APPLICATION FOR ADMISSION TO:



ANTILLES MILITARY ACADEMY

INTERNAL USE

Date Application: ______

Grade Applied for: ______

Academic Year: ______

S.S. Number: ______

TEL. 787-761-1710

1. Name of student:				Sex: M F
2. Date of birth:	/		Place of Birth:	
3. Age:	Weight:			
4. Last grade attender O Private S	/	School:	United States	\wedge
School Address:				
5. Applicants preferre	d activities:			
6. Organized sports in	n which applicant ha	as participated:		
7. Postal Address:				
_			Zip Cod	de:
8. Home Address:				
				de:
9. Name of the father	/guardian:			
Married Widower	O Divorced	Remarried ()	e-mail:	
Work:			Position:	
Telephone: Home: _		Cellular:	W	ork:
				Ext.:
10. Name of the mother	er/guardian:			
Married () Widower	Divorced (Remarried ()	e-mail:	
Work:			Position:	
Telephone: Home:		Cellular: _		Work:
Note: Read revers	Ext.:			

Document	s required before interv	lews and entrance examinations:	
a. Birth Certificateb. Health Certificatec. Vaccination Certificate	d. Social Security No. e. Two photos 2" X 2" f. Registration Fee	g. Audiological Evaluation (PP - PK – K) h. Transcript of School Credits	
	Documents will be pa	rt of student's record	
Un	i forms - available in	THE A.M.A SUPPLY STORE	
The Academy suggests th	at parents should visit t	the homeroom teacher at least once a r	month.
		ED FOR THE WHOLE SCHOOL YEAR, MADE ON EARLIER DISMISSALS.	
PAYME	NTS ARE MADE DIREC	TLY AT THE SCHOOL WITH: - ATH	A Tale Here
*	NO CHECK* *NO AI	MERICAN EXPRESS*	
	Honor	· Code	
A eadet will never do	o anything wrong, anythin nor will allow anyone to	ng that should not be done, anything immedo anything of that sort.	oral,
My son will obey all the rules	and regulations of AMA. Horicage of Cadets of ANTILLES	le/She is interested in becoming a member of MILITARY ACADEMY.	of the Corp
Signature of Studen		Signature of Parent	
Date		Date	
			<u></u>