



WESTMINSTER
CHRISTIAN ACADEMY



Admissions Instructions and Applications

Applying for Admission to Westminster Christian Academy

Westminster Christian Academy welcomes your application for admission and looks forward to assisting you in the application process. This booklet contains instructions and materials necessary for submitting your application. Please complete the application form carefully, according to directions.

APPLICATION CHECKLIST (Sections A, B, C, D, & E)

All students requesting admission to Westminster Christian Academy must fulfill the requirements of the following checklist:

- ❑ *Application for Admission:* Complete Parent Application (**Section A**) and Student Application (**Section B**). The student response section should be completed by the applicant in his/her own handwriting. Be sure to read the application carefully.
- ❑ *Student Photo (optional):* Attach a photo of the student to the application where indicated. This helps us to identify the student when the school year begins.
- ❑ *Application Fee:* The application fee is \$50.00. Make check payable to Westminster Christian Academy. The application cannot be processed until the nonrefundable application fee has been paid.
- ❑ *Academic Records:* The applicant's parent should sign the Transcript Release Form (**Section C**) and send it to the student's current school. The school will send an official transcript to Westminster Christian Academy, including grades and standardized test scores from the past two school years and the current school year, immunization and medical record, and attendance and discipline records. Transcripts must be legible. A faxed transcript is not considered an official transcript. Additional testing may be advised to assist with the placement of the student. Clinical testing may be substituted in special cases. Homeschool applicants should submit any and all achievement tests scores, a written list of subjects taken and curriculum used, credits received (if any) and grades, and transcripts from previously attended schools (if applicable). A form (**Section H**) for documenting homeschool classes is available through the Admissions Office.

- ❑ *Teacher Recommendation:* Please deliver the Teacher Recommendation Form (**Section D**) to a current teacher of a core subject (i.e., English, math, science). Homeschool applicants should have the form filled out by an instructor outside of the applicant's family. This form should be mailed from the teacher directly to the Admissions Office, not returned to the student.
- ❑ *Pastor Letter of Reference:* Please deliver the Letter of Recommendation Form (**Section E**) to your pastor or church leader who is most familiar with the family. Examples of a church leader would include youth pastor, associate pastor, or elder. This form should be mailed from the church leader directly to the Admissions Office.
- ❑ *Family Interview:* Schedule an appointment with the Admissions Office (314-997-2900) to meet with a member of the Westminster Christian Academy Board of Directors. The presence of both parents and student at the interview is required.

After completing the parent and student applications, return them in the large envelope provided along with the application fee. Upon receipt of these documents, the admissions process begins. Since class size is limited, early application is highly recommended.

*For additional admissions information,
please contact:*

Director of Admissions
Westminster Christian Academy
314-997-2900, ext. 119

*For financial aid information,
refer to inside back cover.*

*Apply on-line at www.wcastl.org. The admissions application and forms
can also be downloaded and printed from the WCA website.*



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Admission Application – Section A (Parent)

This section is to be completed by parents or guardians of the applicant. Please print.

APPLICANT INFORMATION

Applicant's legal name _____
First Middle Last

Female Male Preferred name _____

Age _____ Date of birth (month/day/year) _____ Place of birth _____

Applying for grade _____ Month/Year _____ Current grade _____ Social Security # _____
(optional)

Citizenship: US Other (Please specify): _____ Language(s) spoken at home (other than English) _____

Mailing address _____
Street address City State Zip code

Home telephone () _____ Fax () _____ Parent's e-mail _____

Will the applicant be requesting financial aid? Yes No

Please check all that apply. (Optional, used for statistical purposes only.)

- African-American or Black Hispanic or Latino Asian
- American Indian or Alaska Native Caucasian or White Native Hawaiian or Other Pacific Islander

Family church information:

Name of family's congregation: _____ Member: Yes No

Denomination: _____

Frequency of family's church attendance: Weekly Frequently Infrequently

Frequency of student's church/youth group attendance: Weekly Frequently Infrequently

School information:

Current school _____

School address _____
Street address City State Zip code

School telephone () _____ Fax () _____ Principal/Head _____

Dates of attendance _____

All other school(s) previously attended (attach additional paper if necessary):

Name	Address	Telephone	Dates of Attendance

FAMILY INFORMATION

Student resides with (check all that apply): Father Mother Stepfather Stepmother Other (please specify) _____

Correspondence should be sent to: Both parents Father Mother Other (please specify) _____

