



Quakertown Christian School
 50 East Paletown Road
 Quakertown, PA 18951

FOR OFFICE USE ONLY:
 Date received: _____
 Registration Fee: _____

HOMESCHOOLING APPLICATION

Student Information:

Last Name: _____ First Name: _____ Middle Initial: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Emergency Phone: _____

Email: _____ Birthdate: _____

School attended during previous year: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Teacher: _____ Grade Entering: _____ Last Grade Attended: _____

Ever dismissed, suspended, or disciplined in any school? _____

If yes, explain: _____

Family Church: _____

Address: _____

Pastor(s): _____

Where did you first hear about Quakertown Christian School? _____

Please select the programs your child will be participating in at QCS:

Elementary 1-5:

Grades 6-8:

Grades 9-12:

Enrichment Courses:

Core Courses:

Enrichment Courses:

Core Courses:

Enrichment Courses:

Athletics:

Girls (list sport): _____

Boys (list sport): _____

Father's Information:

Father's Last Name: _____ Father's First Name: _____ Middle Initial: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Email: _____ Phone: _____

U.S. Citizen (yes/no): _____ Religious Denomination: _____

Marital Status: _____ Occupation: _____

Employer: _____ Employer Phone: _____

Employer Address: _____

Mother's Information:

Mother's Last Name: _____ Mother's First Name: _____ Middle Initial: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Email: _____ Phone: _____

U.S. Citizen (yes/no): _____ Religious Denomination: _____

Marital Status: _____ Occupation: _____

Employer: _____ Employer Phone: _____

Employer Address: _____

In completing this application, I understand that...

1. My child will participate in field trips/school activities as part of the program in which they are enrolled.
2. I agree to authorize this school to use such discipline as it deems wise and expedient for my child.
3. The school reserves the right to dismiss any student who does not respect its spiritual standards or cooperate in the educational program.

Signature of both parents is needed.

Father: _____ Mother: _____

Date: _____

Date: _____