



CANAAN CHRISTIAN ACADEMY

A ministry of Canaan Bible Chapel

30 Hemlock Road, Lake Ariel, PA 18436
 570-937-4848 (phone) 570-937-4800 (fax)
 E-mail: canaaneagles@gmail.com

APPLICATION FOR ADMISSION

I. FAMILY INFORMATION

Street Address _____ Phone No. _____
 City _____ State _____ Zip Code _____

FATHER	MOTHER
Name: _____	Name: _____
Occupation: _____	Occupation: _____
Business phone: _____	Business phone: _____
Cell phone: _____	Cell phone: _____
E-mail address: _____	E-mail address: _____
Marital Status: _____	Marital Status: _____
Personally accepted Jesus Christ as Savior? _____	Personally accepted Jesus Christ as Savior? _____

II. STUDENT INFORMATION

Last Name _____ First _____ Middle _____ Sex _____
 Date of Birth _____ Social Security No. _____ School Last Attended _____
 Entering grade _____ Has this student even been dismissed, suspended, or expelled from any school? _____
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Last Name \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_ Sex \_\_\_\_\_  
 Date of Birth \_\_\_\_\_ Social Security No. \_\_\_\_\_ School Last Attended \_\_\_\_\_  
 Entering grade \_\_\_\_\_ Has this student even been dismissed, suspended, or expelled from any school? \_\_\_\_\_  
 ~~~~~

Last Name _____ First _____ Middle _____ Sex _____
 Date of Birth _____ Social Security No. _____ School Last Attended _____
 Entering grade _____ Has this student even been dismissed, suspended, or expelled from any school? _____
 ~~~~~

Last Name \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_ Sex \_\_\_\_\_  
 Date of Birth \_\_\_\_\_ Social Security No. \_\_\_\_\_ School Last Attended \_\_\_\_\_  
 Entering grade \_\_\_\_\_ Has this student even been dismissed, suspended, or expelled from any school? \_\_\_\_\_

Please state why you desire to enroll your child(ren) in Canaan Christian Academy:

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Please describe any unusual factors that are present in the life of the student(s). (i.e. prolonged illness, serious injury, absence of father or mother) \_\_\_\_\_

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**III. CHURCH INFORMATION**

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

Street Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone Number and/or e-mail address: \_\_\_\_\_

Does your family attend the church regularly? \_\_\_\_\_

Which of the following are members of this church?

Father \_\_\_\_\_ Mother \_\_\_\_\_ Student Applicant \_\_\_\_\_ None \_\_\_\_\_

*Canaan Christian Academy admits students of any race, color, national, and ethnic origin to all the rights, privileges, program, 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 programs, and athletic and other school-administered programs.*

I hereby verify that to the best of my ability, the information included on this application is complete and accurate.

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

\_\_\_\_\_  
Date

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

\_\_\_\_\_  
Date

**PLEASE NOTE: Applications cannot be processed until the \$50.00 application fee per student has been paid in full and all references are in.**

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**Office Use Only. Do Not Write In The Space Below.**

\_\_\_\_\_  
Accepted

\_\_\_\_\_  
Not Accepted

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

Grade Placement: \_\_\_\_\_

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| Comments:<br><br><br><br><br><br><br><br><br><br> |
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