Name of parent or guardian: Deceased
 Dr. Mr. Mrs. Ms. Other (please specify) _____

First Middle Last

Preferred name: _____

Relationship to applicant: _____

Home address: _____
Street

City State Zip

Home telephone:() _____

Cell:() _____ E-mail: _____

Position: _____

Employer: _____

Address: _____
Street

City State Zip

Telephone:() _____ Fax:() _____

Name of parent or guardian: Deceased
 Dr. Mr. Mrs. Ms. Other (please specify) _____

First Middle Last

Preferred name: _____

Relationship to applicant: _____

Home address: _____
Street

City State Zip

Home telephone:() _____

Cell:() _____ E-mail: _____

Position: _____

Employer: _____

Address: _____
Street

City State Zip

Telephone:() _____ Fax:() _____

If applicable, name of stepparent:
 Dr. Mr. Mrs. Ms. Other (please specify) _____

First Middle Last

Preferred name: _____

Relationship to applicant: _____

Home address: _____
Street

City State Zip

Home telephone:() _____

Cell:() _____ E-mail: _____

Position: _____

Employer: _____

Address: _____
Street

City State Zip

Telephone:() _____ Fax:() _____

If applicable, name of stepparent:
 Dr. Mr. Mrs. Ms. Other (please specify) _____

First Middle Last

Preferred name: _____

Relationship to applicant: _____

Home address: _____
Street

City State Zip

Home telephone:() _____

Cell:() _____ E-mail: _____

Position: _____

Employer: _____

Address: _____
Street

City State Zip

Telephone:() _____ Fax:() _____

Please list names of applicant's brothers and sisters, their ages, schools (colleges) they now attend, and their grades/years in school (attach additional paper if necessary).

Name	Age	School	Grade/Year
Name	Age	School	Grade/Year
Name	Age	School	Grade/Year

If the applicant has any relatives who have graduated from Westminster Christian Academy, or if any relatives currently attend, please list their names (include maiden names where applicable), relationship to applicant and the years they attended.

Name	Relationship to Applicant	Years attended
Name	Relationship to Applicant	Years attended

Why do you want the applicant to attend Westminster Christian Academy?

Is it your intention to have the applicant graduate from WCA? Yes No If not, please explain:

Has the applicant, to your knowledge, used any type of drugs, alcohol, or tobacco, or has he/she ever been in any type of trouble with the law? Yes No If yes, please explain. Attach additional paper if necessary.

If there are circumstances which have affected or may affect the applicant's academic performance, participation in athletics, or attendance in school, please describe (e.g., frequent moves/change of school, separation/loss of a significant person in the family, disciplinary action, illness, learning difference, skipping or repeating a grade).

Has the applicant ever been suspended, dismissed, requested to withdraw, or otherwise disciplined for any reason? Yes No If yes, please state the nature of the action taken and describe the circumstances relating to the action. Please provide the names of the teachers or administrators involved. Attach additional paper if necessary.

Has the applicant ever repeated a grade? Yes No If so, please state grade and date: _____

Has the applicant participated in any special learning programs (gifted, resource, SNAP, Special School District)? Yes No

If yes, please specify: _____

What is your relationship to Jesus Christ? _____

What is your spouse's relationship to Jesus Christ? _____

Please respond by circling yes or no for each statement below.

Are you personally in agreement with and committed to the basic tenets of historic Christianity, as listed below?

MOTHER	FATHER	
yes/no	yes/no	A. God is a Triune God – the Father, Son and Holy Spirit.
yes/no	yes/no	B. The Bible is God's infallible and authoritative Word to man. It is the only standard by which faith and practice are to be measured.
yes/no	yes/no	C. The chief end of man is to glorify God and enjoy Him forever.
yes/no	yes/no	D. Man is created in the image of God. Through his relationship to Adam, man is a sinner by nature and does himself practice sin.
yes/no	yes/no	E. Jesus Christ is the only Savior of sinners, the only way to the Father. He died as a substitute for sinners and was raised from the dead so that they might be reconciled to God.
yes/no	yes/no	F. Eternal life is a free gift that is received through faith in Jesus alone. Eternal life is neither deserved by anyone, nor can it be earned by good deeds.

MOTHER	FATHER	
yes/no	yes/no	Have you read the bylaws of Westminster Christian Academy and its Philosophy of Education, and do you desire this education for the applicant? (Bylaws can be viewed on our website at www.wcastl.org .)

