



## Application for Admission

### Student and Family

Student's Full Name \_\_\_\_\_

Name used: \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

Social Security Number \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Church Affiliation: \_\_\_\_\_

Student's Complete Address:

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

Home Phone Number: \_\_\_\_\_

Applying for grade \_\_\_\_\_ To enter when? \_\_\_\_\_

Custodial parents'/guardians' names: \_\_\_\_\_

Custodial father \_\_\_\_\_ Custodial mother \_\_\_\_\_

Father's Address \_\_\_\_\_ Mother's address \_\_\_\_\_

Occupation \_\_\_\_\_ Occupation \_\_\_\_\_

Employer \_\_\_\_\_ Employer \_\_\_\_\_

Business phone # \_\_\_\_\_ Business Phone # \_\_\_\_\_

Home Phone # \_\_\_\_\_ Home Phone # \_\_\_\_\_

Cell Phone # \_\_\_\_\_ Cell Phone # \_\_\_\_\_

E-mail address \_\_\_\_\_ E-mail Address \_\_\_\_\_

Check all that apply.

Widower \_\_\_\_\_ Separated \_\_\_\_\_

Divorced \_\_\_\_\_ Remarried \_\_\_\_\_

Check all that apply.

Widow \_\_\_\_\_ Separated \_\_\_\_\_

Divorced \_\_\_\_\_ Remarried \_\_\_\_\_

Do you attend church? \_\_\_\_\_ Do you attend church? \_\_\_\_\_

How often? \_\_\_\_\_ How often? \_\_\_\_\_

Church name \_\_\_\_\_ Church name \_\_\_\_\_

Pastor's name \_\_\_\_\_ Pastor's name \_\_\_\_\_

Non-custodial parent's name, address, phone number: \_\_\_\_\_

If child is not living with his/her natural mother and/or father, please explain the home situation:

List name, age, and school of all siblings:

List names and addresses of grandparents: \_\_\_\_\_

**Photo**

**School History**

Current grade level: \_\_\_\_\_

**Has student ever:**

Skipped a grade? \_\_\_\_\_ Yes \_\_\_\_\_ No If yes, which grade? \_\_\_\_\_

Failed or repeated a grade? \_\_\_\_\_ Yes \_\_\_\_\_ No

Been suspended \_\_\_\_\_, expelled \_\_\_\_\_, asked to withdraw \_\_\_\_\_, from any school?

If yes, please explain:

**Has student ever:**

Been tested for or received special help for a reading or learning difference? \_\_\_\_\_ Yes \_\_\_\_\_ No

Been diagnosed for or enrolled in any special education program or special school? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please explain:

Schools previously attended: (Begin with present school and work backward)

**Name of School****Full Address****Grades Completed**

Name of School	Full Address	Grades Completed
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**General Information**

Describe any and all special circumstances or conditions which could affect the student's performance in school or cause excessive absences: (For example: chronic health conditions or illnesses, physical handicaps, history of emotional difficulties, frequent changes in home or school, etc.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Why does the student desire to attend Full Armor?

\_\_\_\_\_  
\_\_\_\_\_

Why do you wish to enroll your child in Full Armor?

\_\_\_\_\_  
\_\_\_\_\_

Through what grade do you plan for your child to attend Full Armor? \_\_\_\_\_

I/we do hereby attest that the information given on this application is true and accurate, to the best of my/our knowledge. I understand that giving inaccurate information may be grounds for dismissal of the student from school.

Father's signature \_\_\_\_\_

\_\_\_\_/\_\_\_\_/\_\_\_\_

Mother's signature \_\_\_\_\_

\_\_\_\_/\_\_\_\_/\_\_\_\_