



A Better Kind of Smart

Confidential Application for Enrollment

Please return completed application with a \$100 check payable to Areté Preparatory Academy Mail to:
11500 Olympic Boulevard, Suite 318, Los Angeles, CA 90064

Part I – To Be Completed by Parent/Guardian

Applicant's Full Name	Current Grade	Date of Application
Date of Birth	Gender	
Current School	How did you find out about Areté?	
Previous Schools Attended		
Student's Cell Number	Student's Email	

Father/Guardian 1 Information:

Name	Occupation
Address	
Home Phone	Work Phone
Cell Phone	Email

Lives with Applicant? Yes No

Mother/Guardian 2 Information:

Name	Occupation
Address	
Home Phone	Work Phone
Cell Phone	Email

Lives with Applicant? Yes No



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Part I - Continued

Why are you considering Areté for your child? What aspects of our program appeal to you?

What types of growth (cognitive, emotional, social) would you like to see in your child?

What sorts of assignments/learning situations most inspire your child? (Feel free to share specific examples)

Has your child been subject to any disciplinary action, including but not limited to suspension or expulsion, at any prior school? Yes No

If yes, please attach an explanation.

Signature _____ Date _____

Part II – To Be Completed By The Student

What aspects of Areté appeal to you?

Describe a learning situation (either in school or in the “real” world) that opened your mind or changed your point of view.



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Thank you for taking the time to share your thoughts on this applicant. Please mail completed form to:

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Part III – To Be Completed by a Teacher

Applicant's Full Name	Name of School
Evaluator's Full Name	Title
Phone	Email
Course(s) in which you have taught this student:	

Do you think this student would succeed in a small, rigorous, personalized learning environment? Please explain.

What sort of growth (cognitive, emotional, social) would you like to see in this student?

Signature _____ Date _____



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TRANSCRIPT REQUEST

To Whom It May Concern:

_____ is applying for admission to Arété Preparatory Academy

from _____ (Name of School).

Please send an official transcript, along with any recent progress reports to:

Areté Preparatory Academy
11500 Olympic Blvd, Suite 318
Los Angeles, CA 90025

I hereby authorize release of my child's grades and transcripts to Arété Preparatory Academy.

Name of Student _____ Date of Birth _____ Current Grade _____

Parent or Guardian's Signature _____ Date _____



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