



Application for Enrollment

_____ 2017-2018 _____ 2018-2019

_____ **Berkeley Hills** _____ **Wexford** _____ **Mount Nebo**
(PreK 3 - 6th grade) (PreK 3 - 6th grade) (7th - 12th grade)

Return Application, Act 26 & Fee to:

\$100 per family application fee

Eden Christian Academy

206 Siebert Road

Pittsburgh, PA 15237

PH (412) 364-8055

FAX (412) 364-8330

www.EdenChristianAcademy.org

Staff
 New Family
 Sibling
 Previous

Student's Full Legal Name _____
 Last First Middle Preferred Name

Family/Student Birth Date _____ Age _____ Male Female Grade Entering _____

Family Information:

Student lives with: Both Parents Father Mother Guardian

Father/Guardian Full Name Mr. Rev. Dr. Other _____
 First Last Father's Preferred Name _____

Home Address _____
 City/State/Zip _____
 Phone (Home) _____ Phone (Cell) _____
 Preferred Email _____

Guardian Relationship _____
 Employer _____
 Title _____
 Phone (Business) _____

Mother/Guardian Full Name Mrs. Ms. Dr. Other _____
 First Last Mother's Preferred Name _____

Home Address (if different from above) _____
 City/State/Zip _____
 Phone (Home) _____ Phone (Cell) _____
 Preferred Email _____

Guardian Relationship _____
 Employer _____
 Title _____
 Phone (Business) _____

Family members who currently attend or have attended ECA: School District in which student lives:

Name _____ Grade _____ Year(s) _____
 Name _____ Grade _____ Year(s) _____

Preschool or Kindergarten: (Check one)	AM classes 8:30-11:30	PM classes 12:15-3:15
3-Year Old Preschool (Must be 3 yrs. old by Sept. 1)	T/TH _____ AM	_____ PM
Pre-K 4 (Must be 4 yrs. old by Sept. 1)	M/W/F _____ AM	_____ PM
Pre-K 4 Learning Through Literature Class (Must be enrolled in 3-day program)	T/TH _____ AM (Berkeley Hills <input type="checkbox"/> Wexford <input type="checkbox"/>)	
Kindergarten (Must be 5 yrs. old by Sept. 1)	M-F _____ AM	_____ PM _____ Full-day

Previous School Information:

Name _____
 Address _____
 Phone No. _____
 Fax No. _____

Last grade completed _____
 (Grades 7-12 include copy of transcripts)

Any grade repeated? Yes No
 If yes, which one? _____

Whom may we thank for referring you to Eden?: _____

Office Use Only:
 Date received _____ By _____ Ack. sent _____
 Date fee received _____ Amount _____ Check # _____ Cash
 CC: _____ FA _____ BHP _____ WP _____ MNH

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Church Information:

Church Name _____

Address _____

Phone _____ Pastor's Name _____

Pastoral Reference (if different from above)

Name	Church	Phone

New Families Only:

Please tell why you desire for your child to attend Eden Christian Academy:

Briefly state your testimony regarding your personal relationship to Jesus Christ:

(Father or Guardian)

(Mother or Guardian)

Biblical Morality Policy

Eden Christian Academy's Biblical role is to work in conjunction with the home to help students to think and act with Christ like character. Of necessity, this involves teaching what the Bible defines as the qualities or characteristics that exemplify a Christ-like life. Eden reserves the right, within its sole discretion, to refuse admission to an applicant or to discontinue enrollment of a student if the atmosphere within a particular home or family of a student, or the activities of the student himself or herself, are counter to or are in opposition to the Biblical lifestyle the school teaches. This includes, but is not limited to participating in sexual immorality, homosexual lifestyle, or bi-sexual activity; promoting such practices; or being unable to support the moral principals of the school. (See Leviticus 20:13; Romans 1:27; Ephesians 5:3).

** The following Act 26 Enrollment Affidavit must be submitted with your application.



**Eden Christian Academy
Safe Schools
Act 26 Enrollment Affidavit**

I/We, the undersigned parent, guardian or other person having control or charge of

_____, a child to be
(Student name)

enrolled at Eden Christian Academy, do hereby swear or affirm that the child **has/has not (circle one)** been previously suspended or expelled from any public or private school of this commonwealth or any other state for an act of offense involving weapons, alcohol or drugs, or for the willful infliction of injury to another person, or for any act of violence committed on school property.

I/We acknowledge that this statement shall be maintained as part of the child's disciplinary record.

I/We further acknowledge that the making of any false statement herein shall be a misdemeanor of the third degree.

I/We fully understand that any false statement herein would be a violation of the Pennsylvania Crimes Code, 18 Pa. C.S.A. 4903 and 4904, and punishable by a fine and/or imprisonment.

Parent/Guardian Signature

Date

SECTION 1 – Act 30 Notification – Reports of Adjudication

According to Act 30, Eden Christian Academy has the right to know if a child has been found delinquent by the court, through the Juvenile Probation Department. The Probation Department must provide to the school in which the child is enrolled:

- A. The name and address of the child
- B. The delinquent act or acts which the child was found to have committed
- C. A brief description of the act or acts which the child was found to have committed
- D. The disposition of the case

Has your child ever been found to be a delinquent in a court of law? Yes No

SECTION 2

Has your child ever been suspended and/or expelled from school? Yes No

If "Yes," please write the name of the school from which your child was suspended and/or expelled.

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SECTION 3

In an attempt to insure that all Eden Christian Academy students are receiving the most appropriate education, we need to know the following:

- Does your child currently have:
 - Yes No **IEP**
 - Yes No **504**
 - Yes No **Individualized Learning Plan**
 - Yes No **DART**
 - Yes No **Emotional Need**
 - Yes No **Health or Medical**
 - Yes No **Other**

If "Yes", please explain: _____

If "Yes," please include a copy of your child's plan.

- Are there any unusual factors in his/her life which may require special consideration? (i.e. absence of father or mother, in-laws, or grandparents in home, etc.) If so, please explain. _____

- Has your child received special accommodations or modifications to the curriculum or grading? Yes No

If "Yes," whom may we contact about information concerning the modifications?

(Contact) _____ (Phone #) _____

By signing this application you agree that the school has full discretion in the discipline and grade placement of your child, that you agree to abide by the policies and procedures of Eden Christian Academy, and that the school reserves the right to dismiss any child who, by behavior and attitude, hinders the educational process of the school or who does not maintain the academic standards of the school. You hereby authorize Eden Christian Academy to verify your past tuition payment history with any school or preschool your child has previously attended. You also agree to support the work of the school in prayer. *(Both signatures are required, if applicable.)*

Father/Guardian

Date

Mother/Guardian

Date

Office Use Only:

I have reviewed all information needed and found that this student may enroll at Eden Christian Academy.

Signature of ECA Building Principal

Date