



Oak Forest Academy

Operated by Amite Independent School
600 Walnut St.
Amite, Louisiana 70422

(985) 748-4321
FAX: (985) 748-4320

Drew Misita
Head of School
Phill Junkins
Upper School Principal
Amy McNeal
Lower School Principal
Loren Lee
Guidance Counselor

Application for Admission-Prospective Students

2026-2027

Please complete the student Application for Admission packet for EACH student who will be attending Oak Forest Academy during the 2026-2027 school year.

All forms must be completed for each student and the following documents are required at the time of registration.

No application for admission will be accepted without all required information.

- _____ Application for Admission
- _____ Membership Form and Fee (one time family fee)
- _____ Report Card, most recent (Grades 1st-12th)
- _____ Transcript (Grades 9th-12th only)
- _____ Copy of child's Birth Certificate
- _____ Immunization Record, current
- _____ Copy of child's social security card
- _____ Any Educational Plan (IEP, Accommodations Plan, etc.)
- _____ Principal Evaluation Form (Grades 1st-12th)
- _____ Teacher Evaluation Form (Grades 1st-12th)
- _____ Copy of parents' driver's license

*If you should have any questions, please contact Allison Leto, Director of Admissions, at 985-748-4321 ext. 6
allison.letto@ofajackets.org



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Oak Forest Academy Registration Dates for the 2026-2027 school year:

Sibling February 3th – 4th, 2026 (In-Person)
Alumni February 5th – 6th, 2026 (In-Person)
Open Registration February 10th – 12th, 2026 (In-Person)

OAK FOREST ACADEMY TUITION & FEES FOR 2026-2027 SCHOOL YEAR

Number of Children	Bldg & Maint Fee Per Family <i>*Due once student is accepted.</i>	Annual TUITION w/FEES * due on/before 6/15/2026	Semi-Annual due on/before 6/15/2026 12/15/2026	DUE ON OR BEFORE 5 th or 17 th of each month	
				12 MO PMTS	10 MO PMTS
1	\$600	\$ 6,542	\$ 3,270	\$ 545	\$ 654
2	\$600	\$ 11,836	\$ 5,922	\$ 986	\$ 1,184
3	\$600	\$ 17,753	\$ 8,877	\$ 1,479	\$ 1,775
4	\$600	\$ 22,423	\$ 11,211	\$ 1,869	\$ 2,242
5	\$600	\$ 28,029	\$ 14,014	\$ 2,336	\$ 2,803
6	\$600	\$ 33,634	\$ 16,817	\$ 2,803	\$ 3,363
7	\$600	\$ 39,240	\$ 19,620	\$ 3,270	\$ 3,924
8	\$600	\$ 44,846	\$ 22,423	\$ 3,737	\$ 4,485
9	\$600	\$ 50,451	\$ 25,226	\$ 4,204	\$ 5,045
10	\$600	\$ 56,057	\$ 28,029	\$ 4,671	\$ 5,606

- Fees included with Tuition are \$300 per student for: Enrollment \$150, Jacket Pass \$100, and Technology \$50.

Please state any extracurricular interests offered at OFA that would interest the applicant:

Football____ Basketball____ Soccer____ FastPitch Softball____ Cross Country____ Track____ Baseball____
4-H____ SGA____ Interact Club____ Cheer____ Dance____ Fellowship of Christian Athletes ____ Robotics____

Parent's Names and information are required. Please print.

Father's Full Name _____

Mother's Full Name _____

Legal Guardian (Male)_____

Legal Guardian(Female)_____

Preferred Name _____

Preferred Name _____

Date of Birth _____

Date of Birth _____

Mailing Address _____

Mailing Address _____

Home Phone # _____

Home Phone # _____

Cell Phone # _____

Cell Phone # _____

E-mail _____

E-mail _____

Employer _____

Employer _____

Occupation _____

Occupation _____

Business # _____

Business # _____

OFA Alumnus __ Yes __ No If yes, graduation year_____

OFA Alumnae __Yes __No If yes, graduation year_____

Maiden Name _____

Check all that apply:

- Parents Married Parents Separated Mother Deceased Father Deceased
 Single Parent Divorced

Student lives with (Check all that apply):

- Mother & Father Mother Father Guardian(s)
 Stepmother Stepfather

If parents are divorced or separated, to whom should correspondence be sent?

- Both Parents Mother Father

If parents are divorced, who has legal custody?

