



PO Box 400  
Stillmore, GA 30464  
(912) 562-4405 \* (912) 685-2456  
fax (912) 563-3465  
[www.deaeagles.com](http://www.deaeagles.com)

## **A Pre-Kindergarten through Grade 12 Independent School**

We are pleased that you are considering David Emanuel Academy for your child or children. DEA provides young people with a safe and nurturing environment, a challenging curriculum, many opportunities for extracurricular involvements, a personalized approach, and Christian-based education.

Examine our website and/or contact the school office at the numbers above for further information or to schedule a tour or student visit. You are also invited to attend any of our on-campus programs from chapel to athletic events.

### **Application Process:**

Parents submit completed student application and \$25 application fee.

DEA requests records from current/previous schools.

Schedule an interview with a DEA administrator.

Following are some comments about our school from students, staff, and parents:

- ✓ Everyone is someone at DEA.
- ✓ God is in our school.
- ✓ We have great students.
- ✓ Our students have opportunities to participate in many different activities.
- ✓ Faculty members work together.
- ✓ DEA demands quality.
- ✓ DEA is one big family and the bonds we form last a lifetime.
- ✓ The school provides a secure Christian environment.

### **Statement of Non-Discrimination**

David Emanuel Academy, Inc. admits students of any race, color, national, and ethnic origin on a space-available basis to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, national or ethnic origin in administration of its educational policies, admission policies, athletic and other school-administered programs.

APPLICATION FOR ADMISSION  
David Emanuel Academy

P O Box 400  
Stillmore, GA 30464  
912-562-4405 \* 912-685-2456  
Fax: 912-562-3465  
www.deaeagles.com

<b>Office Use Only</b>	
Received	_____
Accepted	_____
Denied	_____

Parent's Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Father's Cell: \_\_\_\_\_ Work: \_\_\_\_\_

Mother's Cell: \_\_\_\_\_ Work: \_\_\_\_\_

Children to be enrolled:

Full Name	Date of Birth	Year Entering	Grade Entering
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

List child/children's current school and address:

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

How did you hear about David Emanuel Academy?  
(Please indicate all that apply.)

Website \_\_\_\_\_ Friend \_\_\_\_\_ Newspaper \_\_\_\_\_ Radio \_\_\_\_\_

Social Media \_\_\_\_\_ Direct Mail \_\_\_\_\_ Other \_\_\_\_\_