

## Central Baptist Christian Academy

1606 State Rte. 12 Binghamton, NY 13901 607-648-6210 or Fax 607-648-7652

E-mail: <a href="mailto:cbca@centraladvantage.org">cbca@centraladvantage.org</a>

## Application Form 2023-2024

PARENTS' NAMES:			Marital Status:		
Home Street Address:			Ph	one #:	
City:	State:	Zip Code:		E-mail:	
Students' Names					
1		M / F	_	Birth date:	
2		M / F	Grade Entering: _	Birth date:	
3		M / F	Grade Entering: _	Birth date:	
4		M / F	Grade Entering: _	Birth date:	
School(s) Last Attended & student 1:			Social Secur	ity #:	
		Social Security #:			
Student 3:	Social Security #:				
Student 4:	Social Security #:				
Reason for leaving last school:					
How you found out about Central	(from whom):				
Church you regularly attend:					
Pastor's Name					
Student Information: Please puLearning DisabilityIndividual Education PlanPhysical HandicapExpelled or asked to leave Please give a brief explanation for	school r any item checked abo	Hyperactivit Severe Aller Repeated Grove:	y gies ades	xplain below Resource Room Other special needs	
Student 1:					
Student 2:					
Student 3:					
Student 4:					
I hereby request that the student(s	) named above be allo	owed to enrol	l at CBCA for the 2	023-2024 school year.	
I understand that an interview an contingent upon receiving the stachievement tests and other app	tudent's current info			ote: Acceptance for enrollment is ted to, grades, standardized	
Parent Signature:		Date:			

CBCA enrolls students of any race, color, national, or ethnic origin, and affords them all the rights, privileges, programs, and activities generally accorded or made available to all students at the Academy. CBCA does not discriminate on the basis of race, color, or national origin in the administration of its educational policies, admission policies, athletics, and other school-administered programs.