



## FINANCIAL INFORMATION

Do you have an unpaid bill at any other school?  yes  no If yes, what amount? \_\_\_\_\_

School \_\_\_\_\_

Phone ( \_\_\_\_\_ ) \_\_\_\_\_

Does either parent work for an SDA organization?  no  father  mother

If yes: Employer \_\_\_\_\_

Phone ( \_\_\_\_\_ ) \_\_\_\_\_ Position \_\_\_\_\_

Do you wish to have tithe deducted from your student labor earnings?  yes  no

## EMPLOYMENT WHILE AT SCHOOL

While specific jobs cannot be guaranteed, the Work Committee will endeavor to place you according to your age, skills, and experience. Indicate your first three job preferences by number (first = 1, etc.)

\_\_\_\_ Teacher's reader/worker (classroom)

\_\_\_\_ Library

\_\_\_\_ Maintenance of buildings

\_\_\_\_ Office worker

\_\_\_\_ Farm

\_\_\_\_ Maintenance of lawns/grounds

\_\_\_\_ Food Service

\_\_\_\_ Custodial

\_\_\_\_ Maintenance of vehicles

\_\_\_\_ Thunderbird Wood Products (maximum earning power-must be 16 yrs old)

\_\_\_\_ Other: \_\_\_\_\_

**Qualifications** List any classes taken or skills acquired that would qualify you for your preferred job placement.

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Limitations** Explain any physical/emotional conditions that might keep you from working in certain areas.

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

## WORK AGREEMENT

I agree to abide by the work regulations established by the school, and I understand that noncompliance will result in my work termination and may be grounds for expulsion. I understand that my earnings are to be applied to my tuition account and may not be withdrawn in cash. Labor credits earned during the summer or school term will be held in trust for use toward future educational costs. I further agree to remain with my assigned job until the work coordinator authorizes and reassigns me to a different position.

\_\_\_\_\_  
 Student signature

\_\_\_\_\_  
 Date

## ACKNOWLEDGMENT & GRANT OF AUTHORITY

The undersigned, a student at Milo Adventist Academy (MAA) and employee of Thunderbird Wood Products, and the student's parent or guardian hereby acknowledge, agree, and authorize the following:

1. Thunderbird Wood Products is an operation that is owned, operated, and controlled by the Oregon Conference of Seventh-day Adventists. All decisions pertaining to employment of students and the employment environment are under the control of Thunderbird Wood Products and not MAA.
2. Thunderbird Wood Products desires to utilize student labor and MAA wishes to see its students employed by Thunderbird Wood Products in order to assist the student in defraying school tuition and other costs. For those reasons, both MAA and Thunderbird Wood Products desire that all payroll checks of students be delivered to MAA and credited to the student's account at the academy.
3. For the above reasons, the undersigned student and parent or guardian of the student hereby authorize MAA to receive the student's payroll check and endorse the check payable to the student's account at MAA.

\_\_\_\_\_  
 Student signature

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Parent signature

\_\_\_\_\_  
 Date

## PHOTO CONSENT

I understand that for as long as I am a student at MAA, pictures and/or video clips of me will be taken by the yearbook, newspaper, and/or marketing staff. I give my permission to have these photographs and video clips taken. I also grant permission to the above listed staff of MAA for the photographs and video clips of me to be used for current and future promotional purposes and for any MAA publications. These include, but are not limited to, the *Milo Monitor*, the *Milo Mugbook*, the *Trillium*, the marketing display, and any videos. I grant MAA all rights to the use of such photographs and videos for any future projects.

\_\_\_\_\_  
 Student signature

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Parent/Guardian signature

\_\_\_\_\_  
 Date

## COMMITMENT BY PARENT OR GUARDIAN

I have read the mission statement for Milo Adventist Academy and the description of desired outcomes for students at this school (see back page of application). I am in harmony with those goals for the student who is making this application, and I choose to take the commitment described below as my own.

- ♦ I commit to supporting this student in fulfilling the commitment that he/she has made.
- ♦ I commit to helping Milo Adventist Academy fulfill its \_\_\_\_\_ mission by supporting the policies and programs it has established.
- ♦ I am in harmony with the regulations and policies as stated in the MAA handbook. I agree to the conditions therein stated.
- ♦ I clearly understand my financial obligation, and I agree to pay this student's account each month unless arranged otherwise in advance. I understand that production levels in industry, student absences, vacations, lack of enthusiasm for work, etc. may reduce the indicated monthly hours of work, thus increasing the monthly cash required.

\_\_\_\_\_  
 Parent/Guardian signature

\_\_\_\_\_  
 Date

## EDUCATIONAL INFORMATION

Official transcripts requires the date of your 8th grade graduation? Be specific. \_\_\_\_/mo \_\_\_\_/da \_\_\_\_/yr

List schools attended from the 8th grade to the current year.

