

III. PARENT/GUARDIAN INFORMATION

Father

Mother

Name _____ Name _____
Occupation _____ Occupation _____
Employer _____ Employer _____
Business Phone _____ Business Phone _____
Cell Phone _____ Cell Phone _____

Who has legal custody of the child for whom application is being made? _____
**It is the parent/guardian's responsibility to notify the school of any changes in custody and provide documentation while the child is enrolled at Neighbors Grove Christian Academy.

If applicant lives with someone else other than parents, please state: _____

Applicant's Siblings

Name **Age** **Current Grade** **School Currently Attending**

IV. CHURCH AFFILIATION

Church Your Family Attends: _____

Pastor's name: _____ Church phone: _____

Are you a member of this church? _____ In what church activities is the applicant involved? _____

V. STUDENT ACADEMIC HISTORY

List other schools your student has attended, beginning with the most recent
School: _____ Grade: _____ Year(s): _____
Address: _____
Street City State Zip

School: _____ Grade: _____ Year(s): _____
Address: _____
Street City State Zip

****Please submit copies of your student's report cards for the last two years.**

Has your child ever had to repeat a grade(s)? _____ If yes, which grade(s)? _____ Please state the reason for the retention. _____

Has your student been tested for or enrolled in a special program (resource, learning disability, gifted and talented, etc.) Yes/No _____ Please Explain: _____

Has your student been diagnosed with ADD or ADHD? Yes/No _____ Doctor _____
Medication _____

Has your student been suspended or expelled from school for any reason? Yes/No _____

If yes, please give the year of the suspension or expulsion and the reason(s). _____

List of extracurricular interests, abilities, and achievements: _____

VI. REFERRAL

Were you referred by someone to NGCA? _____ If so, by whom? _____

We first learned of NGCA through:

_____ Student currently enrolled _____ Telephone Book
_____ Minister _____ Newspaper
_____ Other: _____ _____ Parents of NGCA Students: _____

Two key factors influencing our decision to apply to NGCA:

_____ Location _____ Recommendation of a Current NGCA family
_____ Christian Philosophy _____ Displeasure with public schools
_____ Academic Program _____ Other: _____

NOTICE OF NONDISCRIMINATORY POLICY AS TO STUDENTS

Neighbors Grove Christian Academy admits students of any race, color, national, or ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, national, and ethnic origin in administration policies, admissions policies, scholarship and loan programs, and athletic and other school administered programs.

VII. EMERGENCY CONTACTS

List several Emergency Contacts in case parents or guardians are unavailable in an emergency.

Name _____ Home Phone _____ Work Phone _____

Name _____ Home Phone _____ Work Phone _____

Name _____ Home Phone _____ Work Phone _____

VIII. Authorized to pick up your child - Those persons listed above as Emergency Contacts will also be authorized to pick up your child unless otherwise noted.

Medical Information

Allergies _____

Doctor preference: _____ Phone _____

Hospital preference: _____ Phone _____

List all regular medication taken: _____

Health Insurance: _____
Provider ID #

By signing this form, I agree that the Administrator, teacher, or person in charge, may authorize the physician of his/her choice to provide emergency care for my child in the event that neither the preferred physician nor I can be contacted immediately. I also understand that my family medical insurance coverage is the primary insurance for my child. The Neighbors Grove Christian Academy Insurance is secondary insurance coverage.

Parent/Guardian Signature Date

Parent/Guardian Signature Date



**1928 N. Fayetteville St.
 Asheboro, NC 27203
 336-672-1147
 ngcaoffice@centurylink.net**

Admissions Application

Interested parents should complete and return this application to NGCA with the required non-refundable registration fee before applicants can be considered for admission. Return application to academy administration office. *Please print neatly.*

I. STUDENT INFORMATION

Applicant's full name: _____

Currently in grade: _____ *Last* Applying for grade: _____ *First Middle Preferred* For Year: _____

Date of birth: _____ Gender: Male _____ Female _____

Parents Names: _____ / _____
Mother Father

Driver's License: _____
Mother Father

Address: _____

City State Zip

Telephone: (home) _____
Mother Father

E-mail Address: _____
Mother Father

It is the parent/guardian's responsibility to update the school with student and family information changes as they occur during the year.

II. PHOTO

Please include a photograph of the applicant here. A snapshot or family photo will suffice.

Neighbors Grove Christian Academy
 1928 North Fayetteville Street
 Asheboro, NC 27203
www.neighborsgrove.com