MOTHER	FATHER	
yes/no	yes/no	Are you willing for the applicant to receive training in the historic doctrines of the Church, and will you support the school in its endeavors to encourage and to guide the applicant in applying these doctrines to life? If the applicant is accepted, will you promise to:

MOTHER	FATHER	
yes/no	yes/no	A. Support the school and its policies concerning dress, conduct, and all other matters outlined in the Student/Parent Handbook? (Handbook can be viewed on our website at www.wcastl.org/upper/student.cfm .)
yes/no	yes/no	B. Assume responsibility for your child's education by supervising assigned homework and keeping in regular contact with your child's teachers?
yes/no	yes/no	C. Support, to the best of your ability, the various activities of the school?
yes/no	yes/no	D. Support, to the best of your ability, the school's entire program through prayer, time, and annual giving?
yes/no	yes/no	E. Faithfully strive to model for your family and others the code of behavior defined in the infallible and authoritative Word of God and the Westminster Confession of Faith?
yes/no	yes/no	F. Faithfully participate in and support your local church?

How did you learn about WCA? _____

Statement of Confidentiality: It is the policy of Westminster Christian Academy that all information received regarding a candidate's application for admission will be treated with complete confidentiality. Only authorized school personnel and agents have access to this information unless otherwise required by law. Information received within the scope of this policy is not disclosed to the applicant or to the applicant's family.

I/We hereby state that the information contained herein is true and complete. I/We have not knowingly omitted any pertinent information regarding my/our child's academic, medical or behavioral history.

Signature of parent/guardian	Date
Signature of parent/guardian	Date
Signature of parent/guardian	Date
Signature of parent/guardian	Date

Westminster Christian Academy, a private educational institution, admits students of any race, color, sex, and national or ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. Westminster Christian Academy does not discriminate on the basis of race, color, sex, and national or ethnic origin in the administration of its education programs, admissions policies, financial aid programs, athletics, cocurricular activities, or other school-administered programs.



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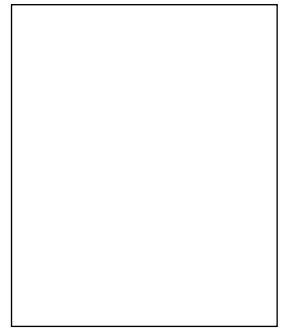


Photo (optional)

Admission Application – Section B (Student)

This section is to be completed by the applicant. Please print.

Print full name _____
First Middle Last

Preferred name _____ Female Male Applying to grade _____

Name of current school _____

Number of students in current class _____

Please write about your involvement in any of the activities listed below, being as specific as possible. Although you are not expected to be involved in all of the areas listed, we want you to have the opportunity to write about those in which you have taken an active interest.

Visual Arts _____

Athletics _____

Community Service/Family Responsibilities _____

Drama/Literature/Music _____

Math/Science _____

Hobbies _____

Other Activities _____

Are you an active member of a church? Yes No Name of church _____

Describe areas of interest and/or involvement in church. _____

Do you consider yourself to be a Christian? Yes No

If yes, please explain. _____

In a paragraph, please explain why you desire to be a student at Westminster Christian Academy.

Do you understand that every entering student's academic program and citizenship will be reviewed at the end of one semester?

Yes No

Westminster Christian Academy is a school dedicated to the glory of God. It is in existence to help you grow spiritually, emotionally, physically, and academically. It is expected that you will at all times live in accord with what our school represents and believes, and that in all things you will represent it well as an example of who its members are and what they do. As a Christian school, Westminster Christian Academy is committed to the teachings of the Bible, and we are persuaded that there should be a direct relationship between what a Christian student believes and how he or she behaves. We acknowledge that it is impossible to create a school community with behavioral standards that are acceptable to every student. We do, however, believe that it is essential to specify certain principles found in the Bible. We request, therefore, that all students abstain both on and off campus from the use of tobacco, alcoholic beverages, illegal drugs, profane language, and immoral behavior.

Violations are considered as breaking a firm commitment that each student makes when voluntarily choosing to attend the school. As a student at Westminster Christian Academy, you will be expected to exert a positive influence in your social relationships and to be a responsible member of the Westminster Christian Academy community.

Signature

Date

Westminster Christian Academy, a private educational institution, admits students of any race, color, sex, and national or ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. Westminster Christian Academy does not discriminate on the basis of race, color, sex, and national or ethnic origin in the administration of its education programs, admissions policies, financial aid programs, athletics, cocurricular activities, or other school-administered programs.



