

# Application

PO Box 1895, Goldsboro, NC 27533-1895  
Telephone (919)735-9176 Fax (919)735-9936

**Pathway Christian Academy, Inc.**

*Pathway Christian Academy admits students of any sex, race, color, national, or ethnic origin; to all rights, privileges, programs, and activities generally accorded or made available to students at the school. We shall not discriminate in our policies and/or programs.*

**Please submit photo.**

## **STUDENT PERSONAL INFORMATION:**

Please give LEGAL name of student:

Last Name: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_ Nick Name: \_\_\_\_\_  
Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Birth Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Age: \_\_\_\_\_ Sex (M/F) \_\_\_\_\_  
Church Affiliation: \_\_\_\_\_ Church Member (Y/N) \_\_\_\_\_  
Birthplace: City: \_\_\_\_\_ County: \_\_\_\_\_ State: \_\_\_\_\_  
Race: \_\_\_\_\_ Child is # \_\_\_\_\_ of \_\_\_\_\_ children. Grade for which application is being made: \_\_\_\_\_

## **FAMILY INFORMATION:**

Please enter the name of the person responsible for the student's bill: \_\_\_\_\_

### **PARENT/GUARDIAN #1**

Circle: Mr./Mrs./Miss. Last Name: \_\_\_\_\_ First: \_\_\_\_\_ Middle Initial: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Home Phone: ( ) \_\_\_\_\_ Cellular Phone: ( ) \_\_\_\_\_ Work Phone: ( ) \_\_\_\_\_  
Pager: ( ) \_\_\_\_\_ Place of Employment \_\_\_\_\_  
Occupation: \_\_\_\_\_ Email: \_\_\_\_\_  
Relationship to Student: \_\_\_\_\_ Lives With Student (Y/N) \_\_\_\_\_  
Marital Status: Single \_\_\_\_\_ Married \_\_\_\_\_ Widow(er) \_\_\_\_\_ Separated \_\_\_\_\_ Divorced \_\_\_\_\_ Remarried \_\_\_\_\_

### **PARENT/GUARDIAN #2**

Circle: Mr./Mrs./Miss. Last Name: \_\_\_\_\_ First: \_\_\_\_\_ Middle Initial: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Home Phone: ( ) \_\_\_\_\_ Cellular Phone: ( ) \_\_\_\_\_ Work Phone: ( ) \_\_\_\_\_  
Pager: ( ) \_\_\_\_\_ Place of Employment \_\_\_\_\_  
Occupation: \_\_\_\_\_ Email: \_\_\_\_\_  
Relationship to Student: \_\_\_\_\_ Lives With Student (Y/N) \_\_\_\_\_  
Marital Status: Single \_\_\_\_\_ Married \_\_\_\_\_ Widow(er) \_\_\_\_\_ Separated \_\_\_\_\_ Divorced \_\_\_\_\_ Remarried \_\_\_\_\_

**EXCLUSION:** If one of the individuals who is listed as parent or guardian *should not* be contacted for some reason, please make a note of that here by giving the name and a brief explanation:

\_\_\_\_\_  
\_\_\_\_\_

## **OTHER CONTACTS:**

**NOTE:** *In the event of an emergency, parents or guardians will be contacted first unless an exclusion has been made. Please list alternatives below in case a parent/guardian cannot be reached.*

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone ( ) \_\_\_\_\_  
Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone ( ) \_\_\_\_\_

**MEDICAL INFORMATION:**

**NOTE:** Immunization records must be on file with the academy office before beginning classes:

Family Doctor: \_\_\_\_\_ Phone (    ) \_\_\_\_\_

Allergies: \_\_\_\_\_

Medications: \_\_\_\_\_

Comments: \_\_\_\_\_

**ACTIVITIES/SPORTS/INTERESTS:**

Activities/Sports: \_\_\_\_\_

Clubs/Hobbies: \_\_\_\_\_

Interests: (Singing, Instrumentalist, Academics, etc.) \_\_\_\_\_

**GENERAL INFORMATION:**

Is the *FATHER/Male Guardian* a Christian? (Y/N) \_\_\_\_\_ How frequently does he attend church? \_\_\_\_\_

Name of Church: \_\_\_\_\_ Pastor: \_\_\_\_\_

Does the father use tobacco, alcohol, or drugs? (Y/N) \_\_\_\_\_ If yes, please explain \_\_\_\_\_

Is the *MOTHER/Female Guardian* a Christian? (Y/N) \_\_\_\_\_ How frequently does she attend church? \_\_\_\_\_

Name of Church: \_\_\_\_\_ Pastor: \_\_\_\_\_

Does the mother use tobacco, alcohol, or drugs? (Y/N) \_\_\_\_\_ If yes, please explain \_\_\_\_\_

Is the *STUDENT* a Christian? (Y/N) \_\_\_\_\_ How frequently does he/she attend church? \_\_\_\_\_

