

P. O. Box 1387
Honaker, VA 24260
Telephone: 276.859.0748
Fax: 276.859.2233

ANCHORS ACADEMY

Application for Enrollment

School Year: _____

Parent or Guardian Information:

NAME _____
ADDRESS _____
CITY _____ STATE _____ ZIP _____
TELEPHONE (Home) _____ (Work) _____
E-MAIL _____ FAX _____

Student Information:

STUDENT'S NAME _____
STUDENT'S AGE _____ GRADE _____ BIRTHDATE _____

Has an IEP been prepared for the student? _____ (An IEP is an Individualized Educational Program for students in Special Education classes.)

Has this student been suspended or expelled from school in the past? _____

If yes, please explain:

We are (I am) in agreement with the statement of faith, procedures and policies of ANCHORS Academy. We (I) acknowledge our (my) responsibilities to ANCHORS Academy and hereby obligate ourselves (myself) to the fulfillment of its policies.

Signature of Parent/Guardian

Signature of Parent/Guardian

ANCHORS Academy

Application for Enrollment

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*Reference

Name of church your family attends:

Church address:

Church Phone No.: _____

Name of Pastor: _____

*Application for Enrollment will not be considered complete unless Reference information is provided

ANCHORS ACADEMY
STUDENT-PARENT-ADMINISTRATION AGREEMENT

(To be completed by students in Grades 6-12)

I promise to uphold the standards of the school in dress and conduct. I will in honesty and good spirit, accept correction in these areas knowing it will be given for my benefit.

I will abstain from any activity inconsistent with my Christian testimony.

I will work diligently on all schoolwork, striving for the highest grade I can possibly make. I will always do my own work and not cheat. I will not help another student cheat.

As a student of ANCHORS Academy, I will act in an orderly and respectful manner, maintaining Christian standards in courtesy, kindness, morality and honesty at all times. I will remember that how I act reflects on the Lord Jesus Christ and reflects on the testimony of ANCHORS Academy.

I will do my best to stay close to the Lord through attending a Bible-believing church, reading my Bible regularly (hiding the Word in my heart), and praying, and telling others about the Lord.

I will honor my parents as the Bible instructs me to do, and will honor my teachers and tutors, as well. I will attend all functions I am required to attend and in proper attire.

I agree to abide by the above standards and other regulations expected of students of ANCHORS Academy. I will not give the impression to students, parents or school administration that I am not in harmony with the goals or standards of ANCHORS Academy. This contract must be signed or initialed annually by the student.

Student Signature

Date

Parent/Guardian Signature

Date

Course of Study

STUDENT _____

BIBLE _____

LANGUAGE ARTS _____

MATHEMATICS _____

SCIENCE _____

HISTORY & GEOGRAPHY _____

FOREIGN LANGUAGE/FINE ARTS/PHYS. ED. _____

ANCHORS Academy

A Ministry of Souls Harbor

PERMISSION TO RELEASE SCHOOL RECORDS

RE: Student Name: _____
Date of Birth: _____
Grade Enrolled: _____ Date of Enrollment: _____

Dear Registrar,

The referenced student has enrolled in ANCHORS Academy. Please send any available standardized test scores, health records and other information that might assist us in the proper placement and adjustment of this student. If this student has been enrolled in your school this year, please send his/her grades up to the time of departure. Please include, if applicable, eighth grade through twelfth grade credits evaluated in Carnegie Units.

Sincerely,

Patricia A. Owen
Administrator

Please send records to
ANCHORS Academy
P. O. Box 1387
Honaker, VA 24260

Please release the above information to ANCHORS Academy.

Signature of Parent or Legal Guardian

Please write below name and city of former school:

Swimming Against the Current