

Grace Academy
Student Application
Academic Year _____
Please complete one form per student.

Student's Name _____
Last First Middle Prefers to be called

Date of Birth _____ Male _____ Female _____ Social Security Number _____

Currently in Grade _____ Applying for Grade _____
(Kindergarten applicants must be 5 years old by August 31 of the enrollment year.)

Extended Learning: None _____ Tues _____ Thurs _____ Fri _____

Father/Guardian:

Full Name _____
Last First Middle Name called

Home Address _____
Street or Rural Route City State Zip

Mailing Address _____

Home Phone _____ Cell Phone _____ E-Mail _____

Business _____ Position _____ Work Phone _____

Business Address _____
Street or Rural Route City State Zip

Mother/Guardian:

Full Name _____
Last First Middle Name called

Home Address _____
Street or Rural Route City State Zip

Mailing Address _____

Home Phone _____ Cell Phone _____ E-Mail _____

Business _____ Position _____ Work Phone _____

Business Address _____
Street or Rural Route City State Zip

Applicant lives with _____

Please note any special family circumstances _____

Applicant's Siblings:

Name _____ Age _____ Current Grade _____ School Name _____

Name _____ Age _____ Current Grade _____ School Name _____

Name _____ Age _____ Current Grade _____ School Name _____

Church:

Family's Church _____ Years attended _____ Members _____

Pastor's name _____ Phone _____

Please check all that apply:

_____ Applicant attends church regularly _____ Parents attend church regularly
_____ Applicant belongs to church's youth or children's group _____ Applicant attends Sunday school

Academic history of applicant, including preschool (begin with the most recent)

School _____ Years Attended _____

Address _____
Street or Rural Route City State Zip

School _____ Years Attended _____

Address _____
Street or Rural Route City State Zip

School _____ Years Attended _____

Address _____
Street or Rural Route City State Zip

Has the applicant ever been dismissed or suspended from any public or private school? ___ Yes ___ No
If yes, please give dates and explain. _____

Has the applicant ever been evaluated for learning difficulties, ADHD, or been diagnosed with any special educational need and received special services which may include, but are not limited to, speech, physical therapy, auditory processing intervention, etc? _____ Yes _____ No If yes, please attach the records and give dates and general results in this space. _____

Has the applicant ever received psychological testing or been involved in any counseling? ___ Yes ___ No
If yes, please attach records and explain. _____

Does the applicant require any medication? ___ Yes ___ No If yes, please explain. _____

Has your child ever had an IEP (Individual Education Plan)? ___ Yes ___ No If yes, please explain. _____

Please list applicant's extracurricular interests, abilities, and achievements. _____

Additional Information (to be completed by parent/guardian):

Why do you want your child to attend Grace Academy? _____

What are your expectations of Grace Academy as it fits into your child's education? _____

Who (which parent/guardian) will be responsible for the direction and implementation of your student's assignments during home classroom days? _____

References:

Please provide names of two people whom we may speak with as a reference for your family:

1. Name _____ Relationship to you _____

Contact Information _____

2. Name _____ Relationship to you _____

Contact Information _____

Parent Agreement and Commitment

In signing this application:

1. We, as parents, have answered the questions in this application to the best of my/our knowledge and ability.
2. We have read and agree with the Mission Statement, Statement of Faith, and Education Philosophy of Grace Academy.
3. We have read the Grace Academy Family Handbook and Policy Manual. We understand and agree to abide by all policies included.
4. We are committed to providing a quality Christian education for our child and in accordance with North Carolina existing law.
5. At least one parent or legal guardian is a member of a Christian church that is in keeping with Grace Academy's Statement of Faith.
6. We accept the challenge to "train up a child in the way he should go" (Proverbs 22:6) and we do state that this training will be carried on in the home. We authorize Grace Academy to extend that training to the school classroom setting.
7. We understand that we have a God-given obligation to be actively involved in the education of our children. Therefore, we will be responsible for the direction and implementation of our student's assignments during home classroom days.
8. We will support the school through prayer and a positive attitude, and in keeping with Matthew 18:15, we are committed to giving a good report by sharing complaints only with the people involved. Unresolved issues will be taken care of by using the school's grievance policy.
9. We understand and will punctually fulfill our financial commitment to the school.
10. We, as parents of the student applicant, do sincerely give our pledge to the above items. We understand that failure of the parents or child to comply with the established regulations and discipline, parental commitment, or failure to meet financial obligation will forfeit the student's privilege of attending Grace Academy.

Signed _____ Date _____
(Father or Legal Guardian)

Signed _____ Date _____
(Mother or Legal Guardian)

High Country Christian Education Ministries/Grace Academy will make no distinction in its admissions policies with regard to an individual's race, color, or national and ethnic origin.

How did you hear about Grace Academy? _____
Please list the name of the Grace Academy parent who referred you, if applicable. _____

Office use: Date Rec'd _____ Total Annual Tuition _____