

# APPLICATION FORM

## HUDSON VIEW CHRISTIAN ACADEMY



170 Hudson Terrace | Yonkers, New York 10701 | Tel: 914-968-7047 | Fax: 914-423-8865 | [www.hudsonviewbaptistchurch.org](http://www.hudsonviewbaptistchurch.org)

### STUDENT INFORMATION

Student Name: \_\_\_\_\_ Preferred Name: \_\_\_\_\_  
                                 First                                  Middle                                  Last

Primary Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Gender:  Male           Female

I am applying for the 20\_\_\_\_/20\_\_\_\_ school year. I am applying for the following grade:

- |                              |                              |                              |                              |                               |                               |                               |
|------------------------------|------------------------------|------------------------------|------------------------------|-------------------------------|-------------------------------|-------------------------------|
| <input type="checkbox"/> K4  | <input type="checkbox"/> K5  | <input type="checkbox"/> 1st | <input type="checkbox"/> 2nd | <input type="checkbox"/> 3rd  | <input type="checkbox"/> 4th  | <input type="checkbox"/> 5th  |
| <input type="checkbox"/> 6th | <input type="checkbox"/> 7th | <input type="checkbox"/> 8th | <input type="checkbox"/> 9th | <input type="checkbox"/> 10th | <input type="checkbox"/> 11th | <input type="checkbox"/> 12th |

### FAMILY INFORMATION

#### Father

Name: \_\_\_\_\_  
 Cell Phone: \_\_\_\_\_  
 Work Phone: \_\_\_\_\_  
 Occupation: \_\_\_\_\_  
 Employer: \_\_\_\_\_  
 E-mail Address: \_\_\_\_\_  
 Marital Status: \_\_\_\_\_  
 Student lives with: \_\_\_\_\_  
 Address if different than that of the applicant:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

#### Mother

Name: \_\_\_\_\_  
 Cell Phone: \_\_\_\_\_  
 Work Phone: \_\_\_\_\_  
 Occupation: \_\_\_\_\_  
 Employer: \_\_\_\_\_  
 E-mail Address: \_\_\_\_\_  
 Marital Status: \_\_\_\_\_  
 Student lives with: \_\_\_\_\_  
 Address if different than that of the applicant:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Names and grades of applicant's siblings:  
 \_\_\_\_\_  
 \_\_\_\_\_

Name and address to whom grades and financial statements should be sent:  
 \_\_\_\_\_  
 \_\_\_\_\_

#### REGISTRATION FEES

Application Fee:            \$25.00  
*\*If you choose to enroll your child(ren) in our school, this amount of \$25.00 will be deducted from one of the registration fees.*

Registration Fee:          \$80.00

Please note that all fees are non-refundable.

#### OFFICE USE ONLY

App. Fee: \_\_\_\_\_  
                                 Check #                                  Date

Interview: \_\_\_\_\_  
                                 Time                                  Date

Accepted: \_\_\_\_\_  
                                 Yes/No                                  Date

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## RELIGIOUS INFORMATION

Church Attending: \_\_\_\_\_

Church Address: \_\_\_\_\_

Pastor's Name: \_\_\_\_\_

How often does the applicant usually attend church during the week?  0  1  2  3  4 Times a week

Is the applicant a member of the church?  Yes  No How Long? \_\_\_\_\_

Has the applicant ever made a profession of faith in Christ?  Yes  No

How often does the father usually attend church during the week?  0  1  2  3  4 Times a week

Is the father a member of the church?  Yes  No How Long? \_\_\_\_\_

Has the father ever made a profession of faith in Christ?  Yes  No

How often does the mother usually attend church during the week?  0  1  2  3  4 Times a week

Is the mother a member of the church?  Yes  No How Long? \_\_\_\_\_

Has the mother ever made a profession of faith in Christ?  Yes  No

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## SCHOLASTIC/ DISCIPLINARY INFORMATION

School Currently Attending: \_\_\_\_\_

School Phone Number: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

**Please provide the applicant's most recent report card along with the completed application for interview purposes.**

Has the student ever been expelled, dropped, or suspended by another school?  Yes  No

Has the student ever been diagnosed with or tested for learning disabilities?  Yes  No

Has the student ever had disciplinary difficulty at school?  Yes  No

Does the student have a juvenile or police record?  Yes  No

Has the student ever used tobacco or illegally used drugs of any kind?  Yes  No

How did you find out about our school?  Advertisement  Website  Friend  Other: \_\_\_\_\_

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*We, hereby, affirm that the information provided on this form is accurate and truthful to the best of our knowledge.*

