

Please indicate significant activities, special interests, or abilities of this applicant:

The purpose of Berean Academy is to provide a program of education which promotes a Christ-centered lifestyle, upholds a standard of scholastic excellence, promotes the principles established in the Word of God, furnishes instruction in a Christian worldview, and prepares students to take their places in the home, in the church, in their vocation, and in their country. In light of this statement, please comment on whether or not you feel this applicant will succeed at Berean Academy.

Recommendation for admission to Berean Academy:

_____ Strongly recommend	_____ Recommend with reservations
_____ Recommend	_____ Do not recommend

Signature _____

Name (please print) _____

Position & School Name _____

May we contact you concerning this applicant if needed, yes/no? Best Contact # or email: _____

Thank you for your time and help with this process.

Please return to:

Berean Academy
Robyn Stucky, Admissions Director
P.O. Box 70 - Elbing, KS 67041
Phone: 316.799.2211
admissions@bawarriors.com



School Attended: _____ Year/s: _____

School Address: _____

School Phone: _____ Fax: _____

This is a transcript request for _____ who has applied to Berean Academy for admission to grade _____ in _____ school year.

Please send a copy of this student's records through the most recent grading period including:

1. Academic Record i.e.(Grades, Attendance)
2. Achievement and aptitude test results
3. Psychological and special needs testing records
4. Individual Education Plan(IEP) or 504 Plan
5. Disciplinary records; *If no discipline record please initial here* _____
6. Health and immunization records

Thank you for your assistance,

Berean Academy
Admissions Director
admissions@bawarriors.com

Statement of Confidentiality: It is Berean Academy's policy that all information obtained regarding an applicant for admission is kept in the strictest confidential manner. Only authorized school personnel have access to this information and only to the extent it is relevant to admission and placement decisions.

Permission to release transcript:

I / We authorize the release of my/our child's records to Berean Academy.

Parent/Guardian(s) Signature:

Signature: _____ Date: _____



Subject

Curriculum (Publisher and Edition)

Math: _____

Grade %: _____ (attach a copy of your last math exam)

Science: _____

Grade %: _____

English: _____

Literature: _____

Grammar: _____

Spelling: _____

Vocabulary: _____

Grade %: _____ (attach a writing assignment- book report, essay, etc..)

History: _____

Grade %: _____

Bible: _____

Grade %: _____

Foreign Language: _____

Grade %: _____

Elective: _____

Grade %: _____

Student's Name

Current Grade

Standardized Tests (year Taken)

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Church Name & Address _____

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