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Transcript Release Form – Section C

Parents: Please complete and give this form to your child's current school. Records must be sent directly from the school.

I/We authorize the following information regarding my/our child to be released to Westminster Christian Academy:

- Grades from the past two school years and the current school year
- Aptitude and achievement test scores
- Interpretation of grading scales
- Psychological and special needs testing results
- Attendance and disciplinary records
- Immunization and medical records
- Current teacher recommendation

If my/our child is accepted to attend Westminster Christian Academy, I/we authorize release of the full record when transfer occurs.

I/we authorize Westminster Christian Academy to contact schools and other sources to obtain information relative to my/our child's application. I/We will not seek access to confidential recommendation and evaluation materials before or after the admission decision is made.

Applicant's full name: _____
First Middle Last

Applying for grade: _____ Enrolling: _____

Current school: _____

School address: _____

City State Zip

School phone: () _____

School fax: () _____

Statement of Confidentiality: It is the policy of Westminster Christian Academy that all information received regarding a candidate's application for admission will be treated with complete confidentiality. Only authorized school personnel have access to this information, and then only to the extent that the information is relevant to admission and placement decisions. Information received within the scope of this policy is not disclosed to the applicant or to the applicant's family.

Signature(s) of parent(s)/guardian(s):

Signature Date

Signature Date

Note to transcribing school: Please include all of the seven documents listed above or any of the seven documents that apply to this student. Send documents to: Director of Admissions, Westminster Christian Academy, 10900 Ladue Road, St. Louis, MO, 63141. Final transcripts are due by June 15.



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Teacher Recommendation Form – Section D

Parents: Please submit this form to one or more of your child's current core subject teachers (i.e., mathematics, science, English). Please make copies if more than one teacher is recommending.

Teachers: Please keep a copy of this form and send the original directly to the Director of Admissions, Westminster Christian Academy, 10900 Ladue Road, St. Louis, MO 63141.

This section to be completed by applicant's parent.

Applicant's full name _____
First Middle Last

Applicant's current school _____ Current grade _____

This section to be completed by teacher.

The student named above, applying for admission to Westminster Christian Academy, is required to have this form on file before being considered for admission. Your prompt attention is appreciated. This evaluation and its contents will be used only in connection with the admission decision. If you wish to discuss this in person rather than complete this form, please check the box below, sign and return this form with your telephone number(s). A representative from the admissions office will contact you shortly.

I would like to discuss the applicant personally rather than complete this form.

Name of person completing this form: _____

My relationship with this student has been that of (check all that apply):

School Counselor School Administrator

Teacher (please specify subjects) _____

Other (please specify) _____

I have known this student for: _____ Years _____ Months Daytime phone: () _____
Signature Date

The items that follow ask for your sense of this student's relationship within the school community; emotional and social growth; and intellectual development. Your insight will help us to know this child. We understand the difficulty in evaluating a student, and we are aware that children are constantly growing, changing, and developing. The information you provide will be kept in strictest confidence and used only by the admissions committee.

What are the first words that come to mind when describing this student? _____

What are the student's special interests or abilities? _____

We would appreciate your comments and observations concerning the strengths, weaknesses, learning style, health, behavior, or special needs of this student. Feel free to attach an additional sheet of paper if necessary.

Please comment on the parents' support of their child's learning and their cooperation with the school.

Does this school have a program for special needs students (gifted, learning disabled, etc.)? Yes No

If yes, is this student involved in a program? Yes No Name of program: _____

For how long has this student been involved? Years _____ Months _____

Has the applicant ever been suspended, dismissed, requested to withdraw, or otherwise penalized or disciplined for any reason?

Yes No If yes, dates suspended: From _____ to _____. Please state the nature of the action taken and describe the circumstances relating to the action. Please provide the names of the teachers or administrators involved. Attach additional paper if necessary. _____

Is the student currently in good standing? Yes No

Please rate this student compared to other students you have taught on the scale below as it relates to each category listed.

(This form may be duplicated if more than one teacher wishes to complete this scale.)

