

APPLICATION

Mother (or Guardian)

Father (or Guardian)

Address

City

State

Zip

Mother's Address if different

City

State

Zip

Mother's Email

Primary Phone Number

Secondary Phone Number

Fathers Address if different

City

State

Zip

Father's Email

Primary Phone Number

Secondary Phone Number

Are you a legal guardian? Yes ____ No ____

- If **NO**, explain relationship to student(s): _____

Children Enrolling in Preschool

FULL LEGAL NAME	GENDER/ BIRTHDATE	First year of Preschool? Y/N	2 DAYS T & TH	3 DAYS M W & F	5 DAYS M - F
	M or F / /				
	M or F / /				
	M or F / /				

Children Enrolling in Grades Kindergarten – 8th

FULL LEGAL NAME	GENDER/ BIRTHDATE	LAST SCHOOL ATTENDED	GRADE COMPLETED
	M or F / /		
	M or F / /		
	M or F / /		
	M or F / /		
	M or F / /		

Please explain why sending your child(ren) to a Christian school appeals to you:

EDUCATIONAL INFORMATION

Have any of the enrolling children repeated a grade? Yes _____ No _____

- If **YES**, which child and what grade? _____

Have any of your children been suspended or placed on probation from any school? Yes _____ No _____

Do any of your children have any special academic, emotional, or physical needs? Yes _____ No _____

- If **YES**, do they have a 504, IEP, or intervention process? Yes _____ No _____

Are any of your children receiving special help? Yes _____ No _____

If you answered **YES** to any of these questions please explain:

SPIRITUAL INFORMATION

Do you attend a local church? Yes _____ No _____

- If **YES**, which church? _____

Do you have the signed acknowledgment forms for our Statement of Faith and Handbook. Yes _____ No _____

Please attach any questions or comments:

FAMILY INFORMATION

Are you new to Bemidji? Yes _____ No _____

- If **YES**, where did you move from? _____

Do you have other children attending school elsewhere? Yes _____ No _____

- If **YES**, what school(s) _____

Would you like to set up a meeting with the Principal? Yes _____ No _____

How did you hear about us? News Paper _____ Facebook _____ Instagram _____ Radio _____ Website _____

Family/Friend _____ By Who: _____

Signature of Mother (or guardian) Date

Signature of Father (or guardian) Date

Thank you for applying to Heartland!
Please return this application along
with the fee of a \$125 per child to:

Heartland Christian Academy
9914 Heartland Circle NW
Bemidji, MN 56601