



**Greater Grace Christian Home School**

**2010 – 2011 APPLICATION FORM**

**STUDENT information**

Name \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_  
Age \_\_\_\_ Sex \_\_\_\_ Grade Level for the 2110-2111 school year \_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
County \_\_\_\_\_  
Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Email \_\_\_\_\_

Please provide a brief history of the student's academic history and your reason for choosing this home schooling option:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Who will be the primary teacher for this student? \_\_\_\_\_

**PARENT/Legal Guardian information:**

Name \_\_\_\_\_ Spouse's Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Work Phone \_\_\_\_\_  
E-Mail Address \_\_\_\_\_

Please enclose a check for \$25.00 made payable to Greater Grace Christian Academy and mail, fax or deliver this application to:

Greater Grace Christian Academy  
6077 Moravia Park Drive  
Baltimore, Maryland 21206  
Fax Number: 410-325-8884