

Grace Temple Christian Academy
STUDENT APPLICATION



Application Date: _____

Student Information

Full Name	_____
Address	_____ City/State/Zip _____
Home Phone	_____ E-Mail _____
Age	_____ Sex _____ Birth Date _____ Birth Place _____
Last School Attended	_____
School Address	_____ City/State/Zip _____
Last Grade Completed	_____ Social Security Number _____

Family Information

Father's Name	_____
Address (If different from child)	_____
Employment	_____ Position Work _____ Phone _____
	_____ Cell _____ E-mail _____
Mother's Name	_____
Address (If different from child)	_____
Employment	_____ Position _____
Work Phone	_____ Cell _____ E-mail _____
Emergency Phone Number:	_____
Marital Status:	<input type="checkbox"/> Married <input type="checkbox"/> Widow <input type="checkbox"/> Divorced <input type="checkbox"/> Separated
Other children in Family of school age if not applying for GTCA:	
Name	_____ Age _____
Name	_____ Age _____
Name	_____ Age _____
Reason they are not applying:	_____ _____ _____

Religious Information

Church Attending	_____
Address	_____
City/State/Zip	_____
Pastor	_____ Phone number _____
Father a Christian	_____. How do you know? Please explain _____
Mother a Christian	_____. How do you know? Please explain _____
Has applicant ever made a profession of faith in Christ?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Medical Information

Family Physician _____ Phone _____
Does the student have any physical impairments or allergies? Yes No (If yes, please explain) _____
Is the student's immunization record up to date? Yes No

Scholastic Information

Has the student ever been expelled, dismissed, suspended or refused admission to another school? Yes No.
If yes, why? _____
Has the student ever had disciplinary difficulty at school? Yes No. If yes, why? _____
Does the student have a juvenile or arrest record? Yes No. If yes, explain _____
Has the student ever used tobacco or non prescription illegal drugs of any kind? Yes No. If yes, explain _____
Has the student ever failed an academic subject or grade in school? Yes No.
If yes, explain _____
Please indicate the academic level of student's previous work: Excellent Good Average Poor

General Information

How did you hear about the school? _____
Reason for selecting this school? _____
This application must be filled out completely before it can be processed. A registration fee of \$50.00 must accompany the application and is **non refundable**. An interview with the parents and student will be required before final acceptance. Parents give GTCA permission to contact and inquire of parents' and student's relationship, and overall performance at previous school.
Grace Temple Christian Academy has a non discriminatory policy and therefore does not discriminate against members, applicants, students, and others on the basis of race, color, national or ethnic origin.
I hereby pledge to pay my financial obligation to the school on the due date and understand that it may be necessary to withdraw my student if proper arrangements are not made on a past due account.
I appreciate the standards of the school and do not tolerate profanity, obscenity in words or in action, dishonor to the Godhead and the Word of God, or disrespect to the personnel of the school. I hereby agree to support all regulations of the school in the applicant's behalf and authorize the school to employ discipline it deems wise and expedient for the training of my student.
I understand that the school reserves the right to dismiss any student who fails to comply with the established regulations and discipline or whose financial obligations remain unpaid.

Signature of Father

Signature of Mother

Date

Date

Revised 8/17