

Partnering with parents to educate students with a biblical worldview to prepare them to live purposefully in the service of God and mankind

25 Milford Circle, Wentzville, Missouri, 63385

Student Application for 2021-2022

Application Date: _____

Please complete and mail to our school office along with the required documents (See end of application)

Please check the class	ses for which you	are applying:

Pre-Kindergarten				
Student's name	(First)	(Midd	le)	(Last)
Student's "go by" name: (if di	fferent)			
Age Date	Of Birth//	Gende	er(N	1ale/Female)
Street Address:				
City	State	Zip		
Home Phone ()				
Student lives with: (circle all t	hat apply)			
Both Father & Mother Fath	ner Mother	Stepfather	Stepmother	Other
If "other", please explain				
Please check if either applies	Father is deceased	dMothe	er is deceased	

Father's name (custodial parent):		(First)			(Last)	
Marital status						
Email address		Cell Phone	()_			
Name of church where you attend						
Active at church? (No/Yes) If "Yes"	, please expl	ain:				
Average number of hours worked weekly	outside of ho	ome	_			
Occupation		Business Phone	e()			
Business name						
Last grade of formal education:						
If a graduate of college, list major(s):						
Mother's name (custodial parent):		(First)			(Last)	
Marital status						
Email address		Cell Phone	()_			
Name of church where you attend						
Active at church? (No/Yes) If "Yes"	, please expl	ain:				
Average number of hours worked weekly						
Occupation		Business Phone	e()			
Business name						
Last grade of formal education:						
If a graduate of college, list major(s):						
Nearest relative (in addition to the above	e parents, in	case of emergend	cy)			
Name		Relation	to stud	lent		
Street address						
City Stat	.e	_ Zip				
Home Phone ()						
Please list all children living at home:						
Name	Gender	Date Of Birth	Age	Grade	Enrolling in TCA?	
(First name only, unless last name is different)	(M/F)	MM/DD/YYYY			(Yes or No)	
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Educational Information:

1. Please describe the type of instruction that your child has previously received (i.e. home, private, public). Also include the length of instruction (in years) for each type and the name of the last school attended.

2. If you homeschooled, please list the curriculum you have used:

3. In general, how woul	ld you rate your chi	d's academic ability?		
Above Average	Average	Slightly Below Average	Below Averag	e
In which subjects does In which subjects does	he/she excel? he/she struggle?			
4. In general, how woul	ld you rate your chi	d's level of interest in learning	?	
Above Average	Average	Slightly Below Average	Below Averag	je
What is his/her favorite	e subject?			
5. Please circle "yes" or	"no": Has your chi	ld attended with any of the foll	owing:	
 Speech/Language 	e Therapy		Yes	No
 Vision Therapy 			Yes	Nc
 Occupational The 	Occupational Therapy			No
 Physical Therapy 	Physical Therapy			No
Early Childhood Special Education/First Steps			Yes	No
 Individual/Group Family Counseling 			Yes	No
Diagnosed with				
 a hearing or vision impairment 			Yes	No
 Treated/diagnosed with ADD or ADHD 			Yes	No
 Attended academic tutoring or remediation of any kind 			Yes	No
	s, accommodations, c			
a previous school	l or cooperative envir	onment	Yes	Nc
6. Does the student strug	gle with			
	Reading fluency at grade level			No
e 1	Reading Comprehension			No
-	Memorizing math facts			No
-	Handwriting/Fine Motor Skills			No
Gross Motor Skill			Yes	No
 Impulsivity or att 			Yes	No
 Sensory Processin 	ng		Yes Yes	No
 Social anxiety 	Social anxiety			No

If "Yes" to any of these questions, please provide additional information. Use a separate sheet if needed.

(Contact Karen Wall if you have any academic questions related to this questionnaire:kwall @tcamo.com. To ensure your child's success at TCA, it is vital that you communicate academic and emotional struggles - past and present - with your child's teacher.)

7. What virtues would	you most like t	to see developed	in your student?
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8. Are there any known medical, psychological, mental, emotional, or learning differences that could have any impact on the applicant's ability to flourish in a rigorous academic environment?
9. Does your student enjoy working at home to complete their school work? If no, please explain
Family Questionnaire: 1. Have both parents attended an information session?
2. Are you prepared to oversee the off-campus component of homeschooling (including math, language arts, etc.)?
3. Who will be the main instructor for the student off-campus?
4. Is either parent, step-parent, or guardian opposed to a Christian education? If so, please explain
5. How do you promote spiritual values in the home? Describe the ways in which you integrate your faith into your family's life.
6. Why did you choose the University-Model to educate your child?
 Besides the education of your child, how can we, as a school, serve you?

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9. How can you as a family/mother/father serve us as a school?

10. How did you find out about our school? _____

Both Parents: Please check one of the following:

Parent 1: Name:	Parent 2: Name:
I personally believe in the entirety of the Trinity	I personally believe in the entirety of the Trinity
Christian Academy Statement of Faith.	Christian Academy Statement of Faith.
I personally believe in the Trinity Christian	I personally believe in the Trinity Christian
Academy Statement of Faith, except in the following	Academy Statement of Faith, except in the following
areas. If checking this line, please attach a full explanation	areas. If checking this line, please attach a full explanation
of your reasons for difference and/or disagreement. I will	of your reasons for difference and/or disagreement. I will
not express my believes in a way that will cause disunity.	not express my believes in a way that will cause disunity.
Signature:	Signature:
Date:	Date:

Please attach the following documents with your application:

- Copy of Immunization records, or the medical exemption letter
- Copy of birth certificate
- Recent family picture
- \$75 application fee, most of which is used for our membership to UMSI
- Letter of recommendation from your pastor stating your (preferably both parents, but at least one) involvement at church and length of service at the church.

Non-Discriminatory Policy for Students and Employees

Trinity Christian Academy of Missouri, Inc. admits students of any race, color, national, and ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, national, and ethnic origin in administration of its educational policies, admissions policies, scholarship and loan programs, and athletic and other school-administered programs.