



# TRINITY OAKS CHRISTIAN ACADEMY

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## GENERAL STUDENT INFORMATION

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Legal name of applicant \_\_\_\_\_

First name used by applicant \_\_\_\_\_ Gender female male

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Birthplace \_\_\_\_\_

Applying for grade \_\_\_\_\_ Applying for semester beginning \_\_\_\_\_

### Student Lives With:

- |  |                                       |   |  |
|--|---------------------------------------|---|--|
| <input type="checkbox"/> Both Parents          | <input type="checkbox"/> Father Only  | <input type="checkbox"/> Mother Only    | <input type="checkbox"/> Mother and Stepfather |
| <input type="checkbox"/> Father and Stepmother | <input type="checkbox"/> Grandparents | <input type="checkbox"/> Foster Parents | <input type="checkbox"/> Other                 |

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## FATHER

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Name: Mr. Dr. Rev. \_\_\_\_\_ E-mail Address \_\_\_\_\_

Home Address \_\_\_\_\_ Home # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Cell # \_\_\_\_\_

Occupation \_\_\_\_\_ Employer \_\_\_\_\_ Work # \_\_\_\_\_

**Education:** Attended Trinity Oaks **Marital Status:** Married Separated Widowed  
High School College Graduate School Divorced Remarried

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## MOTHER

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Name: Miss. Mrs. Dr. Rev. \_\_\_\_\_ E-mail Address \_\_\_\_\_

Home Address \_\_\_\_\_ Home # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Cell # \_\_\_\_\_

Occupation \_\_\_\_\_ Employer \_\_\_\_\_ Work # \_\_\_\_\_

**Education:** Attended Trinity Oaks **Marital Status:** Married Separated Widowed  
High School College Graduate School Divorced Remarried

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## GENERAL FAMILY INFORMATION

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If parents are divorced, who has legal custody of the child? \_\_\_\_\_

Is either parent or any other person forbidden access to the child by a court order? \_\_\_\_\_

Is your child presently experiencing any situations unique to your family or home life that the school should know about, so as to better understand him/her and provide support where needed? \_\_\_\_\_  
\_\_\_\_\_

Siblings

Full Name	Date of Birth	Grade	School

**STUDENT INFORMATION**

Has the applicant expressed a desire to attend Trinity Oaks Christian Academy? \_\_\_\_\_

Does the applicant have any specific handicaps or medical problems? \_\_\_\_\_

Does the applicant take prescribed medication(s) for chronic medical conditions? \_\_\_\_\_

If yes, what condition and medication(s)? \_\_\_\_\_

Does the applicant have any allergies? Please list \_\_\_\_\_

Comment upon the applicant's personality traits (well behaved, poised, responsible, congenial, reticent, temperamental, aggressive, domineering, fearful, etc.): \_\_\_\_\_

Has the applicant been professionally evaluated for any of the following? If yes, please circle:

Speech      Language Development      ADD/ADHD      Hearing or Vision Problems      Learning Disability

**ACADEMIC**

Name of School	Address	Grades	Reason for Leaving

Do you as a parent or guardian give permission to Trinity Oaks Christian Academy to contact any school previously attended by this child to obtain records relevant to your child's previous educational experience? \_\_\_\_\_

Describe the student's academic interests, abilities, and strengths: \_\_\_\_\_

Has the student ever repeated a grade? \_\_\_\_\_ If so, what grade? \_\_\_\_\_

Has the student ever had discipline difficulty in school? If yes, please explain \_\_\_\_\_

Has the student ever been suspended or expelled? \_\_\_\_\_ If so, please give full details on a separate sheet of paper, including the principal's name and phone number.

Has the student had extended absences from school? \_\_\_\_\_

If home schooled, what curriculum was used? \_\_\_\_\_

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**SPIRITUAL**

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Trinity Oaks Christian Academy is a distinctively Christian school, partnering with the home and church to train children. In keeping with our core values and distinctives, we seek applicant families whose beliefs and lifestyle choices are consistent with the basic truths of evangelical Christianity. We require that at least one parent be a professing Christian.

Church Affiliation \_\_\_\_\_ Members? \_\_\_\_\_

Do both parents regularly attend? \_\_\_\_\_ Describe your involvement in your church \_\_\_\_\_

Church where child attends (if different from parents) \_\_\_\_\_

How often does child attend? \_\_\_\_\_

Has the applicant made a personal commitment to Jesus Christ? \_\_\_\_\_

Please attach a separate page and answer the following questions. A separate response is needed from each parent.

1. Have you accepted Jesus Christ as your personal Savior and Lord? If yes, describe how you came to know Him.
2. What have you taught your children regarding the Bible and its relevance to their lives?
3. How does your faith influence your family life?
4. What is your approach to and method(s) of discipline?

# TRINITY OAKS CHRISTIAN ACADEMY

## *Parents' Pledge*

1. In applying for our child to attend Trinity Oaks Christian Academy, we agree to support the school's Statement of Faith and the spiritual, moral and disciplinary standards of the school as well as the Philosophy of Education.
2. If our child is accepted at Trinity Oaks Christian Academy, we agree to support, to the best of our abilities, the various activities of the school.
3. If our child is accepted at Trinity Oaks Christian Academy, we agree to support our child's education by supervising assigned homework and by keeping in regular contact with our child's teachers.
4. We agree that our child is to receive training in the Bible and will support the school in its endeavors to encourage and guide our child in applying these teachings to his/her life.
5. We understand that the school has full discretion in the grade placement of our child.
6. We will not send our child to school when he or she is ill so as to help prevent illness from spreading to other students.
7. We will continue to be active in our local church.
8. We agree to fulfill our financial obligation as outlined in the Parent/Student Handbook and if delinquent will pay all collection costs, including legal fees if necessary.
9. We do not have any outstanding fees, tuitions, accounts, or other obligations to any school previously attended.
10. We understand that this application cannot be considered without the application fee.
11. We understand that if the student is accepted, the registration fee will not be refundable.

We have read the above guidelines and agree to abide by them and support them during our child's enrollment at Trinity Oaks Christian Academy.

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Father's Signature

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Date

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Mother's Signature

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Date