10050 Banburry Cross Dr. #100 J
Las Vegas, NV 89144
TriviumAcademySN.org
Phone: (702)462-6297

TRIVIUM ACADEMY
OF SOUTHERN NEVADA

Office Use Only
Date Received_____
Code_____ Interview Y/N
Date of Interview_____

Admissions Application

Academic Year 2026-2027

Thank you for your interest in Trivium Academy of Southern Nevada, a ministry of Calvary Red Rock. When your completed application and additional items are received, you will be contacted to schedule a family interview.

Section 1 - Student

Student's Full Name_____

Preferred Name/Nickname: _____

Grade applying for: _____ Previous School: _____ Current Grade: _____

Birth Date: _____ Age: _____ Gender: _____ Male _____ Female

Student Address _____

City _____ Zip _____ Home Phone_____

Applicant lives with:

___ Both Parents ___ Mother ___ Father ___ Stepmother ___ Stepfather ___ Legal Guardian

Section 2 - Parent/Guardian Information

Father's Full Name (or Guardian): _____

Home Address *if different from Student*: _____

Home Phone: _____ Profession and Position: _____

Business Phone: _____ Cell Phone: _____

Email Address: _____

Mother's Full Name (or Guardian): _____

Home Address *if different from Student*: _____

Home Phone: _____ Profession and Position: _____

Business Phone: _____ Cell Phone: _____

Email Address: _____

Section 3 - Student Questionnaire

What is your favorite school subject? _____

What is your least favorite school subject? _____

What is your favorite music or bands? _____

What are your favorite movies? _____

What are some of your hobbies, sports, interests, and talents? _____

_____

How often are you involved in the activities of your church? *Check any that apply*

Several times a week _____ Once a week _____ Occasionally _____ Rarely _____

Are family devotions a part of your regular family routine? _____

_____

What books have you enjoyed reading or having read to you? _____

_____

Why would you like to become a TAOSN student? _____

_____

_____

What aspect of your academic life are you planning to work on this year? _____

_____

What are your long-term academic goals and career aspirations? _____

_____

Other brothers and sisters (name, age, present grade). _____

_____

Brother's or sisters currently applying to TAOSN: _____

_____

Anything else you would like for us to know about you or questions you may have:

_____

_____

_____

_____

_____

Section 4 - Academic Information

Present schooling arrangements: _____ Phone: _____

School Adress: _____

Has applicant ever been suspended or dismissed for academic, disciplinary, or other reasons? _____

If yes, please describe the circumstances. _____

Has applicant ever repeated a grade, skipped a grade, had any remedial or accelerated instructions, or been recommended for such? _____ If yes, please describe. _____

_____

Does the applicant have any academic limitations or learning disabilities of which we should be aware? If yes, please specify. _____

_____

Has the applicant ever consulted, or been referred to, a psychiatrist, psychologist, or psychiatric social worker for professional assistance? _____ If yes, please describe the circumstances. _____

_____

Tell us about your student's recent school experience; what subjects, what level of difficulty, what curricula are being used, etc. _____

_____

How many hours per day does your student spend on school work? _____

What are your students academic strengths? _____

What are your students academic weaknesses? _____

What are your students character strengths? _____

What are your students character weaknesses? _____

Why have you decided to enroll your student in TAOSN? _____

_____

_____

Additional comments _____

_____

_____

_____

Section 5 - Next Steps

Choose your academic plan. All costs are per academic year.

_____ Fulltime in-person 5-days a week $8,000

Homeschool Families

_____ TAOSN Home Platform, all subjects 1st - 12th grade = $2,400

_____ Core Track Platform at home: Math and/or Language Arts 1st - 12th grade:
_____ 1 Subject = $1,000 _____ 2 Subjects = $1,500

_____ Ala Cart; TAOSN Enrichment Day, 3rd-12th grade = $1,800 (Thursdays)

Total: $_____ Payable over 10 months beginning September 1 with the last payment June 1, 2027.

Non-Discriminatory Policy
TAOSN abides by all applicable local, state and federal anti discrimination laws. In doing so, we do not waive any of our statutory protections or exemptions under such laws.

Handouts: *initial*
_____ I have received the Statement of Faith
_____ I have received the Pastoral Reference (return directly to the Admin Staff)

The following must accompany this application:
_____ Signed Statement of Faith
_____ Parent/Guardian Testimony
_____ Most recent report card
_____ $200 per family registration fee - *Make checks payable to TAOSN - Memo: Student Name*

Return to:

Calvary Red Rock - TAOSN
Attn: Jason Wilhoite
10050 Banburry Cross Dr. #100 J
Las Vegas, NV 89144

OR

Email: JWilhoite@calvaryredrock.org
Pay Online: TriviumAcademySN.org
Admissions - Registration Deposit

***After** your application and registration fee is received, we will schedule a family interview. If we determine that TAOSN is not right for your family, your check will be returned.*

I/we have answered the above questions in truth and to the best of my/our ability. I/we hereby certify that the facts contained in this enrollment application are true and complete to the best of our knowledge. We acknowledge that submission of application does not constitute approval of admission.

TAOSN is operated as an exempt school under the provision of NRS 394.211 and as such is exempt from the provisions of the Private Elementary and Secondary Education Authorization Act.

_____ _____ _____ _____
Father's/Guardian's Signature Date Mother's/Guardian's Signature Date

_____ _____
Student Signature (3rd-12th grade) Date