PERSONAL QUALITIES

	Outstanding	Above Average	Average	Fair	Needs Improvement
Work ethic					
Conduct					
Consideration for others					
Relationships with peers					
Relationships with adults					
Emotional maturity					
Self-confidence					
Sense of humor					
Honesty					
Sense of responsibility					
Leadership skills					

ACADEMIC QUALITIES

	Outstanding	Above Average	Average	Fair	Needs Improvement
Motivation to learn					
Intellectual curiosity					
Ability to work in a group					
Ability to work independently					
Organizational skills					
Work habits					
Creativity					
Class preparation					
Class participation					
Academic promise					
Academic achievement					



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Pastor Letter of Reference Form – Section E

Parents: Please submit this form to your pastor or the church leader who is most familiar with your family. Applicant should provide a stamped envelope addressed to the Director of Admissions for the person filing the reference.

This section to be completed by applicant's parent.

Applicant's family name: _____
(Parent/Guardian) Last First Spouse

Address: _____
Street City State Zip

Children Applying to WCA: _____
Name Grade Name Grade

Dear Pastor:

The family named above, applying for admission to Westminster Christian Academy, is required to have this form on file before being considered for admission. Westminster Christian Academy honors Jesus Christ by providing an excellent education for the children of Christian parents. Westminster requires that at least one parent of each student be a professing Christian. We seek to work in concert with the home and local church to provide a unified world view. Since we feel that church attendance and active participation in the local church are essential for a child's total education, we request that this form be completed by the family pastor as part of the admissions process.

Please complete this form to the best of your knowledge. Your prompt attention is appreciated. Submit the completed form directly to Westminster Christian Academy. This evaluation and its contents will be used only in connection with the admissions decision. All information will be kept confidential.

Name of person completing this form: _____

My relationship with this family: Pastor Associate Pastor Youth Pastor Other _____

How well do you know this family? _____ How long? _____

Is the family active in your church? Yes No If yes, please indicate activities: _____

Is at least one parent a professing Christian? Yes No Comments: _____

Are there any matters that you feel would be helpful to the school's administration in evaluating the family's application for admission to Westminster Christian Academy?

Does the family attend worship services? Yes No How often? occasionally once a month weekly

After reading our doctrinal statement printed below, what recommendation would you give for this family to be considered for admission to Westminster Christian Academy? highly recommend recommend do not recommend

Comments _____

Church _____

Church address _____

Street Address

City

State

Zip Code

Denominational affiliation: _____

Signature

Date

Thank you for the information you have given us about this applicant's family. If you would like further information about Westminster Christian Academy, or if you would like to discuss the contents of this form with us, please check the box below and someone from the school's administration will call you. Please call me.

Send completed form to:
Mrs. Peggy Johnson, Director of Admissions
Westminster Christian Academy
10900 Ladue Road
St. Louis, MO 63141-8496
Fax - 314-997-2900
email - pjohnson@wcastl.org

Westminster Christian Academy is a Christian, college preparatory high school founded in 1976. We admit and accommodate a range of students.

Our mission statement is: *Westminster Christian Academy honors Jesus Christ by providing an excellent education, rooted in biblical truth as interpreted by the Westminster Confession of Faith, for the children of Christian parents. Faculty and staff enable students to discover and embrace a biblical view of the world and integrate that view into every area of life.*

Westminster parents are expected to be committed to and in agreement with the basic tenets of historic Christianity as listed below:

- A. God is a Triune God – the Father, Son and Holy Spirit.
- B. The Bible is God's infallible and authoritative Word to man. It is the only standard by which faith and practice are to be measured.
- C. The chief end of man is to glorify God and enjoy Him forever.
- D. Man is created in the image of God. Through his relationship to Adam, man is a sinner by nature and does himself practice sin.
- E. Jesus Christ is the only Savior of sinners, the only way to the Father. He died as a substitute for sinners and was raised from the dead so that they might be reconciled to God.
- F. Eternal life is a free gift that is received through faith in Jesus alone. Eternal life is neither deserved by anyone, nor can it be earned by good deeds.

Applying for the Westminster Christian Academy Special Services Program

Westminster Christian Academy welcomes students with diagnoses requiring special educational services to apply for assistance. If you desire to apply for these services for your child, please fill out the following applications (Sections F & G). The information parents, teachers, and medical professionals provide through the applications which follow will assist the WCA Special Services Committee with admissions and placement decisions. This portion of the child's application will be kept confidential unless otherwise required by law.

If you do not desire to apply for special services, you do not need to complete the following forms.

