

Applying for Grade _____ For School Year 2026-2027 Date Application Fee Received _____

APPLICATION FOR ENROLLMENT

Old Bethel Christian Academy

P.O. Box 95

Clarks, Louisiana 71415

(318) 649-0281

STUDENT DATA

Name: _____ SSN: _____
(Last) (First) (Middle)

Street Address: _____ City: _____ State: _____ Zip: _____

Male Female Race (Optional): _____ Date of Birth: _____ Telephone: (____) _____
(Month/Day/Year)

Church Affiliation (Optional): _____ Congregation: _____

In what church activities do you engage? _____

Extracurricular interests or hobbies? _____

School(s) attended: _____ (Name) _____ (Complete Address)
_____ (Name) _____ (Complete Address)
_____ (Name) _____ (Complete Address)

Attended OBCA in past? Yes No When? _____ Tested for entrance to OBCA? Yes No When? _____

Referred to Old Bethel Christian Academy by: _____

FAMILY DATA

DATA	FATHER	MOTHER
Full Name		
Address (If different)		
Employer		
Cell Phone		
Business Phone		
EMail		
2 nd EMail		

FAMILY DATA CONTINUED

List other children in family:

_____	_____
Name	Age
_____	_____
Name	Age

If not living with parents give the following information:

Name _____ Legal Relationship _____

Address _____

Education _____ Employer _____

Occupation _____ Business Phone () _____

Church Affiliation _____ Congregation _____

HEALTH DATA

1. Name and explain any health condition(s), past or present, which need to be brought to the school's attention to safeguard this applicant at school (eg. diabetes, seizures, asthma, emotional disorders, educational challenges, etc.) or which would restrict physical activity levels: _____

2. Is the applicant taking any prescription medication(s)? Yes No Specify _____
3. Has the applicant been tested for any of the following (please check)?
_____ Speech/Language _____ Attention Deficit Disorder
_____ Learning Disabilities _____ Attention Deficit Hyperactivity Disorder
_____ Emotional Issues (which affect learning) _____ Other _____
- If one or more items are checked, please provide the school with a copy of scores and recommendations from the evaluator(s).
4. Doctor's Name _____ Telephone () _____

CERTIFICATION

Old Bethel Christian Academy was founded on *Christian principles* and is operated by Christian staff members. We understand that all students will participate in **daily Bible study and weekly chapel assemblies**. We agree to support and follow **all rules and regulations** of the school and understand that failure to do so will result in disciplinary action (which may include suspension, expulsion, or corporal punishment). Furthermore, we understand that all students new to OBCA are accepted on **academic and behavioral probation** for a period of one calendar year. By our signatures hereon, we certify that we understand these policies and that all information provided on this application is true and correct to the best of our knowledge.

Parent's Signature _____ Date _____

Student's Signature _____ Date _____

Old Bethel Christian Academy does not discriminate on the basis of race, color, national or ethnic origin regarding its policies, educational offerings, athletic programs, or other school-sponsored activities.

STUDENT BACKGROUND STATEMENT

As a part of the enrollment process at Old Bethel Christian Academy, each student must complete this form. It must be signed by the applicant and a parent/guardian. This information will remain confidential.

Answer YES or NO to each question. Please explain any YES answer.

1. Have you ever been suspended or expelled from any school or assigned to an alternative learning center?

2. Have you been declared ineligible to re-enroll in the school from which you are transferring?

3. Have you ever been in consultation with a counselor, diagnostician, or doctor concerning emotional or behavioral problems?

4. Have you ever been charged with the possession or use of illegal drugs or controlled substances?

5. Have you ever been involved in gang, satanic, or cult-related activities?

6. Have you ever been accused of or involved in the illegal possession of a dangerous weapon?

7. Have you ever been arrested or convicted by any civil authorities in juvenile courts?

We agree to the immediate dismissal of the applicant named above from Old Bethel Christian Academy for any misstatement or omission of information on this form.

Student

Parent/Guardian

Date

OBCA Records Checklist

- Application for Enrollment
- Copy of Birth Certificate
- Copy of Social Security Card
- Copy of current Immunization Record
- Student Handbook