Central Baptist Academy

7645 Winton Road, Cincinnati, Ohio 45224, (513) 521-5481, CentralBaptistAcademy@gmail.com

School year:		1	Application for	Admission		Registration Rec'd.	
	_	Pleas	e fill out this fo	orm completely.		***	
Student Nar	ne			Grade Entering		Age	
	First	Middle	Last				
Address		*					
B: .1	Street			City	State	Zip	
Birthdate	- d - d l - d		Sex	Race		SS#	
	nded last year						
rubiic scrioc	ol district in which yo	u reside					
Father / Gua	ardian				Marital St	tatus: S / M / D / W	
Address (if o	lifferent)					, 27	
	Street			City	Sta	te Zip	
Email addre	ss				A Company of the Comp		
Phone		Home / C	ell / Work	Phone		Home / Cell/ Work	
Employer		Position					
SS#		Does the child reside with the father? Yes / No. Full-time / Part-time.					
	her know Jesus Chris	t as his personal S	Savior? Yes / No.				
Mother / Gu					Marital St	tatus: S / M / D / W	
Address (if o	lifferent)					***************************************	
m 11 ()	Street			City	Sta	te Zip	
Email addre	ss			**************************************			
Phone		Home / C	ell / Work	Phone		Home / Cell/ Work	
Employer SS#		Position Does the child reside with the mother? Yes / No. Full-time / Part-time.					
and the same	other know Jesus Chr	ist as her nersona			otner? Yes / No	o. Full-time / Part-time.	
	church the family at		1 Javior: Tes/ N	0.	Pastor		
			es/No Ifves n	lease have student give		ony (Grades 7-8 only)	
		zersonarsavior. 1	co / 110. 11 yes, p	icuse nave stadent give	a brief testime	ony. (Grades 7-8 only)	
Has the stud	lent ever repeated a	grade? Yes / No. I	f yes, for what re	eason?			
Has student	had any discipling pr	oblems in school	i o suspansions	or expulsions? Yes / N	a If you place	avalain briafic	
rias stauent	nad any discipline pi	obiems in school,	i.e. suspensions	or expulsions: res / N	o. ii yes, piease	explain briefly.	
Does studen	it have any mental, e	motional, or phys	ical handicaps o	r communicable diseas	ses which may a	ffect his/her	
	progress? Yes / No. I				,		
0		85-01 PRIEW -	•				
Does studen	t have any identified	learning disabilit	ies, learning diff	iculties, or an Individua	alized Education	Program (IEP) or	
504 Evaluati	on? Yes / No. If yes, p	olease explain bri	efly. (Please note	e that CBA is only able t	to meet some a	ccommodations.)	
Do you give	permission for stude	nt's picture or vid	eo to be used or	n the school's website	or Facebook pag	ge? Yes / No.	
Does studen	t have any allergies t	o food or medicir	ne? Yes / No. If v	es, please explain brief	ły.		
		anaryest tan Bertandi California (C.)	Manage Management of Total Control of	90			
Whom shou	ld we call in case of i	Iness or emergen	cy <u>if</u> we cannot	reach a parent?	***		
Name		Re	lationship		Phone		

		Court order #	Date			
NANCIAL OBLIGATION:	alar and different	GREEKS TO THE	8.88			
		gh May. Payments received after the 15th	55.50 EST 2500 EST			
		the 25th (except May when by the 16th)	1 25 26 26 27			
		collection agency. Academic records will				
		0.00. After the second returned check, tui	ACTION OF THE PROPERTY AND ACTION AND ACTION OF THE PROPERTY AND ACTION ACTION AND ACTION ACTION AND ACTION ACTION AND ACTION			
		NONREFUNDABLE AND NONTRANSFERAE				
		ol year, any unpaid fees including that mo	onth's installment for tuition			
ust be paid in full. All academic records w	vill be held until the bal	ance is paid in full.				
DUCATIONAL PHILOSOPLY:						
gree to support the Christian philosophy	to which the Central Ba	aptist Academy is committed and the rule	s and regulations by which			
e school is administered as contained in	the Policy Handbook. I f	further understand that my child is expec	ted to comply with and maintai			
e academic and behavioral standards as	contained in the Policy	Handbook. The administration, according	to enrollment, staff availa-			
lity, etc., will determine class size and gra	de combinations. All ne	ew students will be on probation for the f	irst semester of attendance.			
DNSENT TO POLICY:						
ereby certify my consent and compliance	to all governing policie	es of the school and understand that adm	ission to Central Baptist			
ademy is a privilege, not a right. Continu	ed attendance at the so	chool is subject to the sole discretion of th	ne administration. All			
rents should understand that students a	re admitted only if the	following conditions are met:				
1 Parents grant permission to the sch	ool authorities to discip	line their children using necessary metho	ods. Parents agree			
that they will cooperate and discipl	ine the child in the hom	ne. (Proverbs 13:24, 19:18, 22:15)	, ,			
2 Parents agree that if their child sho	uld become involved in	any difficulty with other children in school	ol, they will in no case			
complain to any other parent. This	should be handled in a	prayerful spirit through the teacher(s) and	d administration. Any			
questions, comments, or problems administrator. (1 Peter 3:8-12)	with any child should be	e handled through the teacher(s) prior to	going to the principal or			
3 Parents agree that their children wi	ll abide by all school ru	es and policies including, but not limited	to, the uniform dress			
code and use of the King James Ver	code and use of the King James Version of the Bible. Parents are responsible for all information in the Policy Handbook and					
grade specific Policy Sheet. Change	s may occur; written no	tification will be made available to paren	ts about the changes.			
4 Parents agree to meet their financia	al obligations to the sch	ool. This includes tuition, fees, etc. (II Kin	gs 4:7; Romans 13:8)			
5 Parents understand that the school	does not have insurance	e for students. Insurance for all school ac	ctivities and events			
should be covered under parents' in	surance policies.					
6 Parents understand that CBA does	not accept or accommo	date 504 Evaluations or Individualized Ed	ucation Plans.			
7 The school administration reserves	the right to open and s	earch lockers at any time.				
8 Admission of students is based upo	n at least one parent be	eing a born-again believer. This is the only	way that what is being			
taught in school can be reinforced i	n the home. Strong par	ticipation in and faithfulness to your chur	ch is critical to the			
educational process.						
ther / Guardian Signature	Date	Mother/Guardian Signature	Date			
EDICAL:						
give consent for my child to participate in	regularly scheduled ac	tivities sponsored by the school and to be	transported to and from			

Date

my child would be transported to Children's Hospital if I cannot be contacted.

Parent Signature