8th Year \_\_\_\_ - \_\_\_\_ School name \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_  
 Mailing Address \_\_\_\_\_ Zip \_\_\_\_\_

9th Year \_\_\_\_ - \_\_\_\_ School name \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_  
 Mailing Address \_\_\_\_\_ Zip \_\_\_\_\_

10th Year \_\_\_\_ - \_\_\_\_ School name \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_  
 Mailing Address \_\_\_\_\_ Zip \_\_\_\_\_

11th Year \_\_\_\_ - \_\_\_\_ School name \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_  
 Mailing Address \_\_\_\_\_ Zip \_\_\_\_\_

Enclose copies of your high school report cards and/or complete the record of classes below.

Grade 9	Grade earned	Credit rec'd	Grade 10	Grade earned	Credit rec'd	Grade 11	Grade earned	Credit rec'd

Are you currently enrolled in any correspondence courses?  yes  no If yes, list the courses from each school.  
 Correspondence school \_\_\_\_\_ Course \_\_\_\_\_  
 Correspondence school \_\_\_\_\_ Course \_\_\_\_\_

Do you have any learning disabilities that you are aware of?  yes  no If yes, please explain.  
 \_\_\_\_\_

Do you desire special help in any subject?  yes  no If yes, which? \_\_\_\_\_

## RECOMMENDATION FORMS

Please give names and telephone numbers of the people to whom you have given reference forms to complete and return to MAA. These should have been acquainted with you within the last year and should not be relatives. Recommendations should be mailed directly to MAA Admissions Office by the recommending person.

Principal or head teacher \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_  
 Youth leader or pastor \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_  
 Work supervisor \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

## DESIRED OUTCOMES FOR MAA STUDENTS

Students at MAA will learn, both intellectually and experientially. . .

- ◆ How to become a Christian and to clearly and comfortably explain that process to others.
- ◆ How to maintain a continually growing, joyful, relationship with Christ, and to clearly understand the roles of grace, the Scriptures, constant surrender, and regular communion with God in this process.
- ◆ To appreciate accountability and to understand how to give and receive it in their interactions with others.
- ◆ To highly value themselves and those around them as precious, redeemed children of God, regardless of their mistakes and failings.
- ◆ How to maintain healthy, lasting, nurturing relationships with others.
- ◆ To value the role of exercise, including physical toil, in a healthy, balanced life.
- ◆ To delight in the satisfying feeling of growing intellectually and to become lifelong learners.
- ◆ To discover the joy and personal satisfaction of service to others and to God.
- ◆ To highly value personal integrity in all its aspects (honesty, consistency of character, respect for others, etc.) and to practice it with growing consistency in their own lives.

## Our Mission

Milo Adventist Academy is a school family committed to creating opportunities for

- ◆ developing a Christlike character
- ◆ pursuing educational excellence
- ◆ and discovering the joy of service

in a safe, nurturing, and friendly environment.

## STUDENT COMMITMENT

- ◆ I have committed my life to Christ or am willing to consider doing so.
- ◆ I am willing to live a Christian lifestyle while enrolled at MAA.
- ◆ I welcome the idea of a campus where I will be nurtured emotionally and academically, and I am willing to be nurtured spiritually. I will contribute to the creation of such an atmosphere on the MAA campus.
- ◆ I am willing to commit myself to the process of achieving the desired outcomes in my own life.
- ◆ I will not engage in any behaviors that harm myself or others physically, emotionally, or spiritually.
- ◆ I will live by the policies outlined in the student handbook.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

## LIFESTYLE INFORMATION

Have you ever smoked or used any other form of tobacco?  yes  no When last? \_\_\_\_\_

Have you ever used illegal drugs?  yes  no When last? \_\_\_\_\_

Have you ever used alcohol?  yes  no When last? \_\_\_\_\_

Have you ever been involved in theft?  yes  no When last? \_\_\_\_\_

Have you ever been arrested, charged with a crime, on probation, or in trouble with juvenile authorities?  yes  no

When? \_\_\_\_\_ If you wish to explain, you may do so on an additional sheet of paper.

Have you ever been suspended or expelled from school?  yes  no Explain when and why? \_\_\_\_\_

I verify that all information in this application is true and accurate, to the best of my knowledge.

I understand that if it is discovered that this information is false, my enrollment at Milo Adventist Academy will be jeopardized.

\_\_\_\_\_  
Student signature

\_\_\_\_\_  
Date

### Application procedure checklist

**#1 Distribute the three recommendation forms**  
Principal, Employer, and Youth Leader

**#2 Complete forms and send to MAA:**

- This application form with all pages completed.
- Application fee (\$25.00)
- Student records request form
- Health Information form
- Parent Permission form
- W-4 Tax form
- I-9 Tax form

**#3 Make interview appointment**

Upon receipt of the application fee, completed forms, and all three recommendations, you will be contacted for the interview.

**#4 Bring to the interview**

- Student's original Social Security card and Birth Certificate
- Family medical insurance card
- Photo ID (Permit, Drivers license, Student card, passport)
- Financial assistance verification if needed (work sponsorships, church aid, other commitments)

*Acceptance notification within 10 days from interview*

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