



APPLICATION FOR ADMISSION

STUDENT APPLICATION & FAMILY INFORMATION

Please complete this application for each individual student applying to WCCA.

Student Information

Applicant's Legal Name: _____
First Middle Last Suffix

Preferred Name: _____ Gender: Male Female

Date of Birth (MM/DD/YYYY): _____ Social Security Number: _____ - _____ - _____

Ethnicity: African American American Indian Asian Caucasian Hispanic Pacific Islander Other

Student Resides With: Both Parents Father Mother Other _____

Address: _____
Street City State Zip

Home Phone: _____ Cell Phone: _____

Primary E-Mail: _____

Grade Entering: _____

Personal Information

- How did you hear about Williston Central Christian Academy? _____
- Why would you like your student to attend WCCA? _____

- Has your student ever been referred to a resource teacher? If yes, please provide date and reason for referral? _____

- Has your student ever had modifications made in the classroom? _____
- Has your student ever been administered psychological, behavioral, or academic testing to determine if he/she is gifted, has a learning disability, ADD, ADHD, behavioral, neurological, sensory, or emotional disorder? _____
- Has your student ever been recommended for tutoring or remedial instruction? _____ If yes, please provide dates and areas of recommendation along with written evaluations? _____
- Has your student ever repeated a grade? _____ Which grade? _____ Please explain: _____
- Has your student ever been suspended or dismissed from school? _____ Please Explain: _____

(If applicable) Secondary Household Information

Check one: Father Step-Father Guardian

Name: _____
First Middle Last Suffix

Address: _____
Street City State Zip

Home Phone: _____ Cell Phone: _____

Primary E-Mail: _____

Occupation: _____ Company: _____

Church Affiliation: _____ Church Name: _____

Check one: Mother Step-Mother Guardian

Name: _____
First Middle Last Suffix

Address: _____
Street City State Zip

Home Phone: _____ Cell Phone: _____

Primary E-Mail: _____

Occupation: _____ Company: _____

Church Affiliation: _____ Church Name: _____

Educational Background

Please give the complete name and address of the last school your child attended.

School Name: _____

Address: _____
Street City State Zip

Phone: _____ Fax: _____

Do you authorize WCCA to obtain all academic information and files from previous school(s)? Yes No

Billing Information

If your child is enrolled in WCCA, who will assume financial responsibility for tuition, fees, and expenses:

Primary Family Mother (Only) Father (Only) Other: _____

Tuition information and additional fees/expenses can be found in our School Financial Guide.

Spiritual Information

WCCA desires to partner with you to provide both a quality academic program and a strong Christian education. Please share with us your Spiritual beliefs.

1. Do you profess to be a Christian? Yes No
2. Do you attend church? Yes No
3. (If yes) Describe you church attendance: Weekly (1-3 times per week) Occasionally (1-2 times per month)
 Rarely (less than once per month) Never
4. What activities or responsibilities are you and your child involved in at your church? _____
5. Please give a brief statement summarizing your beliefs as they relate to:

Jesus Christ: _____

The Bible: _____

Additional Required Documentation

The following are additional documents that must be submitted with this application: (check that they are attached)

- Birth Certificate
- Physical
- Shot Record
- Teacher Recommendation
- (Kindergarten) Parent Reference Form & Teacher Reference Form
- (Middle/High School) Student Questionnaire
- Copy of Custody Decree (if applicable)

Conclusion

This application must be completed in its entirety. It must be submitted, along with a Registration/Application Fee of \$250.00 (per family). Applications may be mailed to:

Williston Central Christian Academy,
225 SE 4th Street
Williston, FL 32696

Once application is received and processed you will be contacted by school office to schedule an interview with the Principal.

Statement

As the parent(s) or guardian of the student applicant, I/we state that we have read and agree with the Statement of Faith, Parent/Guardian Statement of Support, and the Student Code of Conduct set forth in the Williston Central Christian Academy Parent/Student Handbook. We further agree and pledge upon acceptance of our student to partner with the school staff in a manner consistent with these statements to advance the spiritual integrity and academic development of our student. I certify that the information given on all application materials is complete and accurate.

Parent/Guardian Name: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____