SPECIAL SERVICES APPLICATION (Sections F & G)

Westminster Christian Academy provides support for students with special educational diagnoses. We are pleased to consider your student for these services. Consideration for admission to this program depends upon the submission of the following items:

- ❑ *Application for Special Services*: Parents complete and submit this form (**Section F**).
- ❑ *Teacher Recommendation Form for Special Services*: This form (**Section G**) should be delivered to the special education teacher who works most closely with the student. Students without a special education teacher may present the request to a core teacher. This form should be sent from the teacher directly to the Admissions Office, not returned to the student.
- ❑ *Diagnostic Information*: Current diagnostic information is required for special services admissions. Please provide current psycho-educational, neurological, or medical diagnostic reports from the appropriate professionals. Reports administered within three years are considered current. New and additional testing may be required to consider your student for admission to the program.

❑ *Individual Educational Plan (IEP)*: Submit if current and available.

❑ *Informal Screening*: The WCA Counseling Office may call to schedule a screening after the file is complete. Test time is approximately 60 minutes.

*For additional Special Services information,
please contact:*

Director of Admissions
Westminster Christian Academy
314-997-2900, ext. 119



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Application for Special Services – Section F (Parent)

This section is to be completed by parents or guardians of the applicant. Please print.

APPLICANT INFORMATION

Applicant's name _____ Applying for grade _____ for term beginning _____

Name of parent(s)/guardian(s) _____

Home address _____

Home telephone () _____ Parent's e-mail _____

Current school _____

DIAGNOSTIC INFORMATION

Diagnostic information is required. Please provide a current (within three years) educational, neurological, or medical report from the appropriate professional.

What is the applicant's diagnosis? _____

Please list all psychoeducational, behavioral, medical, and neurological evaluations, beginning with the most current:

Test Date _____ Name of the evaluator _____ Diagnosis _____

Test Date _____ Name of the evaluator _____ Diagnosis _____

Test Date _____ Name of the evaluator _____ Diagnosis _____

HISTORIC INFORMATION

1) What event or series of events caused you or your child's teacher to seek an evaluation? _____

2) Briefly describe previous school experiences and services provided (SNAP, resource room, speech and language therapy, occupational therapy, etc.). _____

3) Briefly describe the applicant's progress since diagnosis. _____

CURRENT INFORMATION

1) Describe your expectations for educational services provided at Westminster Christian Academy.

2) How much time and what kind of parental attention does the applicant require at home in order to support learning?

3) Tell us about your child. Describe strengths and challenges. What inhibits and what motivates your child?

4) Does your child have other conditions of which we should be aware (OCD, Tourette's syndrome, depression, allergies, autistic spectrum, family trauma, etc.)?

Yes No

If yes, please describe: _____

Parent Signature _____ Date _____

Westminster Christian Academy, a private educational institution, admits students of any race, color, sex, and national or ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. Westminster Christian Academy does not discriminate on the basis of race, color, sex, and national or ethnic origin in the administration of its education programs, admissions policies, financial aid programs, athletics, cocurricular activities, or other school-administered programs.

Send application to:
Director of Admissions
Westminster Christian Academy
10900 Ladue Road
St. Louis, MO 63141-8496



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Teacher Recommendation Form for Special Services – Section G

Parents: Please submit this form to the special education teacher who works most closely with the student.

Teachers: Please keep a copy of this form and send the original directly to the Director of Admissions, Westminster Christian Academy, 10900 Ladue Road, St. Louis, MO 63141-8496.

This section to be completed by the applicant's parent.

Applicant's name _____

Home address _____
Street City State Zip

Applicant's home phone number () _____ Date _____

This section to be completed by teacher.

HISTORY

School currently attending: _____ How long have you worked with this student? _____

Student diagnosis: _____

Methods, strategies, and tools effective in working with this student: _____

SERVICES (please check any services/modifications this student has received during the past year):

- Occupational Therapy
- Physical Therapy
- Resource Assistance
- Speech/Language Therapy
- Special Reading Program (indicate program: _____)
- Self-contained Instruction
- Tutoring
- English as a Second Language
- SNAP
- Other _____

MODIFICATIONS/ACCOMMODATIONS (please check all that apply):

- Study guides for tests
- Modified tests
- Modified spelling
- Word banks on tests
- Modified Bible memory
- Adapted texts
- Books on tape
- Reduced homework
- Altered due dates
- Dictation on tests/homework
- Laptop computer
- Extended time for tests
- Alternative projects/assessments ~ Specify _____
- Assistive technology ~ Specify _____
- Other ~ Specify _____

SOCIAL On a scale of 1-5 (1 being a weakness and 5 being a strength), please rate this student in the following areas:

- Impulse control
- Relationship with peers
- Self-image
- Self-control of emotions
- Ability to self-advocate
- Relationship with teachers
- Ability to accept criticism
- Shows concern for others

Additional comments on student's social skills: _____

ACADEMIC On a scale of 1-5 (1 being a weakness and 5 being a strength), please rate this student in the following areas:

- | | |
|---|---|
| _____ Reading comprehension | _____ Communication skills (verbally) |
| _____ Basic reading (decoding) skills | _____ Language processing |
| _____ Test-taking skills | _____ Processing speed |
| _____ Written expression (writing in sentence form, using topic sentences for paragraphs) | _____ Academic self-motivation |
| _____ Ability to focus on presented material | _____ Ability to work independently |
| _____ Homework/assignment completion | _____ Ability to self-advocate |
| _____ Study skills | _____ Ability to work in a group |
| _____ Time management skills | _____ Gross motor skills |
| _____ Assignment book maintenance | _____ Handwriting |
| _____ Organization of materials | _____ Math computation (computing numbers without a calculator) |
| _____ Success in meeting due dates | _____ Math reasoning (word problems, problem solving, etc.) |

Additional comments on student's academic needs: _____

CURRENT LEVEL OF PERFORMANCE (Please indicate the current level of functioning and materials for the following.)

	<u>Grade Level</u>	<u>Curriculum Used</u>
Reading Comprehension:	_____	_____
Reading Decoding:	_____	_____
Math:	_____	_____
Language Arts:	_____	_____

GENERAL QUESTIONS (please attach additional paper if needed):

Please describe your perception of the parent's role in this child's academic endeavors. _____

What would you say are this child's strengths? _____

Weaknesses? _____

How well does this child understand his/her diagnosis(es)? _____

If this child were NOT to receive special services, how well would he/she function? _____

What further information would help Westminster Christian Academy to best serve this student? _____

Your name _____ Your signature _____

Your position title _____ Phone(s) _____ E-mail _____

Thank you for your help in informing us about this applicant. You are a great resource to Westminster's teachers and counselors.

Send completed form to:
Director of Admissions, Westminster Christian Academy
10900 Ladue Road, St. Louis, MO 63141-8496

APPLYING FOR FINANCIAL AID

Families intending to apply for financial aid must submit a separate financial aid application. Apply online at: www.wcastl.org/admissions/applicationprocedures.php or contact the Admissions Office for an application.

The following elements must be included with the financial aid application.

- ❑ *Parents' Financial Statement (PFS)*: Complete and send the original PFS to *School and Student Service* (of the National Association for Independent Schools) for Financial Aid (SSS) and a copy of the PFS to Westminster Christian Academy's Director of Finance and Operations.
- ❑ *Financial Aid Application Fee*: The financial aid application fee is \$24.00. Make check payable to SSS. The application cannot be processed until the nonrefundable application fee is submitted.

- ❑ *Submit Income Tax Records*: Send copies of the family's most recent Federal Form 1040 with all accompanying schedules and a copy of the most recent W-2s to Westminster Christian Academy's Director of Finance and Operations.

Westminster Christian Academy establishes the need for financial aid through a review of your financial aid application by a Board of Directors committee whose members remain anonymous. All communication is through the business office. Please be assured that all information received remains private and confidential.

*For additional financial aid information,
please contact:*

Director of Finance and Operations
Westminster Christian Academy
314-997-2900, ext. 118

Our Mission:

WESTMINSTER CHRISTIAN ACADEMY

honors **JESUS CHRIST** by providing an
EXCELLENT EDUCATION, rooted in **Biblical Truth**
as interpreted by the Westminster Confession of Faith,
for the children of Christian parents.

Faculty and staff enable students to **DISCOVER**
and embrace a **Biblical View** of the world and
integrate that view into *every area of life*.

Westminster Christian Academy, a private educational institution, admits students of any race, color, sex, and national or ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. Westminster Christian Academy does not discriminate on the basis of race, color, sex, and national or ethnic origin in the administration of its education programs, admissions policies, financial aid programs, athletics, cocurricular activities, or other school-administered programs.



WESTMINSTER

CHRISTIAN ACADEMY

Cultivating Christian Minds and Character

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