Name of Church: \_\_\_\_\_ Pastor: \_\_\_\_\_

Does the student use tobacco, alcohol, or drugs? (Y/N) \_\_\_\_\_ If yes, please explain \_\_\_\_\_

Why have you chosen to enroll your child at Pathway? \_\_\_\_\_

How did you hear about Pathway? \_\_\_\_\_

Do both parents/guardians support the decision to send this child to Pathway? (Y/N) \_\_\_\_\_

If no, please explain why? \_\_\_\_\_

List the names of any brothers or sisters living in the home:

Name \_\_\_\_\_ Age \_\_\_\_\_ Attends What School? \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ Attends What School? \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ Attends What School? \_\_\_\_\_

Name of school(s) attended during the previous three years:

Name of school: \_\_\_\_\_ City \_\_\_\_\_

Name of school: \_\_\_\_\_ City \_\_\_\_\_

Name of school: \_\_\_\_\_ City \_\_\_\_\_

Has the student ever repeated a grade? (Y/N) \_\_\_\_\_ If so, which grade or grades? \_\_\_\_\_

Give reason(s) for repeating; \_\_\_\_\_

Has the applicant ever been expelled, suspended, or been involved in frequent disciplinary action? (Y/N) \_\_\_\_\_

If yes, please explain in detail: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Does the applicant have any documented learning disability or has a previous school indicated a concern regarding this possibility? (Y/N)\_\_\_\_\_ if so, please explain \_\_\_\_\_

Is the student currently receiving special services in school? (Y/N)\_\_\_\_\_ If so, please explain \_\_\_\_\_

List any unusual factors in the applicant's life that may have bearing on his/her discipline or academic progress (absence, sickness, or death of a parent, relatives in the home, accidents, etc.): \_\_\_\_\_

**SPIRITUAL LIFE AND CHARACTER:**

What spiritual training is provided in the home? \_\_\_\_\_

As a parent/guardian, what are your goals for this child? \_\_\_\_\_

Describe your child's participation in Bible study and worship during the average week: \_\_\_\_\_

How would you describe your child's Bible knowledge on a scale of 1 (*poor*) to 10 (*excellent*)? \_\_\_\_\_

Why have you chosen to enroll your child in a private **Christian** school rather than a government (*public*) school or secular private school? \_\_\_\_\_

What type of music does your child regularly listen? \_\_\_\_\_

Is there any type of music your child is forbidden to listen? \_\_\_\_\_

What type of movies does your child regularly watch? \_\_\_\_\_

Is there any type of movie your child is forbidden to watch? \_\_\_\_\_

If your child should be disciplined at school for an infraction of the rules, will it be your policy to likewise administer some form of discipline at home? (Y/N) \_\_\_\_\_ If no, please explain \_\_\_\_\_

Please share any additional information that you feel would be pertinent to the consideration of this application.

**STUDENTS APPLYING FOR GRADES 4-12 ONLY:**

Does the student personally wish to attend Pathway. (Y/N)\_\_\_\_\_ If no, please explain \_\_\_\_\_

Does the student have a personal web page? (Y/N)\_\_\_\_\_ If yes, give web address \_\_\_\_\_

Security code or password \_\_\_\_\_ Student's E-mail address \_\_\_\_\_

Does the student have a cellular phone (*not allowed at school*)? (Y/N)\_\_\_\_\_ If yes, give number ( ) \_\_\_\_\_

Has the student ever been responsible for the conception, birth, or abortion of a child? (Y/N) \_\_\_\_\_

Has the student ever been under the supervision of a parole officer or under the custody of the court? (Y/N) \_\_\_\_\_

Has the student ever had a police record or been under investigation by any law enforcement agency? (Y/N) \_\_\_\_\_

If yes to any of the above, please explain in full detail: \_\_\_\_\_

**On a separate sheet of paper, the student should write a short personal testimony. If the student professes to be a Christian, he should include details of his salvation experience. If the student does not profess faith in Christ, then he should indicate upon what other moral foundation he will draw to maintain the character to adhere to the Pathway environment. All applicants should include a statement expressing their personal desire to attend Pathway. Students also need to sign the form on the final page in regards to social media.**

**PARENT'S DRESS CODE:**

We appreciate all that our parents do to help us at the academy. We do have a request. We would like to ask our parents to abide by a few modesty standards.

*If you are coming inside the academy, please adhere to the following basic requests.*

- 1. Men, please wear shirts.
- 2. Ladies, please be sure **no** cleavage is visible. No halter or spaghetti straps.
- 3. We also request that **no stretchy or clingy** material be worn.
- 4. **No leggings unless covered by a long shirt or tunic top.**
- 5. Shorts should be to the end of the finger tips.
- 6. Please wear shoes.
- 7. All designs and writing on your attire should be appropriate for a church atmosphere.

