

# NEW STUDENT APPLICATION



**EMMANUEL**  
CHRISTIAN SCHOOL

# APPLICATION TO EMMANUEL CHRISTIAN SCHOOL

## OFFICE USE ONLY

Account # \_\_\_\_\_  
 Date Rec'd \_\_\_\_\_ T: \_\_\_\_\_  
 GENERAL INFORMATION  
 Reg. \_\_\_\_\_  
 S.F. \_\_\_\_\_  
 T. \_\_\_\_\_ X \_\_\_\_\_  
 Date \_\_\_\_\_

**TO BE FILLED OUT BY PARENT (one per student):**

Student's Name \_\_\_\_\_  
(PRINT) Last Name First Name Full Middle Name  
 Grade to enter (circle one) K4 K5 1 2 3 4 5 6 7 8 9 10 11 12  
 Present Address \_\_\_\_\_  
 \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Phone \_\_\_\_\_ Date of Birth (MM/DD/YYYY) \_\_\_\_\_ Race \_\_\_\_\_ Gender \_\_\_\_\_  
 E-mail \_\_\_\_\_ Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Place of Birth \_\_\_\_\_ Birth Certificate # \_\_\_\_\_  
City County State

Have you ever attended Emmanuel Christian School before? \_\_\_\_\_ If so, when? (20\_\_\_\_ to 20\_\_\_\_)

Name of school last attended \_\_\_\_\_

Address of school last attended \_\_\_\_\_

Has the applicant ever failed a grade? \_\_\_\_\_ If so, why? \_\_\_\_\_

Has applicant ever had any serious problem in school? \_\_\_\_\_ If so, please explain. \_\_\_\_\_

Has applicant ever been expelled from school? \_\_\_\_\_ If so, why? \_\_\_\_\_

Does the applicant have any mental, physical, or social challenges? \_\_\_\_\_ If so, please explain. \_\_\_\_\_

Father's Name \_\_\_\_\_ Occupation \_\_\_\_\_

Mother's Name \_\_\_\_\_ Occupation \_\_\_\_\_

Father's Business Address \_\_\_\_\_ Phone \_\_\_\_\_

Mother's Business Address \_\_\_\_\_ Phone \_\_\_\_\_

Other Children enrolled in Emmanuel Christian School:	Other children in family:
Name                      Age    Grade	Name                                      Age
_____	_____
_____	_____
_____	_____

What church does the family attend at the present time? \_\_\_\_\_

How frequently do you attend services? Sunday AM \_\_\_\_\_ Sunday PM \_\_\_\_\_ Midweek \_\_\_\_\_

Is Father (or stepfather) a Christian? Y/N \_\_\_\_\_ Mother (or stepmother)? Y/N \_\_\_\_\_ Applicant? Y/N \_\_\_\_\_

On what do you base your answer? \_\_\_\_\_

Student lives with (please check): Father and Mother \_\_\_\_\_ Father only \_\_\_\_\_ Mother only \_\_\_\_\_ Guardian \_\_\_\_\_

How did you find out about Emmanuel Christian School? \_\_\_\_\_

Why do you wish to send your child to Emmanuel Christian School? \_\_\_\_\_

**PLEASE READ, SIGN AND DATE THE ATTACHED "STATEMENT OF COOPERATION" AND TURN IN WITH THIS APPLICATION.**

# STATEMENT OF COOPERATION

1. It is hereby understood that we, the parents/guardians, will pay all applicable fees and tuition for the amounts stated on the ECS Finance Information Sheet and the ECS Student Handbook no later than the last day of school and that our child(ren) will not be promoted to the next grade or receive a report card until payment is made. We understand that our child's records will not be released to another school until we have paid all applicable fees and tuition. We understand that if our child(ren) enters ECS after the beginning of the school year, the tuition will be prorated according to the policies of ECS. We understand that the due date for each payment is the 10<sup>th</sup> of the month and a \$25.00 fee will be added to the bill for any returned checks.
2. The teacher and administration is hereby given full discretion in the discipline of our child(ren). This includes but is not limited to the issuing of a detention, suspension, or expulsion from the school program. A detention may be used after school for various offenses, and transportation will fully be our responsibility. We will be notified of any detention.
3. We understand that the school reserves the right to dismiss our child(ren) if they do not cooperate with the educational process or abide by ECS guidelines. If our child(ren) is dismissed for any reason, all fees and any tuition through the current month will not be refunded.
4. We will notify Emmanuel Christian School in advance before withdrawing our child(ren). Withdrawal forms must be completed and all fees paid before any records will be released. If we withdraw our child(ren) before the end of the school year, we are still responsible for one month's tuition per student plus a \$200 early withdrawal fee per student.
5. In making application for our child(ren), it is our desire to have him/her attend the school year 20\_\_\_\_\_ to 20\_\_\_\_\_. It is also our understanding that the policy for the school is to make no refunds on fees. We also give permission for our child(ren) to take part in all school activities, including but not limited to sports, and school-sponsored trips away from the school premises, and absolve the school from liability to us or our child(ren) because of any injury to our child(ren) at school or during any school activity. In case of accident or serious illness, we request the school to contact us. If the school is unable to reach us, the school may make whatever arrangements deemed necessary.
6. I understand that the administration may choose use photographs/videos of my child(ren) to post on websites or advertising materials either during or after my child's enrollment at ECS. I hereby give my permission unless I have written a letter to the school requesting otherwise.

I, (print your name) \_\_\_\_\_, have read the Statement of Cooperation, know the rules and regulations of the school, am in full agreement with the policies and standards, and will exhibit the right spirit and attitude in supporting the school and its activities.

\_\_\_\_\_  
Parent/Legal Guardian Signature Date

\_\_\_\_\_  
Parent/Legal Guardian Signature Date

\_\_\_\_\_  
Student(s) Signature (Grades 4<sup>th</sup>-12<sup>th</sup>) Date

