

APPLICATION FOR ADMISSION

BAPTIST ACADEMY OF ANTIGUA
RADIO RANGE, ST. JOHN'S, ANTIGUA
TELEPHONE 462-2894

1. STUDENT'S INFORMATION

LAST NAME: _____

FIRST NAME: _____

MALE: [] FEMALE: []

DATE OF BIRTH: DAY [] MONTH [] YEAR []

ADDRESS: _____ TEL.: _____

2. PARENTS' INFORMATION

A. FATHER'S PROFILE:

LAST NAME: _____ FIRST NAME: _____

ADDRESS: _____ TEL.: _____

WORK PLACE: _____ TEL.: _____

B. MOTHER'S PROFILE:

LAST NAME: _____ FIRST NAME: _____

ADDRESS: _____ TEL.: _____

WORK PLACE: _____ TEL.: _____

3. EMERGENCY INFORMATION

FAMILY DOCTOR: _____ TEL.: _____

EMERGENCY CONTACT: _____ TEL.: _____

4. DOCUMENTS/ITEMS TO BE ATTACHED TO THIS APPLICATION

A. COPY OF BIRTH CERTIFICATE []

B. COPIES OF LAST 3 ACADEMIC REPORTS []

C. UP-TO-DATE HEALTH CARD []

5. PLEASE STATE HOW YOU WERE INFORMED ABOUT THE BAPTIST ACADEMY OF ANTIGUA.

6. TO WHICH DIVISION ARE YOU SEEKING ENTRANCE?

A. HIGH SCHOOL (AGES 15 YEARS TO 18 YEARS)

- GRADE 9 []
- GRADE 10 []
- GRADE 11 []
- GRADE 12 []

B. MIDDLE SCHOOL (AGES 13 YEARS TO 14 YEARS)

- GRADE 7 []
- GRADE 8 []

C. ELEMENTARY (AGES 5 YEARS TO 12 YEARS)

- GRADE 1 []
- GRADE 2 []
- GRADE 3 []
- GRADE 4 []
- GRADE 5 []
- GRADE 6 []

D. PRESCHOOL (AGES 2 YEARS TO 5 YEARS)

- KINDERGARTEN 2 []
- KINDERGARTEN 3 []
- KINDERGARTEN 4 []
- KINDERGARTEN 5 []

E. DAYCARE (BIRTH TO 2 YEARS OLD)

- DAYCARE []

7. RELIGIOUS INFORMATION:

A. FAMILY CHURCH AFFILIATION/DENOMINATION:

B. LOCAL CHURCH _____ TELEPHONE: _____

C. PASTOR'S NAME: _____ TELEPHONE: _____

SIGNED: _____ DATE: _____

PRINT NAME IN BLOCK LETTERS: _____

STATE RELATIONSHIP TO CHILD: _____