

# Pocono Adventist Christian School

2001 W Main Street Stroudsburg, PA 18360 570-421-5577

### STUDENT INFORMATION

This application and contract is for the 2017—2018 school year.

Student's Legal Name:			
C	Last	First	Middle Initial
Birth date:	Current Age:	Grade	Sex: M F
Address:			
Home Phone Number:	(	Grade applying for: _	
School last attended (na	me and address)		
Does the applicant have	a current IEP, 504 Plan	n, or Formal Plan?	Yes No If "yes",
explain	th date: Current Age: Grade Sex: M F  dress:  me Phone Number: Grade applying for:  nool last attended (name and address)  es the applicant have a current IEP, 504 Plan, or Formal Plan? Yes No If "yes",  plain  od allergies or other medical or drug related concerns:  Family Information  ent/Guardian Marital Status (please circle): Married Separated Divorced Remarried Spouse Deceased Single  sides with (please circle): Both Parents Mother Father Stepfather Stepmother Grandmother Grandfather Other  ease of divorce or separation, please complete the following questions:		
Food allergies or other	medical or drug related	concerns:	
Current Medications:			
	<u>Fa</u>	mily Information	
Parent/Guardian Marita		_	
Resides with (please circle			er Stepmother
In case of divorce or sep	paration, please complet	te the following quest	ions:
Legal Custody: Joint	Mother Father Gua	ardian Other	
School Notifications sho	ould be sent to: Mother	Father Guardian	Other
Financial Responsibilit	y will be assumed by: _		

Father's Name:	Occupation:				
Home Phone #:	Work #:	Cellular #:			
Home Address:	Email address:				
Mother's Name:	Occupation:				
Home Phone #:	Work #:	Cellular #:			
Home Address:		Email address:			
Step Mother's Name:		Phone #:			
Step Father's Name:		Phone #:			
Other Children in the fan	nily currently enrolled at I	Pocono Adventist Christian School:			
1Name	2 Name	3Name			
Please provide the name	of a friend who shares sin	milar educational values that you would refer to Poo	cono		
Adventist Christian Scho	ol: Name	·			
Telephone number					
Please list individuals when unable to do so:	no are permitted to pick up	p your child in the event that the parents or guardia	ns are		
1		DL#			
2		DL#			
Church Attending:		Address:			

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#### **Re-enrollment Process**

- 1. Complete and return the Re-Enrollment Application forms.
- 2. Submit the non-refundable \$135 registration fee by May 31<sup>st</sup>. If paid after May 31<sup>st</sup>, the nonrefundable registration fee is \$210. Failure to enroll by June 15<sup>th</sup> revokes reenrollment status, thus you must follow the new student application process.

### Please note the following:

- First preference is given to returning students.
- Currently enrolled students who do not enroll by June 15<sup>th</sup> are not guaranteed acceptance for the upcoming school year.
- No student may re-enroll unless their account is current.
- Remaining spaces will be filled during open enrollment.