



OFFICE USE ONLY DATE RECEIVED: _____ OFFICE INITIALS: _____ DATE STARTED: _____

BETHLEHEM CHRISTIAN ACADEMY
“Beacon of Excellence”
4 Harrison Bridge Road * Simpsonville, South Carolina 29681
Academy Office Number: 864*688*0410 Fax Number: 864*228*1887
sjoseph@bbc1867.org
www.bca.edu.org

Personal Information

Student's Name _____ Date of Birth _____
Age: ____ Grade of Enrollment: ____ Sex: ____ Contact Number: (____) _____
Father/Guardian's Name: _____ Contact Phone #: (____) _____
Place of Employment: _____ Business Phone #: (____) _____
Father/Guardian E-mail Address: _____
Mother/Guardian's Name: _____ Contact Phone #: (____) _____
Place of Employment: _____ Business Phone #: (____) _____
Mother/Guardian E-mail Address: _____

Previous School Information

School last attended: _____
Address of school: _____
City/State/Zip Code: _____
Was student home schooled? ____ No ____ Yes, which grade(s) and what was the name of the enforcing school district governing home school requirements?

Has student participated in standardized testing? ____ No ____ Yes, which test? _____
Has this student skipped or repeated any grades? ____ No ____ Yes, which grade (s) _____
Has this student ever been expelled or referred to administration for discipline? ____ No ____ Yes, Please explain.

Referral

How did you hear about BCA? _____