

HOLT STREET MEMORIAL BAPTIST CHURCH
ACADEMY

1870 South Court Street Montgomery, AL 36104
(334) 261-4141

STUDENT APPLICATION FORM

Date of Application_____

I. Student Information

Last Name_____First Name_____MI_____

Goes By_____ Age_____

Social Security #_____ Date of Birth_____

Male_____ Female_____

Has the student made a profession of faith in Jesus Christ? _____

Which most accurately describes the student's church attendance?

_____Active in Church _____Attends Occasionally _____Attends Sunday School

Name	Age	Grade	School
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

II. Parent/Guardian Information

Father/Guardian

Last Name _____ First Name _____ Title _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Work _____ Cell _____

Name of Employer _____ Occupation _____

Social Security # _____ Marital Status _____

Relationship to Student _____ Spouse's Name _____

Mother/Guardian

Last Name _____ First Name _____ Title _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Work _____ Cell _____

Name of Employer _____ Occupation _____

Social Security # _____ Marital Status _____

Relationship to Student _____ Spouse's Name _____

Who is responsible for paying school bills?

Name _____ Relationship _____

Address _____

City _____ State _____ Zip _____

In case of Emergency Contact:

Name _____ Relationship _____

Home Phone _____ Work _____ Cell _____

Name _____ Relationship _____

Home Phone _____ Work _____ Cell _____

Name _____ Relationship _____

Home Phone _____ Work _____ Cell _____

List anyone NOT authorized to pick up your child from school.

III. Educational Information

Student Confidential Reference Form will be sent to prior school. Please complete all information below.

Name of most Recent School Attended _____

Mailing Address _____

City _____ State _____ Zip _____

School Phone Number _____

Does the child have any physical or emotional problems that require special medication or attention? Yes _____ No _____

If yes, please explain: _____

Has the student ever been referred to or tested for learning disabilities or special education services? Yes _____ No _____

Has the student ever been suspended from school? Yes _____ No _____

If yes, please explain: _____

Please describe the nature of any previous discipline problems. _____

Do you have any outstanding balances at another school? Yes _____ No _____

Briefly describe any special extracurricular interest, hobby, talent, or aptitude of the student.

IV. Christian Background Information

Which best describes the parent's/guardian's church attendance.

Father:

_____ Active in Church _____ Attends Occasionally _____ Attends Sunday School

Mother:

_____ Active in Church _____ Attends Occasionally _____ Attends Sunday School

Do you consider yours a Christian home?

Have you received Jesus Christ as your personal Lord and Savior?

Father: _____ Yes _____ No

Mother: _____ Yes _____ No

Guardian: _____ Yes _____ No

Which Church do you attend? _____

Pastor's Name _____ Church Phone _____

Does your family attend church together? __Yes ___No

If not, please explain: _____

How many hours a week would you say you spend with your child? _____

I have read all the parts of this application carefully, and certify that all information I have given is accurate. I understand that my child is not accepted until I receive official notice from the school director.

Father's Signature _____ Date _____

Mother's Signature _____ Date _____

Legal Guardian's Signature _____ Date _____