



# STUDENT APPLICATION

Harvest Christian Academy 110 Mckee Road Bakersfield, CA 93307 661 831-3639

<input type="checkbox"/> ENROLLMENT	<input type="checkbox"/> RE - ENROLLMENT	<input type="checkbox"/> ELP	<input type="checkbox"/> DLP
DATE		SCHOOL YEAR.	

Student Last Name			First Name			Middle			Father			Mother		
Address			City			Zip			E-mail			E-mail		
Date of Birth:			Cell Phone:			Employment			Employment			Position:		
Home Phone:			Emergency Phone:			Position:			Business Phone:			Business Phone:		
Last School :			Last Grade Completed:			Lives in home?			Lives in home?			Lives in home?		
Previous School:			Last Grade Completed:			If divorced, has legal custody?			If divorced, has legal custody?			If divorced, has legal custody?		
Children in the home attending other schools	Name		Age		School		Information about Church and Faith			Church student attends:				
										Address:				
										Pastor's name:		Phone:		
										Has student professed faith in Christ?		Father?	Mother?	
										How many services per week does student attend? 0-1, 1-2, 2-3				
Name of physician:						Student's Grades Have Been: <input type="checkbox"/> Superior <input type="checkbox"/> Above Avg. <input type="checkbox"/> Average <input type="checkbox"/> Below								
Medical facility:						Phone:								
Medical conditions, physical defects, or allergies? (Explain)						Has Student Failed Any Grade? <input type="checkbox"/> Yes <input type="checkbox"/> No If so what grade?								
Are student immunizations current? (If not, explain)						Has any school ever recommended that this student be held back a grade? (If yes, explain)								
Are there any emotional or behavioral problems that we should know about?						Has this student ever been expelled, dismissed, suspended, or denied admission to another school? (If yes, explain)								
						How will student get to and from school?								