*Dear Prospective Parent,*

I appreciate your interest in Westside Baptist Academy! Enclosed you will find a full packet of information giving you important information about our Academy and the enrollment process.

Our mission is to partner with parents by providing Biblical instruction, a Christ-centered environment, and excellent academics to every student. Our prayer is that each child will take a step forward for Christ in the coming school year. I look forward to answering any additional questions that you may have.

I pray that, if it is the Lord’s will, you and your student will join the WBA family this school year!

*In Christ,*



Mr. James Collard

Principal

*Jude 22*

**PURPOSE AND HISTORY**

Thank you for your interest in Westside Baptist Academy. Our school was founded as a ministry of Westside Baptist Church in 2007. Our main **purpose** is *to* *help Christian parents train their children by providing quality academics and consistent character training in a supportive environment*. Westside Baptist Academy is a member of the American Association of Christian Schools and the Texas Organization of Christian Schools.

**ADMISSIONS POLICY & PROCEDURE**

1. ***Application*** *–* An application form must be submitted but does not ensure admission.
2. ***Interview*** *–* An appointment for an interview is required for the parent or legal guardian and the student applying. Documents required at the time of the interview will be a **1.)** **completed application, 2.) pastoral recommendation, 3.) the student’s latest report card, 4.) latest achievement tests, 5.) an up-to-date shot record, and 6.) student’s written salvation testimony (testimony required each year).**
3. ***Registration*** *–* If, after the interview, the parents or legal guardian want to continue with the enrollment process, the application fee will be given to the Academy Office. The application will not be processed until the application fee is paid.
4. ***Parental Consent Form –*** (Parents I and II Agreement Forms) Parents will sign a Parent I Agreement Form indicating their willingness to cooperate with the school’s policies regarding their child’s education. The Parent II Agreement Form is filled out by the parents as a precaution assuring that their child will receive medical treatment in an emergency when a parent cannot be located. **The Parent II Agreement Form requires a notary public signature.**
5. ***Health Records*** *–* All students (new and returning) must turn in an up-to-date vaccination record.
6. ***Testing*** *–* All students applying to WBA for the first time will need to undergo placement testing. This is provided through the American Association of Christian Schools. Students will be notified of the testing dates, and the grade level of new students will be determined after the tests are given.
7. ***Orientation*** *–* All WBA parents are required to attend the Orientation Meeting at 7:00 pm Tuesday, August 23, 2016. Student accounts must be current in order to begin school. School will start on Wednesday, August 24, 2016 at 8:00 A.M. **Please note that students are not to attend orientation.**

**NON-DISCRIMINATION POLICY**

Westside Baptist Academy admits students of any race, color, nationality or ethnic origin to all rights, privileges and activities generally accorded or made available to the students of the school. The school does not discriminate on the basis of race, color, nationality or ethnic origin in administration of its educational policies, admissions policies, athletic programs or other school administered programs.

**ACADEMIC PROGRAM**

***Kindergarten***The kindergarten program is designed to meet the needs of children being introduced to school for the first time. The academic training consists of an emphasis on phonics and reading skills necessary to provide the proper foundation for elementary school. Additional training is given in Bible, mathematics, science, social studies, music and art. **Kindergarten students must be five years old by October 1**.

***Elementary***The elementary program is designed to develop the foundational skills necessary for high school and college. The skills of phonics, reading, spelling, handwriting, grammar, science, mathematics, and social studies are also emphasized in our curriculum.

***High School***We encourage our graduates to continue their education in a Christian college or university. Accordingly, the Senior High School curriculum is college preparatory with an emphasis on Bible, grammar, mathematics, science and social studies. Specialized enrichment and vocational electives are also offered on the high school level using individualized instruction.

**DISCIPLINE AND CONDUCT**

High standards of conduct are required of all those associated with Westside Baptist Academy. All students, faculty, and staff are required to dress in a manner consistent with a separated Christian testimony. Extremes in fashions are not acceptable since they tend to call attention to the individual rather than the Savior that we serve. The **Uniform Guidelines are in the Student Handbook**. The consistent instruction and discipline your children will receive at our school helps to give them a proper respect for authority, an appreciation of discipline and a desire to always do their best.

**PERFORMING ARTS**

Westside Baptist Academy offers many Fine Arts opportunities for all of our students. Our Fine Arts program gives students opportunity to develop their talents and be involved in both state and national competition. Our goal is to prepare our students to serve the Lord with these talents both now and in the future. Private lessons are available upon request at additional cost.

