



MESQUITE CHRISTIAN ACADEMY

2026 -2027 Academic Year

APPLICATION

STUDENT INFORMATION

Full Name: _____ Male Female

Student Goes By: _____ Date of Birth: _____

Address: _____ Home Phone: _____

City/State/Zip: _____

FAMILY INFORMATION *(For school year of application)*

Father, Stepfather, Grandfather, Guardian
(With whom student resides)

Mother, Stepmother, Grandmother, Guardian
(With whom student resides)

Name _____

Name _____

Occupation _____

Occupation _____

Employer _____

Employer _____

Work Phone _____

Work Phone _____

Cell Phone _____

Cell Phone _____

E-Mail _____

E-Mail _____

Marital Status in home: Married Divorced Separated Remarried Widowed Single

If parents are divorced or separated, who has legal custody of student? _____

If divorced, should birth parent be placed on mailing list? Yes *(If yes, indicate name and address below.)* No

Name _____

Mailing Address _____

Email _____ Home Phone _____

OTHER INFORMATION *(For statistical purposes)*

African American Native American Caucasian Hispanic Asian Pacific Islander Other

Nondiscrimination policy: Mesquite Christian Academy admits students of any race, color, national and ethnic origin to all rights, privileges, programs and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color or national or ethnic origin in the administration of its educational policies, admissions policies, scholarship and loan programs, and athletic and other school administered programs.



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APPLICATION (Continued)

SIBLING INFORMATION *(For school year of application)*

Sibling's Name _____ #2 _____

#3 _____ #4 _____

Church Name _____ Phone _____

Are you active in church? Yes No

Pastor's name _____

EDUCATIONAL HISTORY

Reason for applying _____

School Name _____ Dates Attended _____

Address _____ Phone _____

School Name _____ Dates Attended _____

Address _____ Phone _____

- Has student repeated any grades? Yes No
- Experienced learning difficulties in reading? Yes No
- Experienced learning difficulties in math? Yes No
- Participated in a special learning program? Yes No
- Experienced discipline problems? Yes No
- Placed on probation? Yes No
- Attended summer school? Yes No
- Received tutoring? Yes No
- Participated in gifted program? Yes No
- Ever been suspended? Yes No
- Ever been expelled? Yes No
- Ever tested for learning difficulties, received an IEP or needed special academic, physical or behavioral accommodations? Yes No

If yes, Please explain and attach testing results:



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APPLICATION (Continued)

STUDENT MEDICATIONS

Is student applicant taking medications to improve his/her ability to function in the classroom?

Yes No

If yes please explain:

STATEMENT OF COOPERATION

We have read the Mesquite Christian Academy parent responsibility agreement and by our signatures we acknowledge and agree to support the philosophy, the Statement of Faith, the policies and procedures outlined in the Student Handbook and the mission of the school. We accept our obligation before the Lord to support the school through tuition, gifts, by service and in prayer.

Father/Guardian Signature _____ Date _____

Mother/Guardian Signature _____ Date _____

MCA is operated as an "Exempt School" under the provisions of NRS 394.211 and is exempt from the provisions of the Private Elementary and Secondary Education Authorization Act.