CALVARY BAPTIST ACADEMY
APPLICATION FOR ADMISSION

This application does not assure enrollment but provides necessary information upon which a decision will be based. The registration fee must be paid with this application and is not refundable unless your child is refused admission.

STUDENT INFORMATION:

Full Name_____ Sex M ☐ F ☐ Age_____
Last First Middle

Present Address_____
Street City State Zip

DOB_____ Place of Birth_____ S.S.#_____ Phone_____
(Needed for transcript/trips, etc.)

Last School Attended_____ Address_____

Last Grade which the applicant satisfactorily completed_____

Has the child had any disciplinary difficulty in school?_____ If yes, please explain. _____

_____

Any unusual factors in the child's life? (Absence of a father, or mother, serious illness of child or parents, adoption, etc.)_____

FAMILY INFORMATION: ***E-MAIL ADDRESS (Home)_____***
E-MAIL ADDRESS (Work)_____

	Name	Address	Marital Status	Living	Born Again
Father					
Mother					
Guardian					

Employment of father _____
Company occupation work phone

Employment of mother_____
Company occupation work phone

Education of father ☐ High School ____ years in College ____ years in Graduate School
☐ High School ____ years in College ____ years in Graduate School

EMERGENCY INFORMATION: If your child should need emergency medical care, we should contact:

Doctor_____Address_____ Phone_____

Other than your home or work, whom should we contact in case of an emergency?

Name_____Address_____ Phone_____

_____Parent/Guardian

Application and registration fee should be sent to Calvary Baptist Academy, 126 Douglass Road, NW – Huntsville, AL 35806