



## Student Not Living with Parent Application

**Student Name**    
*First Last*

**Date of Birth**  /  /   
*MM DD YYYY*

**Gender**  Male  
 Female

**School-City**

**Grade @TAPPS School**

**School Contact**    
*First Last*

**Email for school contact**

**Phone number for school contact**  -  -   
*### ### ####*

## Parent/Guardian/Responsible Party Information

**Parent Name**    
*First Last*

**Permanent Address**

*Street Address*

*Address Line 2*

*City State / Province / Region*

*Postal / Zip Code*

**Person responsible for student/Guardian\***    
*First Last*

**Address while attending the TAPPS School**

*Street Address*

*Address Line 2*

*City State / Province / Region*

*Postal / Zip Code*

**Relationship of guardian to student:**  Sibling  
 Grandparent  
 Aunt/Uncle  
 Other

**If other please explain:**

**How long has student lived with Guardian/Responsible Party**

If other than parent, was the guardian appointed by a United States court of law?

- Yes
- No

If yes, please provide a copy of the court decree

If other than parent, approximate date student began living with the guardian?

/  /   
MM DD YYYY

If other than parent, is the family paying room and board to the guardian?

- Yes
- No

If other than a parent, is the guardian associated with any AAU, Club, Select, Academy or any other similar type organization?

- Yes
- No

If yes to the question above, does or will the student be participating with this organization?

- Yes
- No
- N/A

If the student will be participating with an AAU, Club, Select or Academy organization, is the student's family paying all expenses associated with club participation?

- Yes
- No
- N/A

If the guardian associated with any AAU, Club, Select, Academy or any other type organization, please check all options that apply?

- Owner
- Director
- Coach
- Volunteer
- Manager
- Parent

If the guardian associated with any AAU, Club, Select, Academy or any other type organization, please check all options that apply?

- BASEBALL
- GOLF
- SWIMMING
- VOLLEYBALL

- BASKETBALL
- SOCCER
- TRACK / FIELD
- WRESTLING

- FOOTBALL
- SOFTBALL
- TENNIS

If other than a parent, is the guardian an employee or otherwise associated with the member school?

- Yes
- No

## School Selection

Please complete the following questions regarding the choice of the TAPPS school.

If recruiter or referral please provide the name of the person or service

Is testing required of all students prior to acceptance to the member school?

- Yes
- No

Did the student successfully complete testing prior to acceptance by the member school?

- Yes
- No

Was acceptance to the school conditional with the student repeating a grade level?

- Yes
- No

Date of acceptance to the TAPPS member school?

/  /   
MM DD YYYY

Date parents enrolled the student in the member school?

/  /   
MM DD YYYY

First day of attendance at the TAPPS member school?

/  /   
MM DD YYYY

## Student Education Information

Please complete the following in regards to the student's education prior to acceptance at the TAPPS member school

Has the student attended a junior high school or high school in the United States?  Yes  
 No

If yes, please provide the name of the previous school attended in the United States.

Will the student be repeating a grade at the TAPPS school?  Yes  
 No

Has the student graduated from high school or high school equivalent?  Yes  
 No

Student grade placement at the TAPPS member school  8  
 9  
 10  
 11  
 12

Has the student practiced or participated in extracurricular high school athletic activities at another US school?  Yes  
 No

Has the student been in athletics period at another US school?  Yes  
 No

Has the student participated on a National Team or National combine for any activity?  Yes  
 No

If yes, please provide the country and activity.

Is the student enrolled in at least four academic classes at the new school?  Yes  
 No

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## School Finance

Please provide answers to the following as it pertains to the payment for the student's education at the TAPPS member school.

Annual Tuition for Students at the TAPPS member school. \$  Dollars .  Cents

Did the student receive financial aid to attend the member school?  Yes  
 No

If the student received financial aid, please provide the amount of aid provided? (percentage tuition reduction)

Person(s) making tuition payment to the school  Parent  
 Guardian  
 Parent's Employer  
 Other

If other, please provide additional information

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## Additional Information

Please provide the following information for review with the application. The student's eligibility will not be considered until all information is received.

Student Transcript

Financial Aid Agreement - if applicable

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## **Application Fee Payment**

The \$30 application fee should be received in the TAPPS office prior to the processing of this request.

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