

Stockdale Christian School's
Private Satellite Program (PSP) Application

SCS Application _____
Application Fee _____
HSLDA _____
Cum Folder Rec'd _____

Family Name _____

Please describe your reasons for and commitment to home education:

Please list the students to be enrolled in the PSP:

Name	Age	Grade Entering	Last School
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Please list the curriculum you intend to use:

(Continued on other side)

Teacher Qualifications

SCS is required by state law to have teacher qualifications on file.
Please complete the following for each person who will be instructing your student.
You may duplicate this form as needed.

Full Name _____ Birthdate _____

Street Address _____

City/Zip _____

Phone Numbers _____

E-Mail Address _____

High School _____ City, State _____

Highest Grade Completed _____ Diploma or GED? Y N Date Awarded _____

Degrees/Credentials _____

All Relevant Teaching Experience _____

Home School Training _____

Ongoing Education (include reading, research, periodicals, seminars, conferences)

If you have been reported to the Department of Social Services or convicted on a crime against children, please explain on a separate piece of paper and include court documents.

Our policy requires that both parents must agree regarding the decision to home school.

Please sign below indicating agreement and that the above information is accurate.

Father

Mother