

ABINGTON CHRISTIAN ACADEMY APPLICATION FOR ADMISSION

Applicant's Name \_\_\_\_\_

Applying for Grade # \_\_\_\_\_

Academic Year \_\_\_\_\_

Name \_\_\_\_\_  
Last First Middle

Preferred Name \_\_\_\_\_  Male  Female

Home Address \_\_\_\_\_  
Number Street Apartment Number

City State Zip Code

Home Telephone \_\_\_\_\_ Preferred Email \_\_\_\_\_

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ With whom does the student live? \_\_\_\_\_

Parents are  married  separated  divorced  father deceased  mother deceased  single parent

FATHER OR MALE GUARDIAN

Name \_\_\_\_\_

Home Address \_\_\_\_\_

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

Home Telephone \_\_\_\_\_

Email Address \_\_\_\_\_

Profession/Position \_\_\_\_\_

Employer \_\_\_\_\_

Business Address \_\_\_\_\_

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

Business Telephone \_\_\_\_\_

Christian  Yes  No

MOTHER OR FEMALE GUARDIAN

Name \_\_\_\_\_

Home Address \_\_\_\_\_

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

Home Telephone \_\_\_\_\_

Email Address \_\_\_\_\_

Profession/Position \_\_\_\_\_

Employer \_\_\_\_\_

Business Address \_\_\_\_\_

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

Business Telephone \_\_\_\_\_

Christian  Yes  No

School district in which student resides \_\_\_\_\_ Transportation needed  Yes  No

School student last attended \_\_\_\_\_  
School Name

Number Street City State Zip Code

Church you attend \_\_\_\_\_ Members  Yes  No  
Church Name

Number Street City State Zip Code

Pastor \_\_\_\_\_ Church phone \_\_\_\_\_