Father's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Mother's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Please mail your completed application and pastoral reference along with the application fee of \$25.00 to Hudson View Christian Academy located at 170 Hudson Terrace, Yonkers, NY 10701. If your child is accepted, the application fee will be applied to the total family registration fee. An interview with the parents and student(s) is required before admission to the academy can be granted.**



## THEOLOGY

	Yes	No	Not Sure	Other
Was Jesus unquestionably born of a virgin?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was Jesus' physical body raised from the dead?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Will Muslims sincerely believing in Allah go to heaven?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Did God create the world in six literal days?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was Jonah literally swallowed by a great fish?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Do you believe God elects some people to hell?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is Jesus Christ God in the 2nd Person of the Trinity?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is it possible that man evolved from lower life?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is sprinkling an acceptable mode of baptism?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is water baptism only after salvation?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Do you believe in eternal security?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is there a second "spirit" baptism after salvation?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are you pre-tribulation only in your view of the rapture?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is homosexuality a sin?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is the gift of tongues or healing a gift for today?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Does unrepentant sin enact church discipline?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is hell's fire literal and eternal?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
May a woman be a pastor or elder?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Does divorce disqualify a pastor?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Do you believe in "Irresistible Grace"?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is the office of apostle for today's church?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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## THE SCRIPTURES

	Totally Agree	Generally Agree	Don't Know	Generally Disagree	Totally Disagree
I believe in the word-for-word total Inspiration of the Bible.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I believe every book of the Bible was given without error by God.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I believe there are other "bibles" inspired by God (i.e. Koran, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I would use the following versions in study or would recommend them to others:

- |  |  |
|--|--|
| <input type="checkbox"/> King James Version    | <input type="checkbox"/> English Standard Version                  |
| <input type="checkbox"/> Living Bible          | <input type="checkbox"/> New World Translation (Jehovah's Witness) |
| <input type="checkbox"/> New American Standard | <input type="checkbox"/> The Message                               |
| <input type="checkbox"/> Duay (RCC) Versions   | <input type="checkbox"/> New International Version                 |
- 

## HOME LIFE

What activities are not allowed nor present in your home?

- Alcoholic Consumption  Smoking  Drugs  Dances  Pornography  Cursing

What movie ratings do you allow in your home? \_\_\_\_\_

How often do you attend movie theaters in a year? \_\_\_\_\_

How strictly do you control your child's T.V. viewing? (Circle: 1 being "Very Strict", 5 being "Not at all")    1    2    3    4    5

Do your children have access to the Internet at Home?  Yes  No  Limited    Is it filtered?  Yes  No

Which of the following types of music is totally and purposely banned in all form in your home?

- Hip Hop  Southern Gospel  Jazz  Contemporary Christian  Christian Rock  Secular Rock  Rap  None

# PASTORAL RECOMMENDATION

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Name of Applicant: \_\_\_\_\_

Names of Parents: \_\_\_\_\_

Pastor's Name: \_\_\_\_\_ Church's Name: \_\_\_\_\_

Church Address: \_\_\_\_\_

Church Phone Number: \_\_\_\_\_ Church's Denomination: \_\_\_\_\_

**TO THE PASTOR:** The above applicant is applying for admission to Hudson View Christian Academy, a Christian school whose goal is to train boys and girls to surrender their lives to God in accordance with the sound doctrine found in the Word of God as taught by Hudson View Baptist Church. In this process, we desire to provide a sound educational training that will prepare them for the world in which they live. HVCA is only interested in training young people who are interested in the spiritual environment established by Hudson View Baptist Church. Please complete and send or fax this confidential form to the academy at your earliest convenience. Thank you.

1. How long have you know the applicant? \_\_\_\_\_

2. Is the applicant born-again? \_\_\_\_\_

3. Is the applicant a member of your church?  Yes  No

4. Are the parents members of your church? Father:  Yes  No Mother:  Yes  No

5. Does the applicant attend church regularly?  Yes  No How many times in a four week period? \_\_\_\_\_

6. How would you describe the applicant's spiritual and social life? \_\_\_\_\_

7. Does the applicant respond well to authority (including parents)?  Yes  No

8. How would you rate the applicant's Christian character?  Above Average  Average  Below Average

9. Do you feel this family may need financial aid?  Yes  No

10. In what activities is the applicant involved in at your church? \_\_\_\_\_

11. Would you recommend that we accept this applicant?  Yes  No  Questionable

12. Are there any comments you feel would help us in determining the applicant's possible success or failure at HVCA?

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Day Phone: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Evening Phone: \_\_\_\_\_