



2012-2013 Application for Enrollment in Grades 1-12

441 Berean Lane • Hixson, TN 37343 • 423-877-1288

Admissions Committee Use:
Interview: ___/___/___
Reference: ___/___/___ ___/___/___
Accept <input type="checkbox"/> Deny <input type="checkbox"/>
Decision Letter Sent: ___/___/___

Date of Application _____

Grade Applying for _____

Name: _____
Last First Middle

Sex: Male Female

Date of Birth: Month _____ Day _____ Year _____

Present Age: _____

Parent/Guardian 1: _____ Relationship to Student: _____

Address: _____ City _____ State _____ Zip _____

Email Address(es): _____

Contact Numbers: Home _____ Work _____ Mobile _____

Employer: _____ Occupation: _____

Parent/Guardian 2: _____ Relationship to Student: _____

Address: _____ City _____ State _____ Zip _____

Email Address(es): _____

Contact Numbers: Home _____ Work _____ Mobile _____

Employer: _____ Occupation: _____

With whom does the student reside (be specific) _____

Church Membership? Yes No Name of Church _____

Which factor(s) most influenced your decision to apply to Berean Academy? (Check all that apply)

Academic Quality Athletics Safe & Secure Environment Fine Arts Christian Atmosphere Location

School Philosophy/Values Tuition Value Other Reasons _____

Please list each school the student has attended starting with the most recent.

_____	_____	_____
Name of School	City, State	Grades Attended

_____	_____	_____
Name of School	City, State	Grades Attended

_____	_____	_____
Name of School	City, State	Grades Attended

Has the student ever been asked to repeat a grade? Yes No If yes, which one? _____

Submit a copy of the student's most recent report card and achievement test results if available.

Has the student ever been expelled, suspended, or asked not to return to a school? Yes No
(If yes, please write an explanation and attach to this application.)

State any chronic health, emotional, or physical problem(s) the student has. _____

PLEASE COMPLETE THE REVERSE SIDE OF THIS FORM*

- Does the applicant have any learning difficulties? Yes No
- Has the student ever been recommended for testing? Yes No
- Does the student require modifications to meet academic requirements? Yes No
- Has the student ever participated in a special needs program (including gifted, resource, special ed.)? Yes No

If you answered yes to any of the previous four questions, please explain. _____

Please name two references for the student who can provide information relevant to his or her character.

Name _____ Relationship to Student _____

Contact Numbers Home _____ Work _____ Mobile _____

Name _____ Relationship to Student _____

Contact Numbers Home _____ Work _____ Mobile _____

Who, if anyone, referred you to Berean Academy? _____

Please list the names of one or two families who might be interested in learning more about Berean Academy.

Name _____ Phone Number _____

Name _____ Phone Number _____

In making this application, I understand that:

1. Since the fees do not cover the actual cost of educating my child, we recognize that our participation is needed in prayer, service, and gifts in order to properly share in his/her training.
2. The school reserves the right to dismiss any student who does not respect its standards or cooperates in the educational process.
3. After acceptance, a place will be held for my child when the Student Registration Form and the non-refundable registration fee have been submitted to the school by the date indicated on the acceptance letter.
4. It is hereby understood that the guardians will pay tuition for the amount stated by the school office. No refunds will be made for fees. Students transferring to another school and having attended one day or more of any month will owe the full month's tuition.

Statement of Cooperation

1. I pledge loyalty to the aims of the school and will bring any and all questions and criticisms directly to the administration so that they may be properly considered by those in authority.
2. We will read the Statement of Faith and the Philosophy of Education and are willing to have our child trained in accordance with them.
3. We will read the *Student Handbook* and will cooperate fully in seeing that the rules and regulations laid down there are met.
4. I give Berean Academy permission for my child to take part in all school activities, including sports and school-sponsored trips away from the school premises.
5. The teacher and administration are hereby given full discretion in the discipline of our child. This would include the issuing of disciplinary referrals, detention, suspension, and expulsion from the school program.
6. I agree to hold the school and its agents harmless for any liability to my child or any guardian or parent thereof because of any claims on behalf of my child against the school or any agent thereof because of any injury or alleged injury to my child. Should legal action, for any reason, be taken against Berean Academy or any employee or agent thereof, on my child's behalf and the school or its agent not be found at fault, I agree to pay any attorney fees, damages or other costs that Berean Academy or its agent should incur to defend itself against such action, and would immediately withdraw my child from school as soon as such action had begun.
7. This statement of cooperation will be in effect for as long as my children attend Berean Academy.
8. The school reserves the right to dismiss any student who does not cooperate with the educational process. If a student is dismissed for any reason, the tuition will be prorated on a monthly basis for that period of time that the child is in school.

Printed Name of Guardian _____

Signed Name of Guardian _____

Berean Academy admits all qualified applicants regardless of race, gender, color, or national and ethnic origin.