

ASUNCION CHRISTIAN ACADEMY

Av. Santísimo Sacramento 1180
Asunción, Paraguay
Tel: 011-595-21-604-378
academicsec@aca.edu.py



FE001E

STUDENT REGISTRATION FORM

Date: _____ Grade Assigned: _____ Recommended By: _____

The policy of the Asunción Christian Academy Board of Directors is as follows:

ASUNCIÓN CHRISTIAN ACADEMY is an educational institution with evangelical foundation that offers an American style curriculum, which is accredited through Association of Christian Schools International (ACSI), AdvancED and Ministry of Education and Science (MEC).

MISSION: *Establishing biblical principles of God's kingdom in families through academic excellence in the English Language creating agents of change to impact the world.*

VISION: *Glorify God with excellent education.*

TAGLINE: *Where Faith is shaped and minds are sharpened.*

Student Name: _____ Age: _____

Date of Birth: _____ Sex: _____
Month Day Year

Place of Birth: _____ Nationality: _____

Grade Completed: _____

School Previously Attended _____

School Address: _____

Parents Names: _____
Father Mother

Permanent Address: _____

Temporary Address: _____

E-Mail Address (1) _____ (2) _____

Mailing Address: _____ Telephone: _____

Father's Occupation: _____ Office Ph#: _____

Mother's Occupation: _____ Office Ph#: _____

Reason for Wanting To Attend Aca: _____

Sister or Brother Attending Aca (Name/Grade): _____

FAMILY RELIGIOUS INFORMATION

1. What religious faith are you practicing? _____
2. Have you had a personal conversion experience with Jesus Christ? Yes No Date: _____
3. Are you actively attending a local church? Yes No
Church Name: _____ Pastor's Name: _____
4. Are your parents actively attending a local church? Yes No
If so, which one? _____
5. What does Christ mean to you? _____

FATHER

MOTHER

By signing below, I affirm that the information contained in this registration packet is true and correct to the best of my knowledge. By signing, I also give Asuncion Christian Academy permission to check the financial records through Informconf of the person(s) signing this registration form.

Signature _____ Printed Name _____

Date: _____ ID Number: _____