

Application for admission to:

Appalachian Christian School
1044 New Beason Well Road
Kingsport, TN 37660

Personal Information

Date: _____ Entering Grade _____ School Year _____ Age _____ Sex _____ Race _____

Student's Name _____ Social Security # _____

Phone # _____ Birth date _____ Student likes to be called _____

Mailing Address _____

Student lives with _____ Who has legal custody _____

Father's Name _____ Phone # _____

Address (if different than students) _____

Father's Employer _____ Work # _____

Work address _____

Mother's Name _____

Address (if different than students) _____

Mother's Employer _____ Work # _____

Work address _____

Siblings: Include current grade and age

Do you attend church regularly? _____ Name of church _____

Church address _____

Pastor's Name _____ Pastor's phone # _____

In case of emergency, please contact _____

Academic Information

Last School attended _____

Please list name and address of all schools attended:

Has student repeated any grade? _____ If so, which _____

Has student been suspended or expelled from any school? _____

If yes, which one _____

For what reasons _____

Does student have a learning disability or limitation that might require special professional?

assistance? _____ Describe _____

Student Data

Has student ever been involved with drug or alcohol use or distribution? _____

Has student been involved with tobacco use? _____

Are you now or have you ever been under the supervision of a parole or probation officer or under the custody of a juvenile or other court? _____

Is yes, explain _____

Does the child take medication? _____ If yes, please list _____

Allergies _____

Does your child have any physical limitations? _____

Explain _____

Has the student been hospitalized within the past year? _____

If so, give dates _____

For what reason _____

Has your child ever been treated for any nervous, mental, or emotional disorder? _____

Please explain _____

Give name and address of attending physician or psychiatrist _____

I give permission for my child to take part in all school activities including sports programs and school-sponsored trips away from the school premises. I absolve the school, its teachers and administration from all liability in the event my child is injured at school or during any school activity. I agree with the school's effort to train my child in the Bible and will encourage my child in this and in all other phases of instruction.

I pledge not to interfere with the school in its efforts to administer discipline to my child in accord with the standards the school sets for itself.

if my child voluntarily withdraws or is requested to withdraw by the school, it is understood and accepted that no refund of registration fee or tuition will be made.

It is understood that my child's attendance is a privilege and not a right, and that if at any time his/her conduct, academic progress, or cooperation with the school's authorities is not in keeping with the school's requirements, the administration reserves the right to terminate my child's enrollment.

I hereby declare on my word of honor that I have not omitted the name of any school in which my child was ever registered, even for a brief period and that I have answered the all of the above questions truthfully and fully. I give Appalachian Christian School my approval to gather data from all schools which I have attended, together with other records and references that it believes to be necessary for the processing of my application.

Signature of Parents

Date

Educational Objective

Please give a complete statement regarding your reasons for wanting your child to attend Appalachian Christian School.