

References

List the names and addresses of two individuals, other than relatives who will recommend you. Give reference forms to these individuals. They should return them to Penn View Christian Academy promptly.

Name _____

Address _____

Phone (_____) _____ E-mail _____

Name _____

Address _____

Phone (_____) _____ E-mail _____

Health Information

Do you have any physical limitations which might require some adjustment to a normal student activity schedule?

Yes / No If so, please describe. _____

Are you presently taking any medication prescribed by a physician? Yes / No If so, give medication and frequency.

Have you been hospitalized within the past year? Yes / No If so, give dates _____
and reasons for hospitalization _____

Financial Responsibility

How do you plan to care for your financial obligations to Penn View?

Payment in full upon registration _____ Installment payment plan _____

Give a complete name and address of person to whom the statement should be sent.

_____ Name _____ Address _____

Phone (_____) _____ Relationship _____

I hereby make application for admission to Penn View Christian Academy and enclose the \$20.00 Application fee with the understanding that the fee will be retained to cover the cost of processing my Application. I understand that my Application will be processed, and that appropriate information will be submitted to the Admissions Committee.

If the applicant leaves before the end of the term, I may still owe some fee's for the term. In the event of said termination, I will not expect my child's transcript or other school records to be released until full payment is made. The agreement carries over from year to year. If my child should be accepted, I will admonish him to give cheerful and ready obedience to and cooperation with the spirit and regulations of the school.

I hereby declare that I have answered all of the above questions truthfully and fully, further, I give Penn View Christian Academy my approval to gather data from all schools which my child has attended, together with other records and references that Penn View believes to be necessary for the processing of this Application.

As parent or legal guardian of the above applicant, I agree to cooperate with Penn View Christian Academy in the enforcement of the rules and regulations of the institution and to meet the terms of the agreement about expenses, business details, etc., as outlined by Penn View Christian Academy.

I give permission for my child to take part in all school activities and school-sponsored trips away from the school premises. I absolve the school from all liability in the event my child is injured at school or during any school activity. I agree with the school's effort to train my child in the Bible and will encourage my child in this and in all other phases of instruction.

I pledge not to interfere with the school in its efforts to discipline my child in accord with the school's published standards.

_____ Date _____ SIGNATURE OF PARENT