

# Full Armor Christian Academy

## Application for Admission 2021-2022



Statement of Confidentiality: The following information will help us meet the needs of each child and will be handled with confidentiality.

Student's Legal Name:

First: \_\_\_\_\_ Last: \_\_\_\_\_ M.I. \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ Gender: \_\_\_\_\_

Student's Cell #: \_\_\_\_\_ S.S.#: \_\_\_\_\_

Student's email: \_\_\_\_\_

School Last Attended: \_\_\_\_\_ Grade Entering: \_\_\_\_\_

Has your child ever been dismissed, suspended or disciplined in any way by another school for disruptive, deviant or violent behavior? \_\_\_\_\_ Yes \_\_\_\_\_ No

Does your child have any diagnosed or suspected learning differences or special education requirements? \_\_\_\_\_ Yes \_\_\_\_\_ No

If Yes, please explain: \_\_\_\_\_

Has your child accepted Jesus Christ as his/her Lord and Savior? \_\_\_\_\_ Yes \_\_\_\_\_ No

Church: \_\_\_\_\_

Youth Group: \_\_\_\_\_

Father's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone #: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_

Email Address: \_\_\_\_\_

Employer: \_\_\_\_\_

Work Phone #: \_\_\_\_\_

Church: \_\_\_\_\_

Minister: \_\_\_\_\_

Mother's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone #: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_

Email Address: \_\_\_\_\_

Employer: \_\_\_\_\_

Work Phone #: \_\_\_\_\_

Church: \_\_\_\_\_

Minister: \_\_\_\_\_

Other: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone #: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_

Email Address: \_\_\_\_\_

Employer: \_\_\_\_\_

Work Phone #: \_\_\_\_\_

Name of Family Church: \_\_\_\_\_

Name and Phone # of Minister: \_\_\_\_\_

The following people have permission to pick up student(s) from Full Armor. I understand that it is my responsibility to notify the school ahead of time if someone other than the persons named below are to pick up student(s). These people may be contacted in case of an emergency if a parent cannot be reached. If there are any extenuating circumstances Full Armor requires legal documentation for student(s) file.

Name: \_\_\_\_\_

Relationship to student: \_\_\_\_\_

Phone numbers: \_\_\_\_\_

Name: \_\_\_\_\_

Relationship to student: \_\_\_\_\_

Phone numbers: \_\_\_\_\_

Name: \_\_\_\_\_

Relationship to student: \_\_\_\_\_

Phone numbers: \_\_\_\_\_

Name: \_\_\_\_\_

Relationship to student: \_\_\_\_\_

Phone numbers: \_\_\_\_\_