



Faith

Christian Academy

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NEW HOMESCHOOL STUDENT ADMISSIONS APPLICATION

Print each student's full legal name:

First	Middle	Last	Student Goes By:	Race	Gender	Birth Date	*Entering Grade

* Pre-K4 students must be four years old and Kindergarten students must be five years old by September 1. Priority is given to students whose birthdays are before July 1.

Home Address: _____
(Number & Street) (City) (State) (Zip)

Home Phone Number: _____

Family Information (Grandparents will be invited to a special "Grandparent's Day" held in the spring.)

Father's Name: _____ Occupation: _____

Employer: _____ Work Phone: _____

Cell Phone _____ E-Mail: _____

Paternal Grandparents: _____
(Names) (Address)

(Phone Number) E-Mail: _____

Mother's Name: _____ Occupation: _____

Employer: _____ Work Phone: _____

Cell Phone _____ E-Mail: _____

Maternal Grandparents: _____
(Names) (Address)

(Phone Number) E-Mail: _____

Parent's Marital Status: Married ___ Divorced ___ Remarried ___ Single ___

If separated/divorced or child's residence is not with biological parents, please explain legal custody and rights to information (attach separate sheet if necessary):

(If requested, Faith Christian Academy will provide both legal parents information unless a court order indicates otherwise. Please provide copies of court orders that pertain to parental rights.)

Emergency Contact Information and Persons Permitted to Pick Child up When Parent is Unavailable

Persons (in order) to contact in case of emergency: (Parents will always be called first unless requested otherwise.)

1. Name _____ Phone _____ Cell _____

2. Name _____ Phone _____ Cell _____

School Record

School last attended _____ Phone _____

Address _____
(Street) (City) (State/Zip)

Has your student failed any grades? ____ If yes, which grades? _____

Has your student ever been suspended, dismissed, or expelled from school? ____ yes ____ no

If yes, please explain, giving the school's name and dates. _____

Faith Christian Academy may contact the previous school and specific teachers for a reference for applicants. If your child was in a pre-school last year please provide the name of their teacher: _____

Choose Classes

Elementary Students Place a check beside "Specials Class" you are interested in for each student:

Student Name:			
Art			
Computer/Technology			
Library			
Physical Education			
Music/Band			
Spanish			

Secondary Students indicate the classes you would like to take for each student: _____

Spiritual Information

Do you have a personal relationship with Jesus Christ? ____ Students ____ Father ____ Mother

Church attending _____ Member? ____

Name of pastor _____ Phone _____

Financial Information:

A non-refundable registration fee of \$50 per child must accompany this application form and will be held until the application process is complete.

Person responsible for payment of fees _____ Phone _____

Address _____

See Homeschool Brochure/Flyer for tuition and fees