

Bridge Christian Academy

P.O. Box 701
Fairhope, Alabama, 36533
(251) 979 – 6227

www.BridgeChristianAcademy.com
AlabamaBCA@gmail.com

APPLICATION FORM

APPLICANT INFORMATION

Today's Date:

Primary Teacher's (PT) Name:

Relationship to Student(s):

**PLEASE ANSWER THE FOLLOWING QUESTIONS AND MAIL TO
P.O. BOX 701 , FAIRHOPE , AL , 36533**

1. Please let us know how you found out about BCA?

2. How many children will you be enrolling?

3. What will their grade levels be for the 2016/2017 school year?

4. What school did he/she attend last year?

5. What is the PT highest level of education?

6. If no college experience, did the PT receive a high school diploma?

6a. If not:GED?

7. Will the PT work outside the home during school hours?

If you answered yes, please answer questions 7a, 7b, and 7c. If you answered no, go to question 6.

7a. Who will the child(ren) be with during school hours?

7b. How many days a week will the PT work?

7c. Hours per day that PT will be working and occupation?

8. Do you and your family attend church?

If you answered yes, please answer 8a, 8b, 8c, 8d, and 8e:

8a. What is the name of your home church?

8b. What is the denomination and location of said church?

8c. Do you attend regularly or on occasion?

Answer 8d and 8e if you do not have a home church, but have been visiting churches:

8d. What was your home church before you began looking for a new church?

8e. how long have you been looking for a permanent church?

APPLICATION FORM

9. Have any of the children to be enrolled, ever been suspended, attended or requested to attend an alternative school, expelled at any time, for any reason, or has the student been committed to an institution for behavior or substance abuse? *(If yes, please give details in comments area)*

10. Are all of the children to be homeschooled biologically both parents?

If no, please briefly explain the situation in the comments area and answer question 10a

10a. Will you be able to obtain a notarized letter from the absent parent stating they are in agreement with and support your decision to homeschool (regardless of custody situation)?

If no, please explain in the comments area below

PLEASE COMPLETE THE FOLLOWING INFORMATION SO WE CAN CONTACT YOU REGARDING YOUR APPLICATION

Name:

Email:

Phone:

Mailing Address:

Thank you for taking the time to complete this questionnaire. As soon as we receive it, we will be in contact with information regarding application for the 2016/2017 school year. If you have any questions, or if there is anything we can help you with, please feel free to call or email us. We look forward to hearing from you!

COMMENTS – PLEASE ADD ANY COMMENTS OR ADDITIONAL INFORMATION YOU FEEL WE MIGHT NEED TO KNOW. YOU MAY ALSO ADD ANY QUESTIONS YOU MIGHT HAVE TO THIS AREA.

Comments:

FOR OFFICE USE ONLY

Received:

Application sent:

VIA:

Per: