## **Application for Admission**

## TRINITY CLASSICAL ACADEMY OF SUMMERVILLE

P.O. Box 3069 Summerville, S.C. 29484 843 821-8282

## www.tcasummerville.com

Child's Name:				
Child's Name: First		Middle		Last
Date of Birth:	Age:	Gender:	Grade Applied for _	
Mailing Address:Street			City	Zip Code
Telephone:			Ť	•
Current School / Program:		1.00		
				Grades Attended
Parent's Name:			Relationship to Cl	nild
Address:	ROM CHILD'S	City	State	Zip Code
Home Phone:				
Work/Alternate Phone:		Email:		
Occupation:	L	ocation of Work:		
Parent's Name:			Relationship to Cl	nild
Address:	DOM CHIL DVS	City	State	Zin Code
Home Phone:				•
Work/Alternate Phone:				
Occupation:	L	ocation of Work:		
Emergency Contact:				
			Relationship to Child	
Address:Street		City	State	Zip Code
Home Phone:		Mobile Phone:	Suite	2.p 0000

CHILD'S PROFILE			
Child's Health / Medical Needs:			
Child's Allergies:			
Child's Medication:			
Describe any medical, physical, psych would assist the school & staff.	ological, behavioral and/or other	needs, conditions or concern	s about the child that
Child's Religious Preference (optional Child Resides With:	l): Child'		
Ciblings			
Name	Age	School / Program Curren	tly Attending
Name	Age	School / Program Curren	tly Attending
Name	Age	School / Program Curren	tly Attending
Was child adopted: YES NO	If yes, at what age:		-
Child's Spoken Language(s):			
Child's Daily Routine:			
Child's Responsibilities at Home:			
Child's Interests / Hobbies / Sports:			
Does Child Play a Musical Instrument  If yes, which instrument is played:			
Time Spent Watching Television/Mov	ries/Videos:	Daily Amount	Weekly Amount

Time Spent on Computer / Playing Electronic Games:			
	Daily Amount	Weekly Amount	
Please describe your child's learning style, disposition, personal school in best supporting the child while in school:	ity and any other characteristic	s that would assist the	
EDUCATIONAL PROFILE			
How did you come to know about TCA?			
What are your interests / reasons for choosing TCA?			
Has child ever repeated or skipped a grade?			
YES NO If yes, please explain:			
Has child ever been suspended, expelled or asked to leave anoth	er school / program?		
YES NO If yes, please explain:			