

Bethel Christian Academy Application

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email _____

Age: _____ Sex: _____ Birth Date: _____ Birth Place: _____

Personal and Family Information

Fathers Name: _____ Phone Number: _____

Mothers Name: _____ Phone Number: _____

Physician Name: _____ Phone: _____

Has the student been diagnosed with any physical or learning disabilities? **Yes** or **No**

If yes, please explain: _____

Has the student received immunizations? (include copy for our records) **Yes** or **No**

Emergency Contact Information

Please list three emergency contact references.

Name: _____ Relationship: _____ Phone: _____

Name: _____ Relationship: _____ Phone: _____

Name: _____ Relationship: _____ Phone: _____

Religious Information

Church Attending: _____

Address: _____ Pastor: _____

Academic Information

School Last Attended: _____

Address: _____

Phone: _____

Last Grade Completed: _____

Has the student been expelled, dismissed, or suspended, to another school? **Yes** or **No**

Has the student disciplinary difficulty at school? **Yes** or **No**

Does the student have a juvenile or arrest record? **Yes** or **No**

Has the student ever used tobacco or nonprescription drugs of any kind? **Yes** or **No**

Has the student ever failed an academic subject in school? **Yes** or **No**

How would you describe your child's educational background?

How did you hear about BCA? _____

What made you choose to apply for BCA? _____

Disclaimer and Signature

The application must be filled out completely before it can be processed. Upon submitting an application there is an application fee of \$50 that is non-refundable. Once this application has been processed, an interview may be scheduled with the parents and the student.

I certify that my answers are true and complete to the best of my knowledge.

Parent
Signature: _____ Date: _____