**PERSONAL NOTE**

Westside Baptist Academy is committed to helping you provide your children with an academically excellent and Biblically centered education. If we can be of service to your family, call us today. The Academy Office can be reached at (281) 492-3448 and Mr. Collard can be contacted at (309) 202-5136 or by e-mailing principal@mywestside.org.

School Year \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **For Office Use Only** Date Received \_\_\_\_\_\_\_\_\_

Grade \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Health Record \_\_\_\_\_\_\_\_\_\_\_\_ Application Fee\_\_\_\_\_\_\_\_

**APPLICATION FOR ADMISSION**

**Please type or print all information. Answer all questions or mark N/A**

1. **THE APPLICANT**

***Applicant’s Full Legal Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

 (Last) (First) (Middle)

Address of Student \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Street & House number City State Zip

Phone - Hm \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Mom’s Cell\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Dad’s Cell\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email (Mom)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email (Dad)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Birthplace \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (City, State, Country, if not USA) (Mo/Day/Yr)

Country of Citizenship \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Social Security #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Has student had a discipline issue at a previous School? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If “Yes”, please explain\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Is student now or has she/he ever been under the supervision of a parole officer or under the custody of a juvenile or other court? Yes \_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_

Has the student ever had a police record? Yes \_\_\_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_\_\_ If yes, give dates \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(If answer to either of the above two questions is affirmative, give full information including the name and address of the judge or probation officer on a separate sheet of paper.)

Who referred you to Westside Baptist Academy or how did you become aware of the school?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Please explain why you are interested in enrolling in our Academy? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

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

1. **HEALTH INFORMATION**

**A medical record must be on file before a student can be accepted.**

Does the student have a known disability? Yes \_\_\_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_\_\_

If yes, please explain \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Is the student hearing impaired? Yes \_\_\_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_\_\_

If yes, please explain \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Describe briefly any physical difficulties or health conditions that require special attention \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Is the student presently regularly taking any medication prescribed by a physician (please circle)? Yes No

If yes, please give the medication name, frequency and the condition for which it is taken \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Has the student been hospitalized within the last year? Yes \_\_\_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_\_\_

If yes, give dates and the reason for hospitalization \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Has the student been diagnosed as having or is he currently receiving treatment for a contagious or communicable disease, including AIDS? Yes \_\_\_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_\_\_

Has the student had or is he now receiving professional counseling for emotional or mental difficulties?

Yes \_\_\_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_\_\_

If yes, please supply dates and reason(s) for counseling \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Has the student ever used alcohol, marijuana, narcotics or illegal drugs? Yes \_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_

If yes, state the drugs used, dates used, the number of times used and the last date used.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

1. **FAMILY**

Father’s name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Mother’s name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Father’s employer and address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone ( ) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mother’s employer and address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone ( ) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student lives with: Natural Parents \_\_\_\_\_\_\_\_\_ Mother and Stepfather \_\_\_\_\_\_\_\_\_ Father and Stepmother \_\_\_\_\_\_\_\_\_\_\_

Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If parents are divorced, which parent has custody of the child? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If living with a stepparent or guardian, give name and work phone of stepparent or guardian:

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone ( ) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact in case of emergency: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone ( ) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do parents and student attend church regularly? Yes \_\_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_\_

Name of Church \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Pastor’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

( ) **Please attach a testimony of salvation on a separate sheet of paper for all students (4th grade & above)**

1. **EDUCATIONAL BACKGROUND**

Has student ever been enrolled in Westside Baptist Academy? Yes \_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_

Is student currently on academic or disciplinary probation at the last institution attended? Yes \_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_

If yes, indicate the type of probation \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Is student eligible to return to last institution attended? Yes \_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_

Has your student ever been diagnosed with / approved for any of the following? Yes \_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_

If yes, **please circle all that apply**:

1.) A.D.H.D. 4.) A.D.D. 7.) Other Learning Challenges

2.) Hyperactivity 5.) Dyslexia \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3.) Special Education 6.) Autism \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Has student ever been expelled, dropped, suspended, or placed on probation by any school? Yes \_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_

*If answer is yes, state details, including name of school, time and reason for such action on a separate sheet of paper.*

Name and address of school student is now attending or of last school in which he was enrolled:

School Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone ( ) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

 Street Address City State Zip Code

1. **STATEMENT**

***If accepted, we promise to abide by the rules and spirit of Westside Baptist Academy. If the student does not respond favorably, or upon request by the administration, we will withdraw the students quietly and without delay.***

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

Father’s Signature Mother’s Signature

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

Date Legal Guardian’s Signature Student’s Signature