

Initial Application Packet

Please complete and return the following items:

<p>New Student Application for Admission Form & Family Information Form</p>	<p>Please complete the forms, making sure to answer all questions and sign in noted area.</p> <p>If enrolling more than one child at a time, parents only need to complete the FAMILY INFORMATION SECTION on one form.</p>
<p>Report Card IEP</p>	<p>Please submit a copy of the most-recent report card, or note grades on the back of page 1 of the new student application for admission form. If your child has had an IEP in a previous school, please submit a copy of that also.</p>
<p>Application Fee</p>	<p>\$100 non-refundable, one-time application fee</p>
<p>Financial Aid Assessment Application Process Phone 866.315.9262 Fax 866.315.9264</p>	<p>After application has been made to BRS, families may start applying for financial aid. Go to https://online.factsmgt.com/signin/3KDBR to apply. Although their website states applications will be received until May 1st, FACTS actually accepts applications until June 30th for new families. Please note that FACTS charges \$30 for the assessment processing. The final decision on aid given will be made by the BRS School Board who will email families around the end of June/beginning of July</p>
<p>B6T Application for Private School Transportation Program</p>	<p>Be sure to complete this form right away. If your local school district is enrolled in this program (<i>Aid in Lieu of Transportation</i>), they will send you a certain set amount of money twice a year to help you with the cost of transporting your own child, whether you drive your child yourself, use a carpool or public transportation. <i>It is important that you send us the form ASAP</i> as the school districts prorate their payments if forms are submitted late. The student must live within 20 miles of our school to qualify.</p>
<p>Course Selection Form for students entering 7th – 12th grades</p>	<ul style="list-style-type: none"> • Fill in your child's name and the date at the bottom of the form. • Indicate Elective Classes desired. • New 7th-8th grade students will receive their printed schedules on the first day of school. • New 9th-12th grade students will receive their printed schedules at New Student Orientation (<i>held Tuesday morning, the day before school officially starts</i>). • Questions can be directed to our Guidance Counselor via her email address: KBlatherwick@baptistregional.org. • HS students should report to our Guidance Counselor (<i>in the 3rd floor computer lab</i>) immediately after school, starting with the first day of school, if they have questions or have a problem with their schedule. • HS classes may not be changed after the first month of school. • HS art and lab fees will be added to the student's Smart Tuition account after classes are finalized.

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BAPTIST REGIONAL SCHOOL

Kindergarten – 12th Grades

Administrative Offices
300 Station Avenue
Haddon Heights, NJ 08035
Telephone: (856) 547-2996
Fax: (856) 547-6584
E-Mail: bhs@baptistregional.org
Web Page: www.baptistregional.org

Please complete
and submit with
the \$100
non-refundable
application fee

FOR OFFICE USE:

Application Fee Paid _____
Registration Fee Paid _____
Family Info. Rec'd _____
B6T Rec'd _____
Interviewed _____
Tested _____
Pastoral Form Rec'd _____
School Records Rec'd _____
Health History Rec'd _____
Medical Release Rec'd _____

Date of Application _____

____ **PreK-4 student**
Full-time _____ Half Day _____
____ **Full-time student**
Grade to be entered (K-12) _____
____ **Homeschool student**
Grade to be entered (7-12) _____
____ **I-20 International student**
Grade to be entered (7-12) _____

NEW STUDENT APPLICATION FOR ADMISSION

Name of Student _____
(Last) (First) (Middle)

Address _____

(City) (State) (Zip) Telephone _____

Birthplace _____ Birth Date _____ Age _____ Sex _____

Public high school district in which student resides _____

Home Church _____ Pastor's Name _____

Church Address _____

Has student ever been dismissed, suspended or repeated a grade at any school? _____ If yes, explain: _____

Has student ever been evaluated by a Child Study Team or received special services? _____

Does student desire to attend Baptist Regional School? _____ If no, explain: _____

STATEMENT OF PARENT OR GUARDIAN

In making this application, it is understood that:

1. The teacher has full discretion in the classroom discipline of our child.
2. We recognize Baptist Regional School's right to discipline and/or dismiss our child if he/she does not respect its standards or cooperate in the educational process.
3. Our child will go on all scheduled field trips and other school activities.
4. We hereby agree to pay all tuition, fees, and other financial obligations to Baptist Regional School on or before the date due without a reminder. We agree that early withdrawal or change to home school status will still require the full year's tuition.

Signature of both parents/guardians is required. Please explain if one is missing.

Father/Guardian _____ Mother/Guardian _____
Email address _____ Email Address _____

The Application Fee (not refundable), made payable to BAPTIST REGIONAL SCHOOL, must accompany this application.

PAYMENT PLAN:

Please check one: _____ ANNUAL _____ SEMESTER _____ 11-MONTH PLAN Do you qualify for a tuition discount? _____

BAPTIST REGIONAL SCHOOL
Kindergarten through 12th Grade
Administrative Offices
Third & Station Avenues
Haddon Heights, NJ 08035
(856) 547-2996

FAMILY INFORMATION

Date _____

FATHER'S NAME _____
(Indicate if Guardian)

MOTHER'S NAME _____
(Indicate if Guardian)

Address _____

Address _____

Home Telephone _____

Home Telephone _____

Cell Phone _____

Cell Phone _____

E-Mail Address _____

E-Mail Address _____

Employer _____

Employer _____

Business Address _____

Business Address _____

Occupation _____

Occupation _____

Business Telephone _____

Business Telephone _____

Education: High School _____ # of years
College _____ # of years

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College _____ # of years

Marital Status: Widower _____ Separated _____
Married _____ Divorced _____ Remarried _____

Marital Status: Widow _____ Separated _____
Married _____ Divorced _____ Remarried _____

Home Church _____

Home Church _____

Address _____

Address _____

Pastor _____

Pastor _____

- Have you personally received Jesus Christ as your Savior and Lord? _____
- Have you read the Statement of Belief? _____
- Do you subscribe to same? _____
- Are you willing to have your children trained in accordance with same? _____

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NAMES OF ALL CHILDREN

PRESENT OR HIGHEST GRADE IN SCHOOL

SCHOOL ATTENDING AT PRESENT (if applicable)
