



Christian Heritage Academy

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E-mail: cha@chc-inc.net Website: www.chc-inc.net

“Every Student A Scholar”

High School APPLICATION FOR ADMISSION

(This form must be filled out by a parent or legal guardian. Please print or type.)

This form is to be completed by the parent/guardian & submitted with the non-fundable Application fee.

Date _____ Application for admission to Grade _____ S.S. No.: _____ - _____ - _____

Please check: Male _____ Female _____ DOB: _____ Place of Birth: _____

Applicant's name _____
Last name First name Middle name Familiar name

Address _____
Street City State Zip

Home Phone _____ Mom's Cell Phone _____ Dad's Cell Phone _____

Language(s) spoken at home: _____ Country of Citizenship _____

Emergency1 # _____ Emergency1 Contact _____

Emergency2 # _____ Emergency2 Contact _____

Church Affiliation: _____

Church Name: _____ Pastor/ Leader: _____

Church Address: _____ Church Phone: _____

Full Name of Father: _____ Business Phone _____

Occupation _____ Employer: _____

Business Address: _____
Street City State Zip

Full Name of Mother: _____ Business Phone: _____

Occupation: _____ Employer: _____

Business Address: _____
Street City State Zip

Please give the following information if applicable:

- Father Deceased Mother Deceased Parents Separated/Divorced
 Legal Guardian Relative Foster Parent

With whom does applicant reside? _____

Name of stepparents (if applies): _____

"All your children shall be taught by the Lord and great shall be the peace of your children" Isaiah 54:13

Official school district _____ Present school _____ Present grade _____

Present School Address: _____
Street City State Zip

Name of School Principal: _____ School Phone: _____

Has the student ever been treated for a learning disability or been given an IEP or psychological counseling? _____

List chronic diseases, physical limitations, or handicap. _____

List schools previously attended, most recent first, giving location and length of time in each.

List the other children in household:

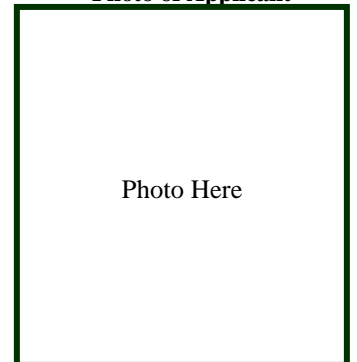
Name	Age	Grade	Relationship
Name	Age	Grade	Relationship
Name	Age	Grade	Relationship

List name, class, and relationship of relatives who attend or have attended Christian Heritage Academy.

Please state your reason for wanting your child to attend Christian Heritage Academy.

How did you first learn about Christian Heritage Academy? _____

Photo of Applicant



Signature of Parent/Guardian

Christian Heritage Academy High School

Pledge of Support

I understand that my child's privileges as a member of the school family may be curtailed at the discretion of the staff.

I will support the school financially through my regular tuition payments.

I understand that all tuition and fees must be paid in full before semester or final examination may be taken, or transcripts, report cards, diplomas, or transfer may be issued.

Signature of Mother/Guardian

Date

Signature of Father/Guardian

Date

Signature of Student

Date

Christian Heritage Academy High School will accept qualified students in good standing regardless of race, color, sex, or ethnic or national origin.