

# ENROLLMENT FORM

School Year \_\_\_\_\_

## A Choose One:

- New Student  
 Re-Enrollment (from previous year)

False information on this application form will result in the immediate nullification of this enrollment, and no refunds on fees.

## B Student's Full Legal Name

Male  Female

First Name

Middle Name

Last Name

## C

Date of Birth

Social Security

Grade Level

Home Phone

Fax

E-mail

## D

Student's Street Address

P.O. Box (if any)

City

State

Zip

School District

## E

- No  Yes 1. Has student been suspended from any school within the last 2 years? Date: \_\_\_\_\_
- No  Yes 2. Has student been arrested or held for questioning within the last 2 years? Date: \_\_\_\_\_
- No  Yes 3. Does student smoke, use tobacco products, or drugs?
- No  Yes 4. Is student married?
- No  Yes 5. Is student pregnant?
- No  Yes 6. Is student the mother or father of a child?
- No  Yes 7. Does student have a probation officer? Name of Officer: \_\_\_\_\_
- No  Yes 8. Has student had truancy issues? Including Letters, phone calls or visits from officials?
- No  Yes 9. IEP or Special Needs?

# ENROLLMENT FORM (Continued)

(Note: You must pay additional fees; do not fill-in unless fees have been paid.)

**F** Achievement Testing: I Please submit information (Subject to availability)

Blountville, TN (Grades 3-12)

Bristol, TN (Grades 3-12)  Private FCA Administered

Chattanooga, TN  Bob Jones or ACT

Knoxville, TN (Grades 3-12)  Religious Exemption

**G** Choose one - primary teacher is the:  Mother  Father  Legal Guardian (Need Court Order)

**Father's/Guardian's Name:** E-mail Address \_\_\_\_\_

\_\_\_\_\_

First Name Middle Name Last Name

Employer Cell Phone Work Phone

**H** **Mother's/Guardian's Name:** E-mail Address \_\_\_\_\_

\_\_\_\_\_

First Name Middle Name Last Name

Employer Cell Phone Work Phone

**I** **Emergency Contact: Relationship:** \_\_\_\_\_ E-mail Address \_\_\_\_\_  
(Not living in same Household)

\_\_\_\_\_

First Name Middle Name Last Name

Address City, State, Zip Home Phone

**J** \_\_\_\_\_

Church Name Address (If you do not have a family church, please attach a letter of explanation to this enrollment form)

Pastor Phone

**K**  I have read the Packet, Compulsory Attendance Statute and I AM IN AGREEMENT with FCA's Statement of Faith and School Policies.

I have read the Packet, Compulsory Attendance Statute and I AM NOT IN AGREEMENT with FCA's Statement of Faith and School Policies.

\_\_\_\_\_  
Parent's/Legal Guardian's Signature Date  
Signature grants Family Christian Academy and its staff permission to verify data presented in this form and to monitor compliance with its policies.

# Family Christian Academy Member Agreement

**Student's Name** \_\_\_\_\_

As the parent/guardian of the above named student I have read and agree to all policies contained in the Family Christian Academy of East Tennessee Enrollment and Information Packet.  
As a member of Family Christian Academy of East Tennessee I further agree that:

\_\_\_\_\_ I have read and agree to Family Christian Academy of East Tennessee's policy on Fees/Refunds (page 7).

\_\_\_\_\_ I have read and agree to Family Christian Academy of East Tennessee's policy on Credits (page 7) and Credit Requirements (page 14).

\_\_\_\_\_ I have read and agree to Family Christian Academy of East Tennessee's policy on Semi-Annual Attendance Reports (page 8).

\_\_\_\_\_ I have read and agree to Family Christian Academy of East Tennessee's policy on Testing (pages 9-11).

\_\_\_\_\_ I have read and agree to Family Christian Academy of East Tennessee's Diploma Request and Evaluation Procedures (page 12).

\_\_\_\_\_ I agree to submit my student's Curriculum List (page 22) detailing what curriculum I will be using this school year within 30 calendar days of enrollment.

\_\_\_\_\_ I have read and agree to Family Christian Academy of East Tennessee's Re-Enrollment Policy (page 7).

\_\_\_\_\_ I will notify Family Christian Academy of East Tennessee immediately should I move, change my telephone number, or email address.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date