

HOLT STREET MEMORIAL BAPTIST CHURCH  
CHILD DEVELOPMENT CENTER  
1870 South Court Street      Montgomery, AL 36104  
(334) 261-4141

STUDENT APPLICATION FORM

Date of Application \_\_\_\_\_

I. Student Information

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ MI \_\_\_\_\_

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

Please give names of brothers and sisters.

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

II. Parent/Guardian Information

Father

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Title \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Email Address \_\_\_\_\_ Marital Status \_\_\_\_\_

Relationship to Student \_\_\_\_\_ Spouse's Name \_\_\_\_\_

Mother

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Title \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Email Address \_\_\_\_\_ 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 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

List any other persons 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 \_\_\_\_\_