received services or support for behavioral, emotional, or social challenges, or shown significant behavioral concerns (such as disruptions, defiance, or aggression)? ☐ Yes ☐ No Parent/Guardian Initials: _____

If yes, please share details or strategies that have been helpful:

Parent/Guardian Attestation:

I affirm that the information provided above is accurate and complete to the best of my knowledge. I understand that providing this information allows Walton Academy to best support my child and ensure a safe, positive learning environment for all students.

Signature: _____ Date: _____

Student Lives With:

☐ Mother ☐ Stepmother ☐ Other

☐ Father ☐ Stepfather

Specify: _____

Additional Family Information:

☐ Mother Deceased ☐ Father Deceased ☐ Parents Divorced

☐ Mother Remarried ☐ Father Remarried ☐ Joint Custody

☐ Mother Has Custody ☐ Father Has Custody

Informational:

Have you applied for the North Carolina Scholarship? ☐ Yes ☐ No

If YES, what tier level have you been awarded? ☐ Tier 1 ☐ Tier 2 ☐ Tier 3 ☐ Tier 4

Will you need the before and after school option (extended day option)? ☐ Yes ☐ No

Does your child currently attend one of our centers? ☐ Yes ☐ No

If YES, what location?

☐ Children's World Learning Center / Walton Academy
1515 East Arlington Blvd.
Greenville, NC 27858

☐ Children's World Learning Center
804 Johns Hopkins Drive
Greenville, NC 27834

☐ Children's World Learning Center / A Child's Place
532 Moye Blvd.
Greenville, NC 27835

☐ Children's World Learning Center
1360 SW Greenville Blvd.
Greenville, NC 27834

Does your child have any sibling(s)? ☐ Yes ☐ No If YES, how old? _____

Parent Enrollment Intention for Walton Academy K-8 School

What are your expectations for your child's academic and personal growth while attending Walton Academy K-8 School? To provide the best experience for all our families, we would like to inquire on what you hope to achieve by enrolling in our school. Please be honest and understand that your response does not impact your child's acceptance at Walton Academy.

Please check the box that best applies to your family:

- ☐ It is our family's intention for our child to attend Walton Academy for Kindergarten ONLY.
Possible justification for this option: The child needs additional developmental time (socially, emotionally, and/or mentally) before entering public school.
- ☐ It is our family's intention for our child to attend Walton Academy for grades K-5 ONLY.
Possible justification for this option: The child needs a strong private school academic foundation in the early grades while transitioning to a more social and diverse environment in public middle school.
- ☐ It is our family's intention for the child to attend Walton Academy for grades K-8 ONLY.
Possible justification for this option: Both elementary and middle school years are often a crucial period for academic development and social adjustment. A smaller and more attentive private school environment can significantly benefit a child's learning and overall well-being, potentially providing a stronger foundation for high school success.

Emergency Contact Information:

Emergency Contact Primary

☐ If SAME as parent info please check box

First Name

Last Name

Home Address

City

State

Zip Code

Best Contact #

Drivers License

Relationship to student

Emergency Contact Secondary

☐ If SAME as parent info please check box

First Name

Last Name

Home Address

City

State

Zip Code

Best Contact #

Drivers License

Relationship to student

Financial

Person(s) financially responsible for tuition? _____

Relationship to applicant? _____

Contact Information: Cell Phone: _____

- Reference forms are to be completed by the applicant's teacher(s) are part of the admissions process. These are to mailed or delivered directly to Walton Academy by the teacher.
- By signing this application, you agree that all information is up-to-date and truthful. Failure to complete information, or omitting other pertinent information, may result in termination of your child from the program.

Parent/Guardian Signature

Date

Parent/Guardian Signature

Date

