Before you can complete an application, you must First Create an Account in FACTS Admissions. From your schools Admission Page Select Create an Account



Enter your Information, Username and Password (This login is used to submit your Application) and Check that you Accept Terms and Select Create an Account



Confirmation your Account has been Created will Display. Check your Email for a Verification Link ** Please Note it May Take Several Minutes to Receive Verification Link**



Click the Verify Account Link in your Email



Enter your Username and Password and Select Login



Select Create a New Student Application



Enter the Student's Name, Date of Birth and Select Grade from the "Apply to" Dropdown. Select Submit

| | Application | |
|---------------------|------------------------------------|----------------|
| | Welcome Jane. You are currently lo | gged in. |
| | Create a New Student Applic | ation |
| | Student First Name * | 1 Enter the |
| | John | Student's Name |
| | Student Middle Name | |
| | | |
| | Student Last Name * | |
| | Doe | |
| | Student Suffix | |
| | | |
| 2. Enter | Student Date of Birth * | |
| Date of Birth | 09/01/2019 (mm/dd/yyyy) | |
| | Apply to Grade: 02 | Select |
| 4. Select Submit | Submit | |

Select Start Application

| Application | | | | |
|---|---|------------------------|--------------------|-------------------------------|
| Welcome Jane. You a You have 1 student a | are currently logged in. pplication created: | | | |
| Student | School Year Applied | Grade Level Applied | Application Status | Admissions Progress Status |
| Doe, John | 2023-2024 | 02 | Start Application | Application |
| Create a New Stude | ent Application | | | |

You will now see the Application Packet ****Please Note: Packet will Vary by School**** Select a Section to Begin. Once all Sections are Complete Select Application Review.

Please Note: EACH Section Must be Completed in Order to Submit Your Application Packet

| | John Doe Year: 2023-2024 Grade: 02 | Applicant Information |
|------------------------------|--|---|
| | Instructions & Resources | Please fill in the following fields about the <i>applicant</i> as thoroughly as |
| Select a Section to Begin | Applicant Information | Student Name John Doe (Change) |
| | Current and Previous Schools | Preferred Name |
| | Religious Affiliation | |
| | Household 1 | Student Address 2. Enter your |
| | Household 2 | Street Address * Information |
| | Siblings | City * |
| | Alumni or Currently Enrolled Students | Country * United States (USA) An Asterisk (*) Denotes a Required Field |
| | Records Request Authorization | State * |



Each Section Must be Completed in Order to Submit Your Application

Once all Sections are Complete Select Application Review



Each Section Must be Completed in Order to Submit Your Application

Review your Information and Select Complete Review and Submit to Submit your Application **Please Note: Some Schools May Require and Application Fee**