- Joint Custody Mother Father

- **PLEASE SUBMIT LEGAL DOCUMENTS REGARDING CUSTODY AND/OR VISITATION CHANGES.**

By signature below, I certify that all information included in this packet is correct to the best of my knowledge. Any omission or falsification of requested information is grounds for disciplinary action up to and including denial of admissions or expulsion.

Parent Signature

Date

PRINCIPAL EVALUATION FORM

Please print additional forms as needed for additional students



Instructions to Parents: Please complete items 1 through 3, then give this form to the Principal or other authorized officer at your child's current school and ask that it be completed and returned to the Oak Forest Academy Admissions Office.

1. Applicant Name: _____ Applying to grade: _____
My son/daughter is applying for admission to Oak Forest Academy. I would appreciate you completing this form and returning it directly to the Oak Forest Academy. I hereby authorize the release of my child's records and evaluative data to Oak Forest Academy.

2. Parent/Guardian Signature: _____

3. Date: _____

Name of School: _____ Phone number: (_____) _____

Principal Signature: _____ Date: _____

Is the candidate's record with you a true index of ability, or have outside circumstances interfered with academic achievement? (for example: illness, excessive involvement in extra-curricular activities, difficult home situation, etc). If not a true index, please explain:

This student has been sent to my office for disciplinary problems: often seldom never

This student has been suspended _____ times.

Has the student been expelled and therefore, not eligible to return next year? Yes No

Please indicate the student's rating by checking one option:

ACADEMIC ABILITY: High Medium Low

ACADEMIC PERFORMANCE: High Medium Low

CHARACTER: Excellent Good Poor

BEHAVIOR: Excellent Good Poor

ATTENDANCE: Excellent Good Poor

Outstanding talents/accomplishments, comments, or reservations not covered by the above categories:

CONFIDENTIAL TEACHER EVALUATION FORM
Please print additional forms as needed for additional students



THE FOLLOWING PORTION IS TO BE COMPLETED BY THE STUDENT'S PARENT:

Applicant Name: _____ Applying for grade: _____

My child is applying for admission to Oak Forest Academy. Please complete the following and return directly to Oak Forest Academy Admissions Office attention Allison Leto, via fax 985-748-4320 or email allison.letto@ofajackets.org

I hereby authorize the release of my child's records and evaluative data to Oak Forest Academy. I understand that this completed form will not be available to students, parents, or guardians.

Parent's Name: _____ Date: _____

Parent's Signature: _____ Phone: _____

TEACHER: As a current teacher, please evaluate the applicant based on your direct knowledge of him or her. Keep in mind that the student should be evaluated according to others of the same chronological age. The members of the Admissions Committee thank you for your interest, cooperation, and honesty. Your comments will be held in strict confidence. This student's application cannot be processed until the Admissions Office receives this form.

Academic Ability:

- High
- Medium
- Low

Academic Performance:

- High
- Medium
- Low

Completes Assignments:

- Always
- Sometimes
- Never

Attendance/Tardiness:

- Often
- Seldom
- Never

Classroom conduct:

- Frequent disruptions
- Occasional disruptions
- Usually good behavior
- Excellent behavior

Ability to work in a group:

- Has great difficulty
- Sometimes has difficulty
- Usually effective
- Always works well

Teacher Name: _____

Date: _____

Is there anything else about this student you would like to relate?

Ability to stay on task and work independently:

- Needs frequent refocusing
- Needs help frequently
- Needs help occasionally
- Always works well on own

Fulfills responsibilities:

- Rarely
- Sometimes
- Usually
- Always

Response to a new social situation:

- Withdraws to watch
- Participates with strain
- Participates with ease
- Tends to dominate others
- Disrupts activity

Social adjustment with peers:

- Relates poorly
- Establishes relationships but has problems
- Healthy relationships

Response to a conflict situation:

- Gives up
- Cries
- Fights
- Tries to resolve with peer
- Seeks teacher's help

Consideration of others:

- Rarely considerate
- Usually considerate
- Considerate
- Extremely considerate



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Please **ONLY** fill out this form if you **DO NOT** want your student's picture posted on social media, the website, or the yearbook. Please be aware that this will remain on file until a change is requested.

I hereby **DENY** permission of the following minor(s), the right to take, edit, copy, exhibit, publish, and make use of any and all pictures or video taken of minor(s) to be used in and/or for any promotional materials

Student's First and Last Name: _____

Grade: _____

Parent/Guardian Signature: _____