



SAN FERNANDO VALLEY ACADEMY

17601 LASSEN STREET, NORTHRIDGE, CA 91325

TEL 818-349-1373

FAX 818-773-6353

WWW.SFVA.ORG

NEW STUDENTS ONLY: STUDENT PROFILE

2023-2024 SCHOOL YEAR

(STUDENT'S HANDWRITING ONLY)

1. Student's Name _____

Last

First

Middle

2. Is it **your** personal desire to attend San Fernando Valley Academy? Yes ___ No ___

3. IF ACCEPTED, what do you hope to receive from SFVA? _____

4. IF ACCEPTED, how will you contribute to SFVA's positive school climate? _____

5. List any special honors or awards you have received: _____

6. Athletic Participation Survey:

Sports Played
(eg. Track)

Level
(eg. Varsity)

Grade Played
(eg. 8th)

7. Activities and Fine Arts Participation Survey:

Activity Participation
(eg. ASB)

Grade
Participated

Fine Arts
(eg. Band)

Grade
Participated

8. Have you had difficulties with students, teachers, or subjected to major school discipline? Yes ___ No ___ Please explain.

9. Are you a baptized member of the Seventh-day Adventist Church? YES ___ NO ___

10. Are you active in your local church? Yes ___ No ___ Name of Church? _____ Please list the church activities
in which you and your family participate: _____

11. Please explain how your religious faith shapes who you are as a person: _____

Student's Signature _____ Date _____