



Application for Enrollment

_____ 2009-2010 _____ 2010-2011

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

Return Application, Act 26 & Fee* to:

*See Tuition & Fee Schedule

Eden Christian Academy

206 Siebert Road

Pittsburgh, PA 15237

PH (412) 364-8055

FAX (412) 364-8330

www.EdenChristianAcademy.org

Staff

New Family Student's Name _____

Sibling Last First Middle Preferred Name

Previous

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 _____ Father's Preferred Name _____

Home Address _____ First Last Guardian Relationship _____

City/State/Zip _____ Employer _____

Phone (Home) _____ Phone (Cell) _____ Title _____

Preferred Email _____ Phone (Business) _____

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

Home Address (if different from above) _____ First Last Guardian Relationship _____

City/State/Zip _____ Employer _____

Phone (Home) _____ Phone (Cell) _____ Title _____

Preferred Email _____ 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
Pre-K 3 (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	
Kindergarten (Must be 5 yrs. old by Sept. 1)	M-F _____ Full-day _____ AM _____ PM	(PM class available at BH campus ONLY)

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? _____

Office Use Only:

Date received _____ By _____ Ack. sent _____

Date fee received _____ Amount _____ Check # _____ Cash

CC: _____ FA _____ BHP _____ WP _____ MNH

over ⇨

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)

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 for 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

Mother/Guardian

Eden Christian Academy admits students of any race, sex, ethnic, or national origin.

** 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 _____,
(Student name)

a child to be 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 signature

(over)

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. _____

SECTION 3

In an attempt to insure that all Eden Christian Academy students are receiving the most appropriate education, we need to know if your child is a special needs student.

Does your child currently have an I. E. P. (Individual Education Plan)? _____ Yes _____ No

If “Yes,” whom can we contact about information concerning an I. E. P.?

Is your child enrolled in a DART program? _____ Yes _____ No

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

If “Yes,” whom can we contact about information concerning the modifications?

Signature of Parent/Guardian

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

Signature of Building Principal