



MIDWESTERN CHRISTIAN ACADEMY

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# MIDWESTERN CHRISTIAN ACADEMY A MINISTRY OF MIDWEST BIBLE CHURCH

## APPLICATION FOR ADMISSION

The following information is requested to enable us to understand the applicant's background and status. If accepted, this will become part of the applicant's permanent record. Please respond to all items as completely and accurately as possible. All information will be kept confidential.

Application date \_\_\_\_\_ Applying for:  current year \_\_\_\_\_  next year \_\_\_\_\_

### STUDENT INFORMATION

Name: \_\_\_\_\_ Boy  Girl   
Last First Middle

Age \_\_\_\_\_ Date of Birth (dd/mm/yr) \_\_\_\_\_ SS# \_\_\_\_\_  
(used for Year end 1098T form)

Place of birth: City \_\_\_\_\_ County: \_\_\_\_\_

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

Last Grade Completed \_\_\_\_\_ Grade to enroll \_\_\_\_\_ Date to enroll \_\_\_\_\_

List special Interests or Hobbies of student: \_\_\_\_\_

Does the student play any musical instrument : \_\_\_ Yes \_\_\_ No If yes what instrument \_\_\_\_\_

Does student have any special educational needs or require special accommodations of any kind? \_\_\_\_\_

### FAMILY INFORMATION

Father's Name: \_\_\_\_\_ Mother's Name: \_\_\_\_\_

Father's Address: \_\_\_ same as son/daughter or: \_\_\_\_\_ Mother's Address: \_\_\_ same as son/daughter or: \_\_\_\_\_

Father's Occupation: \_\_\_\_\_ Mother's Occupation: \_\_\_\_\_

Place of Work: \_\_\_\_\_ Place of Work: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Business Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Business Phone: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Father's Email Address: \_\_\_\_\_ Mother's Email Address: \_\_\_\_\_

Student lives with: \_\_\_ Both parents, same household \_\_\_ Both parents, different households \_\_\_ Mother only \_\_\_ Father only

Parents are: \_\_\_ Married \_\_\_ Divorced \_\_\_ Separated \_\_\_ Single \_\_\_ Mother Deceased \_\_\_ Father Deceased

Check if applicable: \_\_\_ Joint Custody \_\_\_ Sole custody mother \_\_\_ Sole custody father

List names and ages of other children in the family: \_\_\_\_\_

\_\_\_\_\_

**SCHOOL HISTORY**

Current School: \_\_\_\_\_ Current School Address: \_\_\_\_\_

Dates attended \_\_\_\_\_ to \_\_\_\_\_ Phone # \_\_\_\_\_

Please list previous school attended: \_\_\_\_\_  
\_\_\_\_\_

Has student repeated any grade \_\_\_ Yes \_\_\_ No (if yes, what grade and why) \_\_\_\_\_  
\_\_\_\_\_

Has student ever been tutored or attended summer school? \_\_\_ Yes \_\_\_ No (if yes, please explain) \_\_\_\_\_  
\_\_\_\_\_

Has student ever been suspended from school? \_\_\_ Yes \_\_\_ No (if yes, please explain) \_\_\_\_\_  
\_\_\_\_\_

Has student ever been expelled from school? \_\_\_ Yes \_\_\_ No (if yes, please explain) \_\_\_\_\_  
\_\_\_\_\_

Academic performance is usually: \_\_\_ Superior (95%) \_\_\_ Above Average (85%) \_\_\_ Average (75%) \_\_\_ Below Average (75% or less)

**CHURCH & CHRISTIAN BACKGROUND**

Name of Church: \_\_\_\_\_ Address: \_\_\_\_\_

Are you a member of your church? \_\_\_ Yes \_\_\_ No Does your family regularly attend church? \_\_\_ Yes \_\_\_ No

Does student attend: \_\_\_ Church Service \_\_\_ Sunday School \_\_\_ Youth Club \_\_\_ Other (explain) \_\_\_\_\_

Do parents hold any church position or responsibilities? \_\_\_\_\_

Has the student accepted Jesus Christ as her/his personal Savior? \_\_\_ Yes \_\_\_ No \_\_\_ Unsure

How did you hear about Midwestern Christian Academy? \_\_\_\_\_

Were you referred by a family or friend currently attending Midwestern Christian Academy? \_\_\_ Yes \_\_\_ No

If "Yes", what family? \_\_\_\_\_

Why do you wish to enroll your student at MCA? \_\_\_\_\_

**MEDICAL BACKGROUND**

Does student have any physical limitations or disabilities? (please list) \_\_\_\_\_  
\_\_\_\_\_

Does the student have any allergies? \_\_\_ Yes \_\_\_ No If "Yes" Please list allergies: \_\_\_\_\_

Does student take medications regularly? \_\_\_ Yes \_\_\_ No (If Yes, please explain) \_\_\_\_\_  
\_\_\_\_\_

Has student ever been hospitalized for illness or injury? \_\_\_ Yes \_\_\_ No If "Yes" Please explain \_\_\_\_\_  
\_\_\_\_\_

**I hereby verify that the information given above is accurate and complete to the best of my knowledge**

Father's signature \_\_\_\_\_

Date \_\_\_\_\_

Mother's signature \_\_\_\_\_

Date \_\_\_\_\_