



# WHITESBURG CHRISTIAN ACADEMY

*A Ministry of Whitesburg Baptist Church  
Students are well-trained servant leaders and passionate followers of Christ.*

Applying for Grade (circle one):

1 2 3 4 5 6 7 8 9 10 11

Date Received: \_\_\_\_\_

## STUDENT APPLICATION 2008 - 2009

Registration Fee Paid: \_\_\_\_\_

Student's Full Name: \_\_\_\_\_  Male  Female

Preferred Name: \_\_\_\_\_ Ethnicity: \_\_\_\_\_

Student's Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Student S.S.# \_\_\_\_\_ -- \_\_\_\_\_ --

### PARENT INFORMATION

Name of Father:		Name of Mother:	
<input type="checkbox"/> Natural Father <input type="checkbox"/> Stepfather <input type="checkbox"/> Other		<input type="checkbox"/> Natural Mother <input type="checkbox"/> Stepmother <input type="checkbox"/> Other	
Father's email:		Mother's email:	
<i>Check here if this is the child's primary residence</i> <input type="checkbox"/> <i>(fill in only if different from above)</i>		<i>Check here if this is the child's primary residence</i> <input type="checkbox"/> <i>(fill in only if different from above)</i>	
Address:		Address:	
City:		City:	
State, Zip:		State, Zip:	
Occupation/Position:		Occupation/Position:	
Company Name:		Company Name:	
Phone (H) :	Phone (W):	Phone (H) :	Phone (W):
Cell Phone:	Pager:	Cell Phone:	Pager:
Church Name:		Church Name:	
Non-custodial Parent's Name:			
Address:		City, State, Zip	
Describe nature of custody arrangements and provide proof of custody. School records and information may be disclosed equally unless legal documentation is provided to the school.			
SIBLINGS:			
Name:	Age/Grade	M/F	School:
Name:	Age/Grade	M/F	School:
Permission to Publish GRANTED for: <input type="checkbox"/> Email <input type="checkbox"/> Phone <input type="checkbox"/> Address <input type="checkbox"/> Photos <input type="checkbox"/> Video <input type="checkbox"/> Permission to Transport to ROC			

### LOCAL EMERGENCY CONTACTS *(in the event parents cannot be reached)*

Name: \_\_\_\_\_ Relationship to child: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work/Cell Phone: \_\_\_\_\_ Other Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship to child: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work/Cell Phone: \_\_\_\_\_ Other Phone: \_\_\_\_\_

### PICK UP INFORMATION: The following may pick up my child from school:

1. \_\_\_\_\_ 2. \_\_\_\_\_
3. \_\_\_\_\_ 4. \_\_\_\_\_

The following may NOT pick up my child: \_\_\_\_\_

### GENERAL INFORMATION:

Previous School (name and address): \_\_\_\_\_

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Dates at previous school: \_\_\_\_\_ Last grade attended: \_\_\_\_\_

Ever retained? \_\_\_\_\_ Grade: \_\_\_\_\_ Reason: \_\_\_\_\_

Ever suspended, expelled or asked to leave any school? \_\_\_\_\_ Reason: \_\_\_\_\_

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Does your child have any physical problems that will be a handicap in his work? \_\_\_\_\_ Explain: \_\_\_\_\_

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Does your child have any professionally diagnosed learning difficulties that will be a handicap in his work? \_\_\_\_\_ Explain: \_\_\_\_\_

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<b>GRANDPARENT INFORMATION</b>	
Name:	Name:
Address:	Address:
City, State, Zip:	City, State, Zip:
Email:	Email:
Name:	Name:
Address:	Address:
City, State, Zip:	City, State, Zip:
Email:	Email:

**IN MAKING THIS APPLICATION, WE UNDERSTAND, AGREE, AND CERTIFY THAT:**

1. It is a privilege for my child to attend the Academy.
2. We have read, understand and support the doctrinal statements of the school and will not interfere with the teaching of these principles.
3. The teacher/administration has full discretion in the classroom discipline of our child.
4. Failure to abide by the discipline procedures may result in dismissal from the Academy.
5. The school may dismiss my child for just cause.
6. We will assume all financial responsibilities as published in the Fee Schedule and will pay all tuition and fees (including late payment penalties) in accordance with School Policy.
7. We will endorse the entire educational program of the school and will comply with all current policies, rules and regulations.
8. The information contained on this application form and all other forms completed by us for school use is accurate to the best of our knowledge.
9. At least one parent is a "born again" Christian and regularly attends church with his child.

Date: \_\_\_\_\_ Signature of Parent/Guardian: \_\_\_\_\_

WHITESBURG CHRISTIAN ACADEMY ADMITS STUDENTS OF ANY RACE, COLOR, OR NATIONAL AND ETHNIC ORIGIN TO ALL RIGHTS PRIVILEGES, PROGRAMS, AND ACTIVITIES GENERALLY ACCORDED OR MADE AVAILABLE TO STUDENTS OF THE SCHOOL. WHITESBURG CHRISTIAN ACADEMY DOES NOT DISCRIMINATE ON THE BASIS OF RACE, COLOR, OR NATIONAL AND ETHNIC ORIGIN IN ADMINISTRATION OF ITS EDUCATIONAL POLICIES AND ADMISSION.