

Freedom Christian On-Line Academy

Grades 3-12

New Student Enrollment Application

OFFICE USE ONLY

Date rec'd. _____
 Check # _____
 Check amt. _____
 Cash pmt. _____
 Rec'd by _____

New Student Enrollment Application fee is \$50.00 (non-refundable) and must accompany this application and the enclosed Statement of Cooperation in order to be processed.

Student Information:

Student's Name _____ Sex ____ Date of Birth _____ Age _____

Home Address _____ City _____ State _____ Zip _____

Home Telephone # (____) _____ Social Security # _____

Grade for which student is applying _____ SCHOOL YEAR _____

Please check one of the following:

Applying for full diploma program

Applying to supplement homeschooling

Please check the courses you want to supplement

- | | |
|---|---|
| <input type="checkbox"/> English | <input type="checkbox"/> Electives (optional) – please list what student would like to take: |
| <input type="checkbox"/> Math | _____ |
| <input type="checkbox"/> Science | _____ |
| <input type="checkbox"/> History | _____ |
| <input type="checkbox"/> Bible | _____ |

School District in which student resides _____

School last attended _____ Dates of attendance _____ through _____

Does your child have any learning disabilities? Yes No If yes, please explain. _____

Has your child repeated or skipped any grade(s)? Yes No If yes, state grade(s) and reason. _____

Has your child ever had any disciplinary difficulty in school? Yes No If yes, explain briefly. _____

Has your child ever been suspended or expelled from school? Yes No If yes, state the reason. _____

Family Information:

Father/Guardian Name _____ Mother/Guardian Name _____

Home Address _____ Home Address _____

City _____ State _____ Zip _____ City _____ State _____ Zip _____

Home Telephone # _____ Home Telephone # _____

Cell Phone # _____ Cell Phone # _____

Email address _____ Email Address _____

Marital status: ___ Married ___ Widowed ___ Separated ___ Divorced ___ Unmarried

If separated or divorced, which parent is legally responsible for child? ___ Father ___ Mother

Father/Guardian Occupation _____ Mother/Guardian Occupation _____

Employed by _____ Employed by _____

Business Tel. # (____) _____ Business Tel. # (____) _____

Church your family attends _____

How did you learn of Freedom Christian Academy?

I have answered all the questions in this enrollment application to the best of my ability. To my knowledge, each answer is truthful and accurate.

Signed: Father / Guardian _____ Date _____

Signed: Mother / Guardian _____ Date _____

**Please mail your completed, *printed*, application along with the \$50.00 enrollment application fee to
Freedom Christian Schools – 3185 York Road – Gettysburg, PA. 17325
*An acceptance letter will be sent within one week of receipt of enrollment application.***