

APPLICATION FOR ADMISSION



West Meadows Baptist Academy

Student Information

Applicant's Legal Name: _____
First Middle Last Suffix

Preferred Name: _____ Gender: Male Female

Date of Birth: ____/____/____ Social Security Number: ____/____/____
MM DD YEAR

Country of Birth: _____ Country of Citizenship: _____

Ethnicity: African-American American Indian or Alaskan Native Asian Caucasian Hispanic
 Native Hawaiian or other Pacific Islander Other

Student Resides With: Both Parents Father Mother Other _____

Address: _____ City: _____ State: ____ Zip: _____

Home Phone: ____/____/____ Cell Phone: ____/____/____ Email: _____

Last Grade Successfully Completed: _____ Applying for Grade _____ School Year _____ -- _____

Has your child ever been placed on probation, denied enrollment, suspended, or expelled for disciplinary reasons by any school? Yes No If yes, please explain: _____

Has your child ever been retained a grade? Yes No If yes, please list what grades in which they were retained: _____

Has your child ever used alcohol, a non-medical drug, or tobacco? Yes No If yes, please explain: _____

Has your child ever been arrested for something other than a traffic violation? Yes No If yes, please explain: _____

Family Information

Check One: Father Stepfather Guardian

Name: _____
TITLE FIRST MIDDLE LAST SUFFIX

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: ____/____/____ Cell Phone: ____/____/____ Email: _____

Marital Status: Never Married Married Separated Divorced Divorced & Remarried Widowed

Check One: Mother Stepmother Guardian

Name: _____
TITLE FIRST MIDDLE LAST SUFFIX

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: ____/____/____ Cell Phone: ____/____/____ Email: _____

Marital Status: Never Married Married Separated Divorced Divorced & Remarried Widowed

Church Information

Church Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Pastor's Name: _____ Denomination: _____

Phone Number: ____/____/____ Email: _____ Website: _____