

# Plaza Heights Christian Academy

1500 SW Clark Road  
Blue Springs, Missouri 64015  
Phone (816) 228-0670

## STUDENT APPLICATION FOR ADMISSION 2018-2019 School Year

(TO BE COMPLETED BY PARENT OR GUARDIAN)

Student's Name \_\_\_\_\_



**Mission Statement:** Plaza Heights Christian Academy exists to; partner with Christian families, provide a quality Christ-centered education, prepare students to meet life's challenges with a Biblical worldview.

**Vision Statement:** The vision of Plaza Heights Christian Academy is to be an authentic Christian Community, unified by our common faith in Jesus Christ. As a cooperative body of believers, we will encourage each other to daily pursue righteousness. Together, we will strive to energize and equip each student to succeed in whatever path the Lord directs. Our desire is to see our students impact their communities and become purposeful, productive Christian adults.

Since God's love extends equally to all people, Plaza Heights Christian Academy welcomes and encourages all children regardless of sex, race, color, nationality, or ethnic origin to apply for admission, financial aid, and any/all programs of the school and does not discriminate on the basis of sex, race, color, nationality, or ethnic origin in the administration of any program of the school.

### Office Use Only

Date Application Received \_\_\_\_\_

Sibling of Current Student \_\_\_\_\_

Member of PHBC \_\_\_\_\_

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**Please print neatly. This application must be completed in full, signed, and submitted before your child will be considered for admission. Approved applicants will be enrolled in the order in which their applications were received.**

## GENERAL STUDENT INFORMATION

Student Name: \_\_\_\_\_  
Last First Middle

Home Address: \_\_\_\_\_  
Street City, State Zip Code

Preferred Name: \_\_\_\_\_ DOB: \_\_\_/\_\_\_/\_\_\_ Boy\_\_\_ Girl\_\_\_ Age\_\_\_

Application Date: \_\_\_\_\_ Has child made a profession of faith? Yes\_\_\_ No\_\_\_

To be eligible for enrollment, students entering kindergarten should be five by August 1st; students entering first grade should be six by August 1st. Students applying for kindergarten and first grade must attach a copy of their state certified birth certificate with this application.

Applying for Grade: \_\_\_\_\_ Will require Before/After Care: AM\_\_\_ PM\_\_\_ Both\_\_\_

*Plaza Heights Christian Academy is often asked for aggregate data by various agencies, including the federal government, accrediting associations, and colleges/universities for grants and research. In order to respond to these requests, we ask that you answer the following questions:*

Please select one or more of the following racial categories to describe your child:  
\_\_\_ African American \_\_\_ Asian \_\_\_ Caucasian (White) \_\_\_ Hispanic \_\_\_ Native American \_\_\_ Other \_\_\_\_\_

Within what public school district do you reside? \_\_\_\_\_

Based upon your residence, what public school building would your child be required to attend ***if*** they were going to a public school?

\_\_\_\_\_

## PARENT/GUARDIAN INFORMATION

Parents are (please circle one): Married Divorced Separated Single Widowed

Student lives with (please circle one): Parents Mother Father Other \_\_\_\_\_

Father's Name: \_\_\_\_\_ Mother's Name: \_\_\_\_\_

Occupation: \_\_\_\_\_ Occupation: \_\_\_\_\_

Company: \_\_\_\_\_ Company: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Business Phone: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Cell Phone Carrier: \_\_\_\_\_ Cell Phone Carrier: \_\_\_\_\_

E-mail address: \_\_\_\_\_ E-mail address: \_\_\_\_\_

Church Membership: yes\_\_\_ no\_\_\_ Church Membership: yes\_\_\_ no\_\_\_

Name of Church: \_\_\_\_\_ Name of Church: \_\_\_\_\_