# **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		Suffix
Preferred Name:	Gende	: 🗆 Male 🛛 Female	
Date of Birth (MM/DD/YYYY):	Social S	Security Number:	
Ethnicity: 🗌 African American 🛛 Ameri	ican Indian 🛛 Asian 🗌 Caucasiar	🛛 🗆 Hispanic 🛛 Pacific Islande	er 🗌 Other
Student Resides With: $\Box$ Both Parents [	🗆 Father 🛛 Mother 🗌 Other		
Address:			
Street	City	State	Zip
Home Phone:	Cell Phone:		
Primary E-Mail:			
Grade Entering:			

### **Personal Information**

1.	How did you hear about Williston Central Christian Academy?
2.	Why would you like your student to attend WCCA?
3.	Has your student ever been referred to a resource teacher? If yes, please provide date and reason for referral?
4.	Has your student ever had modifications made in the classroom?
5.	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?
6.	Has your student ever been recommended for tutoring or remedial instruction? If yes, please provide
	dates and areas of recommendation along with written evaluations?
7.	Has your student ever repeated a grade? Which grade? Please explain:
8.	Has your student ever been suspended or dismissed from school? Please Explain:

9. Is	your student a ward of the court?	Has your student been under the jurisdiction of the court

10. Is there any additional information that WCCA should be aware of when considering your student for enrollment?

Please complete this information for **each family** of the student applying to WCCA.

## **Family Information**

-						
Student's parents are: (ch	eck one)					
Married and Living Tog	ether	🗆 Never Ma	rried	🗆 Father is D	Deceased	
$\Box$ Legally Separated		🗆 Legally Div	vorced	$\Box$ Mother is	Deceased	
Who has legal custody or	is the legal guar	dian?				
A copy of the court order	stating who ha	s custody is requ	ired by the school,	if applicable)		
Are both parents aware o If applicable, name of par				cess to the stude	ent or school re	ecords.)
Primary Household Inform Check one: □Father □		🗆 Guardian				
Name:	·					
First		Middle		Last		Suffix
Address:						
Street			City		State	Zip
Home Phone:			Cell Phone:			
Primary E-Mail:						
Occupation:			Company:			
Church Afflation:			Church Name:			
Check one: OMother	-		1			Cuffin
First		Middle		Last		Suffix
					Ctota	<b></b> :
Street			City		State	Zip
Home Phone:			Cell Phone:			
Primary E-Mail:						
Occupation:			Company:			
Church Afflation:			Church Name:			

#### (If applicable) Secondary Household Information

Check one: 
Father 
Step-Father

Name:				
First	Middle	Last		Suffix
ddress:				
Street	Cit	Ý	State	Zip
lome Phone:	Cel	l Phone:		
rimary E-Mail:				
Occupation:	Co	mpany:		
Church Afflation:	Chi	urch Name:		
		urch Name:		
heck one: 🗆 Mother 🛛 Step-Mothe	er 🛛 Guardian	urch Name:		
heck one: 🗆 Mother 🛛 Step-Mothe	er 🛛 Guardian	urch Name: Last		Suffix
heck one: Mother Step-Mothe	er 🗆 Guardian Middle			
Check one:  Mother  Step-Mothe lame: First	er 🗆 Guardian Middle	Last	State	
Check one: Mother Step-Mothe	er 🗆 Guardian Middle Cit	Last	State	Suffix Zip
Check one:  Mother  Step-Mother	er 🗆 Guardian Middle Citr	Last Y I Phone:	State	Suffix Zip
Address:	er 🗆 Guardian Middle Cit	Last Y I Phone:	State	Suffix Zip

🗌 Guardian

#### **Educational Background**

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

School N	ame:			
Address:				
	Street	City	State	Zip
Phone: _		Fax:		

Do you authorize WCCA to obtain all academic information and files from previous school(s)?

### **Billing Information**

If your child is enrolled in Y	WCCA, who will assume fina	ncial responsibility for tuition, fees	s, 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?  $\Box$  Yes  $\Box$  No
- 2. Do you attend church?  $\Box$  Yes  $\Box$  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

□ (Kindergarten) Parent Reference Form & Teacher Reference Form

□ (Middle/High School) Student Questionnaire

□ Copy of Custody Decree (if applicable)

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)

Physical

□ Shot Record

□ Teacher Recommendation

#### 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 4<sup>th</sup> 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 an 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: