Full Armor Christian Academy

Application for Admission



Statement of Confidentiality: The following information will help us meet the needs of each child and will be handled with confidentiality. If you have changes is address, phone numbers or work information, you are responsible for informing the office of those changes immediately.

Student Information:

publication.

Student's Full Legal Name: First:	Last:	M.I.	
Date of Birth:	Age:	Gender:	
Student's Cell #:	S.S.#: _		
School Last Attended:		Grade Entering:	
Has your child ever been dismissed disruptive, deviant or violent behavior		• • •	nool for
Does your child have any diagnosed requirements? Yes Yes If Yes, please explain:	No	·	ion
Has your child accepted Jesus Chri When:		Savior? Yes	No
Name of Family Church:			
Student's email:			
Internet Access: Full Armor studer computer usage. Please check the I DO give my child permissio I DO NOT give my child perm	appropriate box. n to access the interne	t only under supervision.	vised
Media Information: Students may activities. These photos may be use appropriate box.	·	•	eck the

☐ I DO give my permission for my child's name and/or photo to be used for promotion or

Emergency Names and Numbers: The	e following people have permission to pick up my
student from Full Armor. I understand th	nat it is my responsibility to notify the school ahead of
time if someone other than the persons	named below are to pick up my student. These people
may be contacted in case of an emerge	ncy and a parent cannot be reached.
Name:	
Relationship to student:	
Phone numbers:	
Name:	
Relationship to student:	
Phone numbers:	
Name:	
Relationship to student:	
Phone numbers:	
Name:	
Relationship to student:	
Phone numbers:	
Parent Information:	
Family church ministers will be contacte	ed for a reference check.
•	
Father's Name:	
Home Phone #:	Cell Phone #:
Email Address:	
Employer:	
Work Phone #:	
Name of Family Church:	
Name and Phone # of Minister:	
Mother's Name:	
Home Phone #:	Cell Phone #:
Employer:	
Work Phone #:	
Name of Family Church:	

☐ I DO NOT give my permission for my child's name and/or photo to be used for promotion

or publication.

Poth paranta can be consulted	l by the sebe	al an the behalf of the	atudant unlaca athanvisa	
Both parents can be consulted indicated through legal notifica	•			
special issues regarding custo			•	
-p	, ,	and one of the state of the sta		
Step-parents may have permis	ssion to intera	act with the school on	the student's behalf, unless	
otherwise indicated by a paren	t. Please ma	rk in space below.		
Sten-Father's Name:				
Step-Father's Name: Address:				_
, tad. 5551				-
Home Phone #:		Cell Phone #		
Email Address:				_
Employer:			· · · · · · · · · · · · · · · · · · ·	_
Work Phone #:				
Name of Family Church:			· · · · · · · · · · · · · · · · · · ·	
May be contacted:	Yes	No		
Name and Phone # of Minister	·			
Step-Mother's Name: Address:				- H
ome Phone #:				
Email Address:				_
Employer:				_
Work Phone #:				
Name of Family Church:				
May be contacted:	Yes	No		
Name and Phone # of Minister	·			,
.				
School Directory/Newsletters	S:			
Parent and student names, stu	ident birthday	vs addresses phone	numbers and email addresses	
	-	•	therwise indicated by a parent.	
Our information can be publish				
			-	
Reason for Admission:				

Please explain why you are registering your child into Full Armor Christian Academy:

Name and Phone # of Minister:
