



Bruce Institute of Higher Learning
Admissions Application

My child, listen to me and hear my instructions. Tune your ears to wisdom and concentrate on understanding. Cry out for insight and understanding. Search for them as you would for lost money or hidden treasure. Then you will understand what it means to fear the Lord, and you will gain knowledge of God. Proverbs 2: 1-3

| | |
|---|---------------------------|
| Mother's Name _____ | Father's Name _____ |
| Social Security No. _____ | Social Security No. _____ |
| Address _____ _____ | Address _____ _____ |
| Home Phone Number _____ | Home Phone Number _____ |
| Place of Employment _____ | Place of Employment _____ |
| Work Number _____ | Work Number _____ |
| Cell Phone _____ | Cell Phone _____ |
| Pager _____ | Pager _____ |
| E-mail address _____ | E-mail address _____ |
| Emergency Contact(s) Name _____ Home Number _____ Work Number _____ | |
| Name _____ Home Number _____ Work Number _____ | |
| Name _____ Home Number _____ Work Number _____ | |
| Pediatrician/Family Doctor _____ Phone Number _____ | |
| Persons allowed to pick child up from school _____ _____ | |

Student Registration – School Year 2009 - 2010

| <u>Child's Name</u> First, Middle, Last | <u>Birth Date</u> | <u>Age</u> | <u>Grade Level</u> | <u>List all allergies/medical conditions</u> |
|--|-------------------|------------|--------------------|--|
| 1. | | | | |
| 2. | | | | |
| 3. | | | | |
| 4. | | | | |

Please attach copy of birth certificate, insurance card (private school students), medical records verifying current physical screening and immunizations, or a letter giving religious reasons for exemption.