*If you need to pick up your child early, and you do not wish to change clothes, please call the academy and we will be glad to bring your child to the front for you.*

***I will honor the dress code guidelines for parents/guardians:***

Father/Guardian Signature: \_\_\_\_\_

Mother/Guardian Signature: \_\_\_\_\_

**FINAL AUTHORIZATION:**

As this independent Christian organization does not accept, nor desires to accept, any government funding, attendance at Pathway Christian Academy remains a privilege and not a right. If a parent or student does not agree with the purpose, policy, or program of this institution, the student will not be admitted or allowed to retain his privilege of attendance. However, this institution does not discriminate on the basis of sex, race, color, national or ethnic origin.

Your signature confirms the accuracy of the information contained in this application, *and your understanding and acceptance of our rules, guidelines and requests.* Providing the academy with false or misleading information may disqualify admission or cause a termination in enrollment. The "Statement of Cooperation" must also be signed before the application can be considered for processing.

**Your signature also confirms that you have read the handbook. Pages 28-30 need to be submitted with this application with the appropriate signatures.**

*Signatures of both parents/guardians are preferred, one will be accepted.*

Father/Guardian Signature: \_\_\_\_\_

Mother/Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_



**Students at Pathway are required to maintain a certain standard to attend Pathway Christian Academy. Our heart's desire is that our students will have these values on the inside as well as the outside.**

Please have all students in grades 4-12 read and sign the following pledges:

**CODE OF HONOR:** Our goal is that when each student graduates he will have this code instilled in his heart. This is something we strive for, yet realize none of us have arrived. The pledge reads as follows:

*A Pathway Christian Academy student is honorable in conduct, honest in word and deed, dutiful in study and service, and respectful of the rights of others. Through education and maturity, the student rises to self-government.*

I *understand* if I do not follow the student ethics listed in *The Trailblazer* in any way at Pathway Christian Academy, I will be given the prescribed discipline. I will be disciplined, and my teacher is going to ask for a conference with my parents. I understand that areas may arise not covered in the manual and will be at the administrator's discretion. I realize Pathway has the right to dismiss any student whose conduct is detrimental to the academy, my community, or to other students.

Student's Signature \_\_\_\_\_

Parent's Signature \_\_\_\_\_

**SOCIAL MEDIA COMMITMENT FOR GRADES 4-12:**

I *understand* that all social media, web pages, and chat applications are to adhere to Pathway Christian Academy standards. I understand that if I am not allowed to use the language or say the comments at school, I am not allowed to post them to any internet sites. I also understand that the pictures shared must reflect the standards of decency set forth in our rules and guidelines. Pictures of myself and others must adhere to the academy's modesty standards.

I understand that if I am found to have a website/social media presence that does not follow the Pathway Christian Academy standard of conduct or have posted material on my site not consistent with the academy's moral and ethical standards, disciplinary action, up to and including expulsion, may be administered.

Student's Signature \_\_\_\_\_

Parent's Signature \_\_\_\_\_

**STUDENT SAFETY**

I *understand* that Pathway Christian Academy attempts to minister to all students and the administration and staff wishes to keep all students safe. I also understand that Pathway Christian Academy is private property. Therefore, I, along with my personal belongings, are subject to search. I am also subject to drug tests at anytime before or during enrollment without notice.

Student's Signature \_\_\_\_\_

Parent's Signature \_\_\_\_\_





## Your Statement of Cooperation

In making application for my child, it is my desire to have him attend Pathway Christian Academy for the current academic year. *It is also my understanding that the academy makes no refunds on registration fees.* I also give my permission for my child to take part in all school activities, including school sponsored activities away from the campus.

I agree and hereby release and discharge any teacher, employee, or other person engaged in school sponsored programs from all claims, present and future, known or unknown, in any matter that should arise. I further understand and agree that Pathway Christian Academy and its agents shall be held harmless from any and all liabilities, from personal injury or illness, and from any loss of property of my child.

In case of accident or illness, I hereby give Pathway Christian Academy and its agents permission to obtain medical treatment for my child in my absence should the need occur.

Should legal action, for any reason, be taken and the academy or its agent not be found at fault, *I agree to pay any attorney fees, court fees, damages, or other cost that Pathway Christian Academy or its agent should incur to defend itself against such action.*

**I agree to promptly pay all fees and tuition payments**, and I understand that payments are due on the first and are considered "past-due" on the tenth. *A minimum late fee of \$15.00 will be charged to all unpaid accounts on the first business day following the tenth day of the month. A finance charge of 1.5% will be assessed to all past due accounts, subject to the \$15.00 minimum.* I understand that should my payment become 45 days late, I will be asked to withdraw my child unless special arrangements are made. The registration fee must be paid in order to assure my child a place in the class.

*I understand that if my child withdraws from the academy for any reason, records will not be released if my account is not current. Also, I accept responsibility for the tuition payment based on the daily tuition rate and a \$200.00 separation charge. Annual Tuition amounts will not be reduced before September 15th or after April 15th.*

Date \_\_\_\_\_

Father's Signature \_\_\_\_\_

Mother's Signature \_\_\_\_\_