

Stratford Classical Christian Academy
“Building a Legacy of Christian Leaders”

Do you understand that SCCA is unable to admit students with severe learning disabilities due to lack of adequate staff, funding, and facilities and that children who have been diagnosed with lesser learning disabilities are required to meet the same academic and behavior standards as all other children in their grade level? ___Yes___No

Do you understand that SCCA will not administer drugs for learning disabilities?
___Yes___No

GRANDPARENT INFORMATION:

Mother’s Parents- Grandparent’s Full Name(both) :

First Last
Home address: _____
Street City State Zip
Occupation(current or former): _____ Employer: _____
Home Phone: _____ cell phone _____ email: _____

Would they be interested in SCCA’s Grandparent’s association? ___ Yes ___No ___ Maybe
Should they be contacted in the event of an emergency? ___Yes ___ No
Do the grandparents have any legal custody over the children being enrolled? ___Yes ___ No
If Yes Please explain:

Father’s Parents- Grandparent’s Full Name (both):

First Last
Home address: _____
Street City State Zip
Occupation(current or former): _____ Employer: _____
Home Phone: _____ cell phone _____ email: _____

Would they be interested in SCCA’s Grandparent’s association? ___ Yes ___No ___ Maybe
Should they be contacted in the event of an emergency? ___Yes ___ No
Do the grandparents have any legal custody over the children being enrolled? ___Yes ___ No
If Yes Please explain:

III. FAMILY PHILOSOPHY

What do you consider to be the three most important aspects of your child’s education?
Please be specific.

1. _____
2. _____
3. _____

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Briefly explain why you wish your child(ren) to receive the Christian education offered by Stratford Classical Christian Academy.

Do you have family prayer and Bible reading in your home?

Almost daily Several times a week About once a week Not at present

Do you discipline your children? Why or why not? If yes, please describe how you administer discipline.

Do you read books to/with your child(ren)?

Most evenings Occasionally Used to Never have

If applicable, name a book(s) you have read together in the last 3 months: _____

We believe one of our greatest strengths is academic excellence. Our curriculum goals demand much effort from every student. If you found your child sinking academically, how would you respond?

We have set guidelines for homework. They are based on what we believe are reasonable, necessary amounts for most students. How much time for homework is tolerable in your family?

Students often find that high grades are harder to achieve at Stratford Classical Christian Academy. What part do grades play for you and your children? _____

How did you find out about Stratford Classical Christian Academy? _____

Explain your understanding of Classical Education? _____

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Have you read any of the following Books on Classical Christian Education or Christian Child rearing?

Note- If you have not read these books this is a good reading list for all SCCA Parents. We encourage you to build your family library as they can be purchased online at Amazon.com .

- Yes No *The Case for Classical Christian Education – Doug Wilson
- Yes No Rediscovering the Lost tools of Learning – Doug Wilson
- Yes No *The Lost tools of learning essay – Dorothy Sayers
- Yes No The Seven Laws of Teaching- John Milton Gregory
- Yes No *Excused Absence – Doug Wilson
- Yes No *Repairing the Ruins- Doug Wilson
- Yes No Shepherding a Child’s Heart- Ted Tripp
- Yes No Age of Opportunity – Paul Tripp
- Yes No Future Men – Doug Wilson
- Yes No Protocol Matters – Sandra Boswell

*These are “must reads” for parents to understand Classical Christian Education.

Other Classical Christian Books or Christian child rearing books you have read:

If you need more space to answer any of the above questions, please use additional pages and attach.

IV. CHURCH INFORMATION

Name of church father attends: _____ Pastor’s name: _____

Church phone: () _____ Member? How often you attend: _____

Why do you attend Church here?: _____

Will your pastor sign and complete the pastor’s referral form? Yes No

Church ministries in which you currently serve: _____

Name of church mother attends: _____ Pastor’s name: _____

Church phone: () _____ Member? How often you attend: _____

Why you attend: _____

Church ministries in which you currently serve: _____

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Which virtues would you most like to characterize your child?

Has your child ever had to repeat a grade(s)? _____

Has your child ever skipped a grade(s)? _____

Has your child been tested for learning disabilities? _____

Has your child ever been suspended, expelled, or asked to withdraw from any school for any reason? _____

If you answered yes for any of these, please give full particulars on a separate sheet.

Does the student take medication regularly? _____ If yes, describe: _____

FINANCIAL AID:

Do you need tuition assistance? ___ Yes ___ No

Do you need a payment plan for your tuition ___ Yes ___ No

Do you intend to complete a financial aid application? ___ Yes ___ No

VOLUNTEERING:

Would you be interested in volunteering to help within the academy? ___ Yes ___ No

If Yes which areas are you interested in helping?(Coach, Assistant Coach, Room Parent, field trip chaperone, Parent Academy Fellowship, Music Institute, Auction, Golf outing, etc...)

Is there any further information which would be beneficial to teach your child more effectively?
