Forcey Christian School - Application for Admission

STUDENT INFORMATION	V				Please	PRINT
Applying for Grade (circle one):		PK3, Full Day T/	TH	ı	PK3, Half Da	y T/TH
PK4, Full Day M-F		PK4, Full Day M/W/F		PK	PK4, Half Day M/W/F	
Kdg 1st	2nd 3rd	4th	5th	6th	7th	8th
Applying for School Year			Application Date			
Last Name	First Nar	ne	Middle Name		Prefers to b	e called
Street Address		Apt. #	City	State	Zip	
Gender (M/F)		Language spoke	n in the home			
Data of Pirth		Race/Ethnicity:	African	African-Amer		can
Place of Birth			Asain	Caucasian	His	panic
Age			Native A	merican	Bi-	Racial
FATHER/GUARDIAN INF	ORMATION					
Last Name	Firs	t Name				
Street Address		Apt. #	City	State	Zip	
	participate in the eme	•	se add your cell phone car		•	
Ното	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
Cell		Co	. II. 6			
Email						
Place of Employment						
Job Title						
MOTHER/GUARDIAN IN						
Last Name	Firs	t Name				
Street Address		Apt. #	City	State	Zip	
If you would like to	participate in the eme	rgency text alerts, plea	se add your cell phone car	rier to the cell phone	number.	
Home			Work			
Cell		Ce	ell Carrier			
Email						
Place of Employment						
Job Title						
FINANCIAL RESPONSIBL	TY					
Last Name	Firs	t Name	Ph	one Number		
Street Address		Apt. #	City	State	Zip	

LIVING SITUATION						
Parents are:						
Married and Living Togeth	ner	Separated		Divorced		
SingleOne Pa	One Parent Deceased		Natural Parent and Step-Parent			
Student legally resides with:	udent legally resides with: Both Parents		– Mother Father			
Joint Custody, if divorced (Please provide address and phone number of other parent.)						
Last Name	First Name			Phone Number		
Street Address	Apt.	#	City	State	Zip	
Are there any unusual factors in	the child's life? (A	Absence of fa	ather or mo	other. invalidism o	of either. in-laws or	
grandparents in the home, unus	•				,	
Comment:						
If there are other children in you	ır family, please c	omplete the	following:			
_						
Name	Age	Grade	School			
Name	Age	Grade	School			
Name	Age	Grade	School			
EMERGENCY INFORMATION						
In the event of illness or emerge	ncy and parents of	can not be re	eached, we	should notify (an	adult who speaks	
English):						
1.		Dolotion	chin	Dhane		
First and Last Name 2.		Relation	silib	Phone		
First and Last Name		Relation	ship	Phone	9	
EDUCATIONAL INFORMATION						
Please list schools your child has	attended (if appl	licable):				
School	Address/C	ity/State/Zip)	Phone	Grades Attended	
Student's grades have been:	Superior			Average	Below Average	
Has your child ever failed a grade? If yes, state grade and date:						
Has your child ever had an Individual Education Plan (IEP) or 504 plan, received speech/language services, support from a reading, math or resourse specialist or other support services (i.e. occupational theragy)?						

If so, please explain
*FCS has some support services, but they are not extensive. Both school and family need to be comfortable with our ability to meet yo child's needs, and full disclosure of information will facilitate that process. Any such documentation needs to be on file with the schoprior to the first day of attendance.
Has your child been expelled, suspended, voluntarily withdrawn or denied re-enrollment at any
school? If yes, please note which one applies and give details
Physical limitations/problems
Has your child, to your knowledge, used any type of drugs, alcohol, tobacco, or has he/she ever been
in any type of trouble with the law?
Describe your child's interest, talents, abilities:
If applicable, why is your child transferring from his/her present school?
Why do you want your child to attend FCS?
CHURCH ATTENDANCE
Name of church or parish that you attend?
Denomination
What is the frequency of the parent's/guardian's church attendance?
WeeklyFrequentlyInfrequently
What is the frequency of your child's church attendance?
WeeklyFrequentlyInfrequently
THIS SECTION FOR GRADES 6 - 8 ONLY
According to the admissions policies of the school, at least one parent and the child must be committed to Jesus Christ as his/her Savior and must be a regular attendee in good standing in a Bible-believing church. Does your family meet this stipulation? What is the child's relationship to Jesus Christ?
What is the child's father/guardian relationship to Jesus Christ?
What is the child's mother/guardian relationship to Jesus Christ?

^{*}Please complete and return Self, Parent, and Teacher Evaluations

AGREEMENT

Have you read the Philosphy of Education of FCS & do you desire this educaiton for your child?

By signing this application, you are stating that you are personally in agreement with and committed to the basic tenets of historic, orthodox Christianity listed below?

- a. God is a Triune God the Father, Son, and Holy Spirit.
- b. The Bible is God's infallible and authoritative Word to humanity. It is the only standard by which faith and practice are to be measured.
- c. The chief end of man is to glorify God and enjoy Him forever.
- d. People are created in the image of God. Through His relationship to Adam, man is a sinner by nature and does himself practice sin. He is thus alienated from God, his neighbot, and the world. All are sinners.
- e. Jesus Christ is the only Savior of sinners, the only way to the Father. He died as a substitute for sinners and was raised from the dead so that they might be reconciled to God.
- f. Eternal life is a free gift that is received through faith in Jesus alone. Eternal life is neither deserved by anyone nor can it be earned by good deeds.

If your child is accepted, your signature on this application is your promise to:

- Support the school and its policies concerning dress, conduct, and all othe rmatters?
- Assume the responsibility for your child's education by supervising assigned homework, keeping
 in regular contact with your child's teachers, and guiding your child toward Godly character?
- Support to the best of your ability the various activites of the school?
- Support to the best of your ability the school's entire program?

For personal reference, please list the name of your clergyman:

Last Name	First Name	I	Phone Number		
Street Address	Apt. #	City	State	Zip	
Father/Guardian Signature			Da	ate	
Mother/Guardian Signature			Da	nte	
FCS admits students of any race, of available to students of the school administration of its educational programs.	l. It does not discriminate	on the basis of race,	color, national and	ethnic orgin in the	
How did you hear about Forcey	Christian School?				
FOR OFFICE USE ONLY					
Registration fee paid: Da	ce Chec	k #			
If check includes more than one	e student: Check #		Total \$		