Rhema Christian Classical Academy 2024-25 School Year Student Application

Please Print All Information Legibly

Student Information			Application D	
Student's Last Name:				
Home Address:		City:	State:	Zip:
Age: Date of Birth:				
Child's Primary Language Spoken	at Home			
Student Lives with				
Parent / Guardian Information				
Mother/Guardian's Last Name:		First Name	:	
Home Address:				
Cell Phone:				
Place of Employment:			Work Phone:	
Father/Guardian's Last Name:		First Name:		
Home Address:		City:	State:	Zip:
Cell Phone:	Email:			
Place of Employment:			Work Phone:	
Prior School Information				
Name of last school attended:		Cit	y:	State:
Date attended: from				
Principal's Name:				
Academic Information (Please che Last School Year's Report My child has a current IEF My child has previously has My child has a current Wrom My child was enrolled in a I have concerns about my Other Relevant Information	Card and/or other or 504 (Document and (or currently has itten Acceleration) "gifted" program child's learning de	Relevant Informats MUST be revealed to classroom according (Reviewed) at their previous velopment	nation iewed/updated before ommodations updated before enrolln	enrollment)
All of the above information is corresult in dismissal from Rhema Ac		my knowledge.	I understand that false	information may
Rhema Academy recruits and admi programs and activities. In addition ethnic origin in administration of it loan programs and athletic and other	on, the school will its educational poli	not discriminate icies, admissions	on the basis of race, c	color, national and
Signature of Parent / Guardian			Date	
Signature of Parent / Guardian			Date	

FOR OFFICE USE ONLY:

Admissi	on Team Review / Decision		
	Admission Acceptance: Date		
	Date Parents Notified	by	(Rhema Admin)
	More Information Needed: Date		
_	Information Needed		
	Date Parents Contacted	by	(Rhema Admin)
	Admission Denied: Date		
_	Reason(s)		
	Date Parents Notified	by	(Rhema Admin)