



## **Application for Admission**

(Please complete one application for each student)

Office Date I	Use On	ly	·				
Registration Fee							
Check Number							
DB	Н	M	S				

Student's Name							
Student's Birth Date			N	lale	Female		
Entering Grade Level	_ New Stude	nt to Veritas	S	Returning Student			
Applying for: Humanities	M	lath		Math Level			
	S	cience		Science Le	evel		
Present or last school attended	or note if home	schooled_					
Church/Cover School							
Parents' Names							
Address			City		_ Zip		
Home Email:	me Email: County						
Phone Numbers:							
Home:	Work:			Other:			
Mom's Cell: Dad's Cell:			Student's Cell:				
In case of emergency, contact: (other than parent)							
Father Do you have a bachelo	's degree?	Yes	No				
Mother Do you have a bachelo			No				
Parent's Occupation/Employer:							
To the best of your knowledge, is the student a follower of Jesus Christ?			Family	amily Church Name:			
Student's History: Please give achievement on the back of the					_		
<u>Parent testimony</u> : Please prov Christ.	ride a parent t	testimony d	of your v	walk of faith	in the Lord Jesus		
Non-refundable registration/bool Veritas Classical School.)	c fee is enclose	ed with this	applicati	ion. (Please r	nake checks payable to		
Parent signature				Date			
Submit application and fee to:	Veritas Class	sical School	, P.O. B	ox 195, Bailey	yton, AL 35019		

Withdrawal Policy: Written notification of withdrawal is required thirty days in advance.

Financial Obligation: Once a student begins a semester, parents are obligated to pay for the entire