



Glasgow Christian Academy

Educating . . . Empowering . . . Equipping . . .

Students for the Future

600 Old Cavalry Drive, Glasgow
270-651-7729 – glasgowchristian.com

APPLICATION FOR ADMISSION

P3 - GRADE 12

To be completed by GCA Registrar.

ADMISSIONS CHECKLIST

The following items must be submitted to complete the application process. The application fee and state certified birth certificate must accompany the application form in order to initiate the application process. Please refer to the list below for the remainder of the information the Admissions Office will need in order to process your application. If your child is transferring from another school, the below forms will be requested from the school and will not be needed to process the application

- | | |
|--|--|
| <input type="checkbox"/> Application for Admission | The application form must be completed in full for each applicant. Be sure that the appropriate lines are signed. |
| <input type="checkbox"/> Admissions Fee (\$75 - Per Family) | The one-time non-refundable application fee must be enclosed with the completed application form. This fee covers the admissions processing costs. |
| <input type="checkbox"/> Registration Fee (\$75 per student) | The registration fee is an annual fee which guarantees placement. This is a non-refundable fee. |
| <input type="checkbox"/> Birth Certificate | A photocopy of the applicant's state certified birth certificate (a hospital birth certificate cannot be accepted) must be included with the completed application form. |
| <input type="checkbox"/> Social Security Card | A photocopy of the applicant's social security card is required with the completed application form. |
| <input type="checkbox"/> Immunization Report | A photocopy of the applicant's updated Kentucky Immunization Certificate is required to complete the application process. *See Immunization Schedule & Requirements. |
| <input type="checkbox"/> Physical Examination Form | A photocopy of the applicant's completed physical examination form is required for students K-12th Grade. |
| <input type="checkbox"/> Eye Examination Form | A photocopy of the applicant's completed eye examination form is required for students K-12th Grade. (Examination is done in Kindergarten). |
| <input type="checkbox"/> Current Photo | Please include a current photo of applicant. (Photo will not be returned.) |

OFFICE USE ONLY

Date Received by GCA _____ CK# _____ Amount _____



MISSION STATEMENT

The mission of Glasgow Christian Academy is to assist parents in **educating** students intellectually, physically, socially, and spiritually in a Christ-centered environment and **equipping** students with a Christian worldview, thereby **empowering** them to engage the culture for Jesus Christ.

Photo
Here

APPLICANT INFORMATION

(Please Print)

Student Name _____ Name Preferred _____
LAST FIRST MIDDLE

Date of Birth _____ Place of Birth _____
CITY STATE

Gender _____ Social Security # _____

Physical Home Address _____
STREET CITY STATE ZIP CODE

Home Phone Number _____ Most Recent Grade Completed _____ Date Completed _____

Applying for Grade _____ Applying for Admission Date of _____

Ethnic Origin _____ Church Attending _____ Church Member Yes No

Current School Attending (Please include preschool if applying for TK/Kindergarten) _____

THIS MUST BE COMPLETED
SO THAT GCA CAN REQUEST
CUMULATIVE RECORDS Address of Current School _____
STREET CITY STATE ZIP CODE

Reason for Leaving Current School _____

Phone Number of Current School _____ (Fax #) _____

School District in Which the Student Resides _____

P3 / K4 / KINDERGARTEN APPLICANTS ONLY

All applicants to P3 must turn three years old by October 1. All applicants to K4 must turn four years old by October 1. All applicants to Kindergarten must turn five years old by October 1.

