

FCA Pathway Program

Application for Admission

submission of this application does not guarantee acceptance

Student Information

Student's Full Legal Name: _____

Preferred Name (if different): _____ Gender: **Male / Female**

Date of Birth: ____ / ____ / ____ Grade Applying For: _____

Student's Home Address: _____

Parent/Guardian Information

Parent/Guardian 1

First/Last Name: _____

Relationship to Student: _____ Phone #: _____

Email: _____

Employer: _____

Parent/Guardian 2

First/Last Name: _____

Relationship to Student: _____ Phone #: _____

Email: _____

Employer: _____

Previous School Information

Current/Most Recent School: _____

School Address: _____

Principal or Administrator Name (if known): _____

Dates Attended: _____

Reason for Leaving: _____

Academic & Learning Information

Has your child ever:

- Repeated a grade
- Been suspended
- Been expelled
- Been placed on academic probation
- Required an IEP or academic
- None of the above

If any are selected, please explain: _____

What are your child's academic strengths: _____

What areas are challenging for your child: _____

Spiritual & Family Background

As a Christ-centered school, we believe that spiritual growth happens most fully when students are actively involved in a local church. We strongly desire for every student enrolled in the Pathway Program to be faithfully involved in a bible believing church.

Because of this commitment, a **pastoral recommendation letter is required** as part of the application process.

Please have your pastor or church leader complete the "Pastoral Recommendation Letter" form, found at the end of this application, and email it directly to the school office. Recommendation forms submitted by families will not be accepted.

Does your family regularly attend church? **YES / NO**

If yes, name of church: _____

Has the student accepted Jesus as their Lord and Savior? **YES / NO**

If yes, at what age: _____ and have they been baptized in water? **YES / NO / NOT YET**

Why are you seeking enrollment in the FCA Pathway Program? _____

What are your expectations for a Christian school education? _____

Behavior & Conduct

Has your child had any significant disciplinary issues in the past two years? **YES / NO**

If yes, please explain: _____

Parent/Guardian Acknowledgement

Please read carefully:

FCA's Pathway Program is a ministry of Friendship Assembly and exists to provide Christ-centered education rooted in biblical truth and discipleship. Submission of this application does not guarantee acceptance. Admission decisions are made prayerfully and administratively based on academic readiness, behavioral history, and alignment with the mission of the school.

I certify that the information provided in this application is true and complete to the best of my knowledge.

Parent/Guardian Signature: _____ Date: _____

Records Release Authorization

"I authorize Freedom Christian Academy to request academic and behavioral records from the student's previous school."

Parent/Guardian Signature: _____ Date: _____

Pathway Program Tuition Information

Annual tuition may be divided into ten monthly payments throughout the school year. Please note that a 6.5% monthly interest charge will be applied to all payment plans. To avoid interest charges, families may choose to pay the full tuition amount upfront on or before August 1st.

Please note that the amount listed below does not include fees associated with enrollment, nor the monthly interest amount.

FCA Pathway Program Annual Tuition - \$3,500

Discounts

The following tuition discounts are available for the 2026/2027 school year:

- ❖ Friendship Assembly Active Church Members - 10% discount
- ❖ Active Military Parent/Guardian - 10% discount
- ❖ Minister's Discount - 10% Discount
- ❖ Multi-Child Tuition Discount:
 - 2 children enrolled - 5% discount
 - 3 children enrolled - 20% discount
 - 4 children enrolled - 25% discount
 - 5 or more children enrolled - 30% discount

These discounts apply to tuition only. For information about Extended Care fees/discounts, please ask the school office for an Extended Care enrollment form.

A maximum of two discounts may be combined per family.

Freedom Christian Academy

Pathway Program

Pastoral Recommendation Form

Student Name (First and Last): _____

Thank you for taking the time to complete this recommendation. The Pathway Program at Freedom Christian Academy partners closely with families and local churches to support students academically and spiritually. Your honest input is appreciated and will remain confidential.

Once this form is complete, please email it to the school office (admin@friendshipag.org). For confidentiality purposes, forms must be submitted by the pastor or church leader and will not be accepted through the family.

Church Name: _____

Church Address: _____

Your Name (First and Last):

Your Title/Position: _____

Phone Number: _____

Email Address: _____

Student Involvement

1. How long has this student (or their family) been attending your church?

2. Is the student regularly involved in church attendance? **YES / NO / Somewhat**

3. Is the student involved in youth ministry or other church activities? **YES / NO**

If yes, please describe briefly: _____

Spiritual & Character Assessment

Please rate the student in the following areas:

Spiritual maturity:

- Strong
- Growing
- Limited evidence

Personal responsibility / initiative:

- Strong
- Developing
- Needs improvement

Respect for authority:

- Consistent
- Generally respectful
- Needs improvement

Influence on peers:

- Positive influence
- Neutral
- Needs

Recommendation

Do you recommend this student for enrollment in the Pathway Program?

- Yes, without reservation
- Yes, with minor concerns
- With reservation
- I do not recommend at this time

Additional comments (if necessary): _____

Date: _____

Pastor/Church Leader Signature: _____