



TRINITAS
CLASSICAL ACADEMY

Enrollment Application

Thank you for your interest in enrolling at Trinitas Classical Academy. The following application will need to be completed along with the pastoral reference.

When downloaded on a PC, this application may be completed electronically by selecting the [T] “add text” icon (might need to add) in the top left toolbar and typing on the given answer lines. Please note that this is not a fillable PDF so you will need to move the cursor to the next line when you complete a space. You may otherwise print, fill out by hand, scan and upload to our website.



Family Information

Parent 1

I am this child's _____ (mother, father, fosterparent, guardian, etc.)

Name: _____ Cell Phone: _____

Email: _____

Employer: _____ Position: _____

Work Phone: _____

Parent 2

I am this child's _____ (mother, father, fosterparent, guardian, etc.)

Name: _____ Cell Phone: _____

Email: _____

Employer: _____ Position: _____

Work Phone: _____

Marital Status:

Married _____ Widow/Widower _____ Divorced _____ Separated _____

Divorced and Remarried _____ Single _____

Address: _____

(Please note if mother and father have different addresses)

Student Enrollment Information

Name: _____ DOB: _____ Grade: _____ Sex: _____

Name: _____ DOB: _____ Grade: _____ Sex: _____

Name: _____ DOB: _____ Grade: _____ Sex: _____

Names and ages of other children: _____

Faith Information

Name of church you presently attend: _____

Address of church: _____

Pastor's Name: _____ How long have you attended? _____

Are you a member? _____

Indicate that you have accepted Jesus Christ as your personal Savior and Lord:

Father: Yes _____ No _____ Mother: Yes _____ No _____ Student: Yes _____ No _____

Scholastic Information

Educational Background (list schools and years attended): _____

Use the categories below to tell us a little bit about your child or things that would be helpful for us to know:

ACADEMIC: _____

SPIRITUAL: _____

SOCIAL: _____

BEHAVIORAL: _____

OTHER: _____

Does this student have any special needs academically or otherwise? _____

Is your child on any medication? ___No ___ Yes, if so please describe: _____

Has your child received any special education testing or screening in regard to any learning difference, disability, impairment, behavior problems, etc? ___No___Yes, if so, please explain:

Has your child ever had an I.E.P (Individual Education Program)? ___No ___Yes

If there is an I.E.P. currently in use, please describe the program:

Has your child every been (check all that apply): If checked, please explain:

_____ Suspended, expelled, dismissed or asked to withdraw. _____

_____ Placed on academic probation. _____

_____ Referred to juvenile authorities. _____

_____ Denied admission to a school. _____

Has the student ever failed in school? _____

Has the student had any disciplinary difficulties? _____

Has the student ever been in trouble with the law? _____

Parent/Guardian #1

I am this child's _____

Do you pray for this child? YES___ NO___

If no, would you be willing to begin doing soon a regular basis? YES___ NO___

Do you have a personal time of regular Bible reading and prayer? YES___ NO___

If not, would you be willing to begin this now? YES___ NO___

Do you have devotional time with your family? YES___ NO___

If no, would you be willing to begin doing this now? YES___ NO___

Do you attend a regular Bible study? YES___ NO___

What interests and activities does your family share? _____

Do you select and monitor the music and television your child is exposed to? YES___ NO___

Will the school be able to reach you if necessary during a regular school day? YES___ NO___

Best phone number: _____

Guardian #1 signature: _____

Parent/Guardian #2

I am this child's _____

Do you pray for this child? YES___ NO___

If no, would you be willing to begin doing soon a regular basis? YES___ NO___

Do you have a personal time of regular Bible reading and prayer? YES___ NO___

If not, would you be willing to begin this now? YES___ NO___

Do you have devotional time with your family? YES___ NO___

If no, would you be willing to begin doing this now? YES___ NO___

Do you attend a regular Bible study? YES___ NO___

What interests and activities does your family share? _____

Do you select and monitor the music and television your child is exposed to? YES___ NO___

Will the school be able to reach you if necessary during a regular school day? YES___ NO___

Best phone number: _____

Guardian #2 signature: _____

Transportation and Additional Information

_____ Public School Bus (Hurricane Busing)

_____ We will be transporting to/from school

*Paternal Grandparents: _____

Address: _____

Email: _____

*Maternal Grandparents: _____

Address: _____

Email: _____

**There are times we will do mailings of newsletters or announcements and would like to include grandparents if possible.*

Thank you for taking the time to fill out the enrollment application.

- Enrollment is not complete until all required forms are submitted and the Trinitas Classical Academy Admissions Committee reviews them.
- Pending admission, the Admissions Committee will do a personal interview with the family.

Our Non-Discrimination Policy

Trinitas Classical Academy admits students of any race, color, and national or ethnic origin to all the rights, privileges, programs and activities generally made available to students at the school. TCA does not discriminate on the basis of race, color, or national or ethnic origin in the administration of its educational and admissions policies, scholarship programs or other school programs.