- I am applying for **full-day** P3 or K4
 3 day, T, W, Th 5 day, M-F

- I am applying for **half-day** morning P3 or K4
 3 day, T, W, Th 5 day, M-F

- I am applying for **full-day** Kindergarten

- I am applying for **half-day** morning Kindergarten

FAMILY INFORMATION

PLEASE COMPLETE IN ITS ENTIRETY



FATHER/GUARDIAN _____ (Dr./Mr./Rev.)
LAST FIRST MIDDLE

Church Attending _____ Church Member Yes No Current Ministry Involvement _____

Employer _____ Position _____

Business Phone _____ Pager _____

Home Address _____ E-Mail Address _____
STREET CITY STATE ZIP

Home Phone _____ Cell Phone _____

MOTHER/GUARDIAN _____ (Dr./Mrs./Ms.)
LAST FIRST MIDDLE

Church Attending _____ Church Member Yes No Current Ministry Involvement _____

Employer _____ Position _____

Business Phone _____ Pager _____

Home Address _____ E-Mail Address _____
STREET CITY STATE ZIP

Home Phone _____ Cell Phone _____

STEP PARENT/GUARDIAN _____ Dr./Mr./Mrs./Rev.)
LAST FIRST MIDDLE

Church Attending _____ Church Member Yes No Current Ministry Involvement _____

Employer _____ Position _____

Business Phone _____ Pager _____

Home Address _____ E-Mail Address _____
STREET CITY STATE ZIP

Home Phone _____ Cell Phone _____

Applicant lives with (check all that apply):

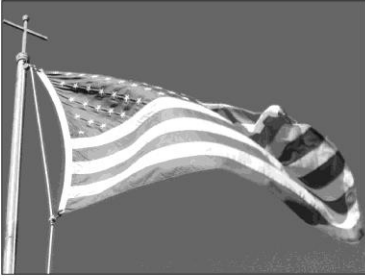
Mother Stepmother Legal Guardian Father Stepfather Other: _____

Marital Status:

Divorced — Primary Custody: _____

Married Separated Widowed Other: _____

**Please attach court documents in the situation of divorce or other legal agreements.*



FAMILY INFORMATION (continued)

PLEASE COMPLETE IN ITS ENTIRETY

Siblings of the Applicant
Name

Birthdate

Gender

Current School

Grandparents (to be placed on mailing list)

Name _____
LAST FIRST

Address _____
STREET CITY STATE ZIP

Name _____
LAST FIRST

Address _____
STREET CITY STATE ZIP

Medical Information

Physician _____ Permission to Treat Yes No
CHECK ONE

Address _____ Business Phone _____ Pager _____
STREET CITY STATE ZIP

Emergency Contact Person (other than parents) _____ Relationship _____

Address _____
STREET CITY STATE ZIP

Phone Number _____ Cell Phone _____ Pager _____

How did you hear about GCA? (check all that apply) Family Radio Friends Newspaper Other: _____

Have you previously applied for admission to GCA for any student in your family? _____

If yes, when? _____ Student Name _____

Parents, please describe your relationship with Christ and why you would like your student(s) to attend GCA _____

STUDENT INFORMATION

PLEASE COMPLETE IN ITS ENTIRETY



In what activities has the student participated, either at school or church? _____

Has the student received any special honors in school or outside of school? Please explain. _____

Does the student have any hobbies or special interests? If so, please describe them. _____

Has the student ever been suspended or expelled from school? Please explain. _____

Has the student ever repeated a grade? Yes No Grade(s) _____

If the above answer is yes, please explain. _____

Has the student ever been recommended for tutoring or remedial instruction? _____

If yes, please provide dates and areas of remediation along with written evaluations.

Has the student ever been referred to a resource teacher? _____

If yes, please provide dates and reason for referral.

Has the student ever had modifications made in the classroom? _____

Has the student ever been administered psychological, behavioral, or academic testing to determine if he/she is gifted, has a learning disability ADD, ADHD, behavior, or emotional disorder? _____

If yes, please provide dates, test results, evaluations, IEP reports, etc. This information is not routinely part of the cumulative folder and must be requested by the parent/guardian from the resource teacher or school counselor.

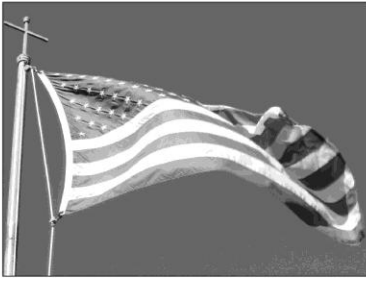
Is the student presently taking any medication for any medical or learning problems? Yes No

If Yes, please provide kind of medications, dosage, and frequency. _____

Please provide a copy of a medical evaluation, which must be within the last twelve months.

