



FaithHeritage

CHRISTIAN ACADEMY

OFF-CAMPUS APPLICATION
COMPLETE ALL PARTS

FaithHeritage Christian Academy admits students of any race, color, national or ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, national and ethnic origin in the administration of its educational policies, admission policies, scholarship and loan programs, athletic and other school administered programs.

Application for Admission New Renew Male Female

Applying for Grade:	School Year:	Date Received:
----------------------------	---------------------	-----------------------

Name of Student:	Last	First	Middle
Sib_ DNL_			

Address:	City	State	Zip
----------	------	-------	-----

Home Phone:	Birthday:	Age:	Parent/Guardian E-mail:
-------------	-----------	------	-------------------------

Father's Name:	Occupation:
----------------	-------------

Address if different from above:	Business/Cell Phone:
----------------------------------	----------------------

Mother's Name:	Occupation:
----------------	-------------

Address if different from above:	Business/Cell Phone:
----------------------------------	----------------------

Guardian/Step Parent:

Grandparents Name and Mailing Address:
--

Grandparents Name and Mailing Address:
--

Church Family Presently Attends:	
Pastor's Name:	Does your family attend on a regular basis?

Previous School Attended:

Address:

Reason for leaving:

What are the special needs of (or accommodations for) your child?

What are the special talents of your child?

Name of Student: Last	First	Middle
<i>Person Authorized To Care For Child In An Emergency (If parent cannot be contacted):</i>		
Name:	Phone:	
Relationship:	Other Phone:	
Name of Family Physician:	Office Phone:	
Please list any medications your child requires during school hours:		
Has this student ever repeated a grade? If yes, please discuss below.		
Has this student ever had disciplinary difficulties in school? If yes, please discuss below.		
Has this student ever been recommended for special education, been diagnosed with a learning disability, had any childhood illnesses which might impair his/her ability to learn, or been recommended for drug or alcohol treatment: If yes, explain on a separate sheet.		
Is there anything else you would like us to know about this child?		
Does Divorced/Separated Spouse receive mail, email, etc?		
How did you hear about Faith Heritage Christian Academy?		
Has this student ever been enrolled in Faith Heritage in the past, on or off-campus?		
What are your objectives for your child as a student at Faith Heritage Christian Academy?		
I agree to the following: <ul style="list-style-type: none"> <input type="checkbox"/> To abide by the requirements stated in the Instructions for Off-Campus Enrollment; <input type="checkbox"/> To attend Parent/Teacher Orientation at FHCA campus at beginning of enrollment; <input type="checkbox"/> To submit quarterly grades and attendance reports in a timely manner; <input type="checkbox"/> To bring this student (grade 2 and up) to FHCA annual achievement testing. 		
PLEASE NOTE: The facts given in this application are true and complete to the best of my knowledge. I/We understand that discovery of the fabrication of any statement/s or significant omissions of fact during any phase of the enrollment process may prevent the acceptance of this child and/or could lead to immediate dismissal from Faith Heritage Christian Academy.		
Signature of father (or primary guardian):		Signature of mother:
RECOMMENDED FOR ENROLLMENT: YES NO	Signature of Headmaster/School Board member:	



FaithHeritage

CHRISTIAN ACADEMY

OFF-CAMPUS ENROLLMENT

P. O. Box 157, Millington, TN 38083

Student Name: _____

Resident County: _____ School District: _____

When did this student begin home education? (grade & date): _____

If new to FHCA, in which home school program has this student been enrolled most recently?

Grade and date when student withdrew from this program: _____

Name and full address of school or program with this student's school records.

Who will serve as the main teacher to this student? If other than a parent, please provide name, address, and phone:

Highest education completed by student's main teacher? _____

State the curriculum for this student, for each subject as requested below.

Subject	Publisher	Grade Level	Textbook/Software/Materials
*Bible			
*English (phonic, reading, language arts)			
+ Spelling/ Vocabulary			
*Math			
+Science			
+Social Studies			
Foreign Language			
Art/Music/Drama			
*P.E./Health			
Other			

Are any of the above subjects taken as classes outside of the home?
If yes, list the subject(s), teacher(s), and location(s) below.

MHEA or other homeschool group member? _____ HSLDA Member? _____

Has student been enrolled at FHCA On or Off Campus previously?

Has family ever been contacted by Child Protective Services?

**Courses required every year, grades K-8; Bible, English, and Math required every year, K-12.*

+Courses required every year, grades 2-8