

ENROLLMENT FORM

Expiration Date:
June 30, 2011

- A** 1. Has any member of this family ever been enrolled with FCA in the past? No Yes
2. Has any member of this family ever tested with FCA as a non-member? No Yes

B Choose One:

- New Student
 Re-Enrollment (from previous year)
 Additional Student

False information on this application form will result in the immediate nullification of this enrollment, and no refunds on fees.

C Student's Full Legal Name Male Female

First Name Middle Name Last Name

D _____
Date of Birth Social Security Grade Level

Student's Driver's License # (if applicable) Home Phone Fax E-mail

E _____
Student's Street Address P.O. Box (if any) City

State Zip School District

- F** No Yes 1. Has student ever been suspended from any school within the last 2 years? Date: _____
 No Yes 2. Has student been arrested or held for questioning within the last 2 years? Date: _____
 No Yes 3. Does student smoke, use tobacco products, or drugs?
 No Yes 4. Is student married?
 No Yes 5. Is student pregnant?
 No Yes 6. Is student the mother or father of a child?
 No Yes 7. Does student have a probation officer?
 No Yes 8. Has student had truancy issues? Including Letters, phone calls or visits from officials?
a. Has student Home Schooled before? No Yes If yes, how many years? _____
b. Will student attend the Graduation Ceremonies? No Yes

ENROLLMENT FORM (Continued)

(Note: You must pay additional fees; do not fill-in unless fees have been paid.)

G Achievement Testing: **Indicate by 1 & 2 your 1st and 2nd choices**

Please submit information

<input type="checkbox"/> Blountville, TN (Grades 3-12)	<input type="checkbox"/> Kingsport, TN 1st & 2nd Grade available at this site	<input type="checkbox"/> Maryville, TN (Grades 3-12)	<input type="checkbox"/> Private FCA Administered
<input type="checkbox"/> Bristol, TN (Grades 3-12)	<input type="checkbox"/> Knoxville, TN (Grades 3-12)	<input type="checkbox"/> Morristown, TN (Grades 3-12)	<input type="checkbox"/> Bob Jones or ACT (Verification must be submitted to FCA by December 31)
<input type="checkbox"/> Chattanooga, TN 1st & 2nd Grade available at this site	<input type="checkbox"/> N. Knoxville, TN 1st & 2nd Grade available at this site	<input type="checkbox"/> FCA Support Group	<input type="checkbox"/> Religious Exemption (Not Testing)
		<input type="checkbox"/> Have Certified Teacher (Must submit Certified Teacher certificate within 30 days)	

H Choose one - primary teacher is the: Mother Father Legal Guardian (Need Court Order)

Father's/Guardian's Name E-mail Address _____

First Name Middle Name Last Name

Employer Cell Phone Work Phone

I **Mother's/Guardian's Name** E-mail Address _____

First Name Middle Name Last Name

Employer Cell Phone Work Phone

J **Emergency Contact: Relationship:** _____ E-mail Address _____
(Not living in same Household)

First Name Middle Name Last Name

Address City, State, Zip Home Phone

K

Church Name Address _____
(If you do not have a family church, please attach a letter of explanation to this enrollment form)

Pastor Phone _____

L Are you a member of the Home School Defense Association? No Yes If yes, member number: _____
(FCA members receive a discount to join. FCA's discount #: 294057)

Who recommended you to Family Christian Academy? _____ Phone _____

M I have read the Packet, Compulsory Attendance Statute and I AM IN AGREEMENT with FCA's Statement of Faith and School Policies.
 I have read the Packet, Compulsory Attendance Statute and I AM NOT IN AGREEMENT with the Statement of Faith and Statement of Policy.

Parent's/Legal Guardian's Signature Date
Signature grants Family Christian Academy and its staff permission to verify data presented in this form and to monitor compliance with its policies.