

STUDENT APPLICATION 2019-2020

Holmesburg Christian Academy
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*Lo, Children Are A
Heritage From The Lord
Psalm 127:3*

APPLYING FOR GRADE _____

Full Legal Name of Applicant _____ Gender _____
(Last) (First) (Middle)

Date of Birth _____ Social Security Number XXXX-XX-_____
(last four digits) Phone _____

Address _____ City _____ Zip _____

Living With: Birth Parents ____ Birth Parent & Step Parent ____ Single Parent ____
 Guardian ____ Other _____

Child lives with (Mr. & Mrs. etc.) _____

Relationship to child (Parent, etc.) _____

Father: Mr., Dr., Rev. _____

Mother: Mrs., Dr., Miss, Ms. _____

Address (if different than child) _____

Address (if different than child) _____

Phone H- _____ C- _____

Phone H- _____ C - _____

E-Mail _____

E-Mail _____

Employer _____

Employer _____

Position _____

Position _____

Business Phone # _____

Business Phone # _____

Married ____ Separated ____ Widower ____

Married ____ Separated ____ Widow ____

Divorced ____ Single ____ Remarried ____

Divorced ____ Single ____ Remarried ____

Church Affiliation _____

Church Affiliation _____

Pastor _____

Pastor _____

If accepted, do we have permission to print your phone number in our family directory? ____ Yes ____ No

| | | | |
|------------------------------------|-----|-----------------------|----------------|
| Names of all children in household | Age | Relationship to Child | Current School |
|------------------------------------|-----|-----------------------|----------------|

| | | | |
|-------|-------|-------|-------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

Is it your intention, God willing, to have your child attend HCA for grades K – 8? Yes ____ No ____
 If you are leaving a Christian School, are you leaving in good financial standing? ____ Yes ____ No
 Explain reason for leaving _____

All financial obligations to other schools must be satisfied prior to acceptance to H.C.A.

STUDENT INFORMATION

1. List all previous schools attended:

| NAME | COMPLETE ADDRESS | GRADES | YEARS |
|-------|------------------|--------|-------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

Records will be requested.

Home Schooled _____ Name of evaluator _____

Contact Information _____

2. Has child ever repeated a grade? _____ No _____ Yes If yes, give grade(s) _____

Reason for repeating _____

3. Has child been in a gifted or accelerated class _____ No _____ Yes

If yes, please explain _____

4. Has child had disciplinary or academic difficulty in school or sunday school? _____ No _____ Yes

Reason for difficulty _____

5. Has child ever been suspended or expelled? _____ No _____ Yes

Reason _____

6. Does your child take behavior modification medication? _____ No _____ Yes

If yes, explain _____

7. Does this child have special health problems? _____ No _____ Yes

Explain _____

Does this child wear glasses or corrective lenses? _____ No _____ Yes

8. Does child have any mental, emotional, physical handicaps, or disabilities which require professional attention or may require special attention at H.C.A.? _____ No _____ Yes

Explain and include all reports and/or IEP _____

I understand failure to disclose the above information is grounds for immediate dismissal. Int. _____ Int. _____

9. During previous schooling, have teachers noted any difficulties such as the following:

- | | |
|-----------------------------------|--|
| _____ Copying from the board | _____ Knowing answers, but failing tests |
| _____ General Organization | _____ Confusing left and right |
| _____ Organizing written work | _____ Handwriting |
| _____ Following oral directions | _____ Self Control |
| _____ Comprehending instructions | _____ Aggressive behavior |
| _____ Inattentive | _____ Disturbs other children |
| _____ Completing assignments late | _____ Anger Management |

10. How do you perceive your child's academic achievement?

- Below Average Average Above Average Superior

11. Does child attend Church? _____ No _____ Yes Church name: _____

Sunday School? _____ No _____ Yes Youth group _____ No _____ Yes

If no, why? _____

12. Has your child had any Early Childhood experience? _____ No _____ Yes Location _____

(Please provide Report Card or Progress Report for students entering Kindergarten – 8th Grade)

PARENT INFORMATION

Parents, please answer the following questions in detail:

1. Explain your reasons for enrolling your child in Holmesburg Christian Academy.

2. State reasons for leaving current school if student is transferring.

3. How were you referred to Holmesburg Christian Academy?

3. Does your family have a devotional life of Bible reading and prayer? Explain.

4. How will you support your child's educational and spiritual growth and assure they are prepared for class each day?

5. State in detail your personal relationship to Jesus Christ. How did you receive Him as your Savior? How will you get to heaven? **Both parents must answer separately for application to be complete.**

Father: _____

Mother: _____

The included pages of information are true and correct to the best of our/my knowledge. I understand my child may be dismissed for falsified or deceptive information.

Signature of Father _____ **Date** _____

Signature of Mother _____ **Date** _____

4th – 8th GRADE STUDENT QUESTIONNAIRE

The following questions are to be answered by the 4th – 8th grade student in his/her own handwriting. Answer all questions in sentence form using your best handwriting. Applications are considered incomplete if student has not completed this page.

Name _____ Grade Entering _____

1. Do you enjoy school? List your favorite activities, classes, and share how you use your free time.

2. What class is your most challenging? _____
3. Do you complete your homework? _____
4. Describe your study habits in preparation for class. _____

5. How did you hear about HCA? _____

6. Do you want to attend school here? Why? _____

7. Do you consider yourself a Christian? ___Yes ___ No
How do you know? _____

8. List your talents and how you spend your spare time. _____

9. Do you enjoy reading books or e-books? ___Yes ___No If yes, what type of literature do you enjoy?

10. Do you know any students at HCA? _____ Who? _____
11. Do you respect the teacher's authority? ___Yes ___ No

Signature _____ Date _____