

VICTORY CHRISTIAN ACADEMY
P.O. BOX 1009
MILLBROOK, ALABAMA 36054
334-285-5082
APPLICATION FOR ADMISSION (K4-K5)

School Year 20 ____ to 20 ____

(Office use) DATE RECEIVED FOR ADMISSION _____

Student's Name _____ Called By Name _____
(First) (Middle) (Last)

Grade Entering _____ Age _____ Birth date ____/____/____ Birthplace _____ Sex _____
(Month/Day/Year)

Home Address: _____
Street or P.O. Box City State Zip Code Phone #

Billing Address: Mr. or Mrs. _____
(circle one) Name Relation to Student

Street or P.O. Box City State Zip Code

Father's Name _____ SS# _____ Employer _____

Position _____ Work Phone Number _____ Cell Number _____

Mother's Name _____ SS# _____ Employer _____

Position _____ Work Phone Number _____ Cell Number _____

Parent's Email Addresses _____

Marital Status: Married _____ Separated _____ Divorced _____ Widow(er) _____

Church Attended _____ Pastor _____

How did you hear about Victory? _____

Family Physician _____ Phone No. _____

Does the student have any physical limitations or allergies? No ___ Yes ___ Explain _____

Does the student take any medications on a regular basis, including behavior modification within the last year? No ___ Yes ___

Explain _____

Has the student been diagnosed to have ADD, ADHD? _____ If yes, please explain _____

Is the student currently under the care of a psychiatrist, psychologist, or counselor? _____ If yes, for treatment or correction
of what? _____

SCHOLASTIC INFORMATION: We are concerned that students attending Victory obtain the best education possible. Please answer the following questions honestly so that we will be able to determine if and how well we will be able to be an effective ministry to your student. *A negative answer does not mean your child will not be accepted.*

Name of Last School Attended _____

Mailing Address of School Last Attended _____
Street City/State Zip Code

Does the student follow instructions given orally? _____

Does the student show anger outwardly by throwing things, hitting others, hitting other objects or other outbursts of temper?

Has the student been diagnosed to have any learning disabilities? ____ If yes, what? _____

How does the student respond to correction for behavior problems? _____

Briefly state why you would like for your student to attend Victory Christian Academy? _____

How do you handle disciplinary correction with your student? _____

Does the student accomplish their homework effectively & completely? _____

My K4/ K5 student can independently use the restroom including clean up, and is not using diapers or pull ups.

My K4/K5 student can inform the teacher if a restroom break is required.

Signature of biological Father _____ Date _____

Signature of biological Mother _____ Date _____

THE STUDENT MAY NOT ATTEND VCA UNTIL WE HAVE BOTH BIOLOGICAL PARENTS SIGNATURES AND LEGAL DOCUMENTATION STATING OTHERWISE. Please contact VCA if both signatures cannot be provided.

-----OFFICE USE ONLY-----

Interviewed on _____ at _____ Student is accepted / denied enrollment on _____
(date) (time) (circle one) (date)

When/How Student Notified _____ In person / Acceptance Letter / Phone Call
(date) (circle one)

Student may begin class on _____
Transfer of Records Requested On _____ Tuition amount \$ _____

COMMENTS: _____
