



Bible Baptist

CHRISTIAN SCHOOL

Matthews, North Carolina 28105

New Enrollment Application for the 2017-2018 School Year

GENERAL INFORMATION

NAME OF STUDENT _____

First Middle Last

Grade entering for 2017-18 _____ Date of Birth _____ Age _____ SSN _____

Sex: Male Female

Father/Guardian _____ Mother/Guardian _____

Marital Status: Married Divorced Separated Other

Address _____

City _____ State _____ Zip _____ Phone _____

Father's Employer & Occupation _____ Phone _____

Father's E-Mail Address _____ Cell # _____

Mother's Employer & Occupation _____ Phone _____

Mother's E-Mail Address _____ Cell # _____

EMERGENCY INFORMATION

In Emergency Contact _____ Phone _____

(Someone other than yourself)

Family Doctor _____ Phone _____

Any medical problems? _____

BACKGROUND INFORMATION

Church you attend? _____ Do you attend regularly? _____

Has the student made a profession in Christ? _____ If so, when? _____ Does the student attend church regularly? _____

Has the student been tested for learning disability? _____ Please explain: _____

Are there any existing accounts owed to other schools? _____ Who? _____

Do you have need of Early Stay? _____ Late Stay? _____ (See Financial Contract or Tuition Schedule for rates)

Has your child ever been suspended, expelled, arrested, diagnosed with any psychological or behavioral disorder, have a history of drug, alcohol or tobacco abuse? If so, *briefly explain the reason or child's experience below.*