Is there any additional information that you would like for the Admissions Office to be aware of when considering this student for enrollment? _____

Parent Signature _____ **Date** _____



ESSAY QUESTIONS

SECONDARY APPLICANTS ONLY (GRADES 7-12)

*These questions are for the prospective student to answer in his/her own handwriting.
If you need additional space, please use another sheet of paper.*

How did you become interested in applying to GCA? _____

List the three most important things in your life and explain your choices. _____

Do you consider yourself a Christian? _____

If you are a Christian, please explain the role that Jesus Christ plays in your life. _____

On a scale of 1-10 (1 being the lowest), how excited are you about enrolling in GCA? Please explain. _____

Why are you interested in coming to GCA, a private Christian school? What questions, doubts, or fears do you have about coming to GCA? _____

Student Signature _____ **Date** _____

STATEMENT OF FAITH

The following are incorporated into instruction and our curriculum includes a thorough Biblical worldview.



We believe the Bible to be the inspired, the only infallible, authoritative, inerrant Word of God. (II Timothy 3:15, II Peter 1:21)

We believe there is one God eternally existent in three persons -Father, Son, and Holy Spirit.
(Genesis 1:1, Matthew 28:19, John 10:30)

We believe in the deity of Christ. (John 2:11) **His virgin birth.** (Isaiah 7:14, Matthew 1:23, Luke 1:35) **His sinless life.** (Hebrews 4:15, Hebrews 7:26) **His miracles.** (John 2:11) **His vicarious and atoning death.** (I Corinthians 15:3, Ephesians 1:7, Hebrews 2:9) **His resurrection.** (John 11:25, I Corinthians 15:4) **His ascension to the right hand of the Father.** (Mark 16:19) **His personal return in power and glory.** (Acts 1:11, Revelation 19:11)

We believe in the absolute necessity of regeneration by the Holy Spirit for salvation because of the exceeding sinfulness of human nature and that men are justified on the single ground of faith in the shed blood of Christ and that only by God's grace and through faith alone we are saved. (John 3:16-19, John 5:24, Romans 3:23, Romans 5:8-9, Ephesians 2:8-10, Titus 3:5) **We believe in the resurrection of both the saved and the lost, they that are saved unto the resurrection of life, and they that are lost unto the resurrection of damnation.** (John 5:28-29)

We believe in the spiritual unity of believers in our Lord Jesus Christ. (Romans 8:9, I Corinthians 12:12-13, Galatians 3:26-28)

We believe in the present ministry of the Holy Spirit by whose indwelling the Christian is enabled to live a godly life. (Romans 8:13-14, I Corinthians 3:16, I Corinthians 6:19-20, Ephesians 4:30, 5:18)

STATEMENT OF PARENTAL PARTICIPATION

In keeping with the admonition of Deuteronomy 6, parents assume the responsibility for their children's education at GCA. Desiring to encourage this responsibility among our parent body, GCA's Board expects parents in the school to demonstrate their commitment to their child's education by volunteering in a school-sponsored activity(ies).

By making application to Glasgow Christian Academy, you are certifying that at least one parent in the home is submitting to the Lordship of Jesus Christ, attending a local church, and that you are in agreement with our statement of faith and purpose.

Parent Signature _____ Date _____

Parent Signature _____ Date _____

Student Signature _____ Date _____

(Grades 6-12)



Glasgow Christian Academy

Educating ... Empowering ... Equipping ...

Students for the Future

600 Old Cavalry Drive, Glasgow
270-651-7729 – glasgowchristian.com

Glasgow Christian Academy admits students of any race, color, national or ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students of the school.

Glasgow Christian Academy does not discriminate on the basis of race, color, national and ethnic origin in administration of its educational policies and admissions.