



Admissions Application

Date ____/____/____

Applicant's Legal Name _____ Goes by: _____
First Middle Last

Social Security # ____/____/____ Birth date ____/____/____ Age ____ Sex ____ Race ____

Current School _____ City/State _____ Phone _____

Current grade or (if applying in summer) last grade completed ____ Reason for desired transfer _____

Church your family attends _____ Denomination _____ Student cell number _____

Student e-mail address _____ I was referred to CCS by _____ Relationship _____

Admissions Request

Elementary: K5 ____ 1st ____ 2nd ____ 3rd ____ 4th ____ 5th ____

Middle/High: 6th ____ 7th ____ 8th ____ 9th ____ 10th ____ 11th ____ 12th ____

Family Information

Please check all that apply: Parents Married Parents Separated Parents Divorced Father Deceased Mother Deceased

Student lives with: Both Parents Father Mother Other _____

Financially responsible: Both Parents Father Mother Other _____

Father / Guardian

Name _____

Relationship to applicant _____

Address _____

City, State, Zip _____

County _____

Home Phone _____

Cell Phone _____

Email _____

Occupation _____

Employer _____

Work Address _____

Work Phone _____

May child be released to father? _____
(If NO, documentation is required for file.)

Mother / Guardian

Name _____

Relationship to applicant _____

Address _____

City, State, Zip _____

County _____

Home Phone _____

Cell Phone _____

Email _____

Occupation _____

Employer _____

Work Address _____

Work Phone _____

May child be released to mother? _____
(If NO, documentation is required for file.)

Brothers and/or Sisters at CCS

Name & Grade

Name & Grade

OFFICE USE ONLY

Re-Enrolling New Student Test Date ____/____/____ Interviewed Referral Start Date ____/____/____

Student ID _____ Entered: E ____ RW ____ C ____ Paid \$ _____ Csh/CC /Ck# _____ Coupon SA ____ Other _____

Authorized Emergency/Release Contact Information

Please add those who have permission to pick up your student from school (other than parents/guardians).
Your student will **ONLY** be released to those listed below.

Name _____

Name _____

Relation _____ Home Phone _____

Relation _____ Home Phone _____

Work Phone _____ Cell Phone _____

Work Phone _____ Cell Phone _____

____ Pick up Only ____ Emergency Contact Only ____ Both

____ Pick up Only ____ Emergency Contact Only ____ Both

Name _____

Name _____

Relation _____ Home Phone _____

Relation _____ Home Phone _____

Work Phone _____ Cell Phone _____

Work Phone _____ Cell Phone _____

____ Pick up Only ____ Emergency Contact Only ____ Both

____ Pick up Only ____ Emergency Contact Only ____ Both

Name _____

Name _____

Relation _____ Home Phone _____

Relation _____ Home Phone _____

Work Phone _____ Cell Phone _____

Work Phone _____ Cell Phone _____

____ Pick up Only ____ Emergency Contact Only ____ Both

____ Pick up Only ____ Emergency Contact Only ____ Both

Additional Student Information

Has the student ever repeated a grade? **YES** **NO** Grade repeated _____ Reason for repeating: _____

Has the student ever been diagnosed with learning, social, physical, or emotional disorders which may affect activities or progress (i.e., attention or focusing issues, dyslexia, physical limitations, specific learning disorder, speech impairment, etc.)? **YES** **NO**

Please explain: _____

Has the student ever had a diagnostic psychological or educational evaluation (results must be furnished to CCS)? **YES** **NO**

Has the student ever attended a school or participated in a program designed for students who have special academic needs or abilities (including but not limited to speech and language therapy, occupational therapy, resource or collaborative services, gifted program)?

YES **NO** If yes, please list the type, location and dates of participation in these programs: _____

Does the student have any medical concerns of which CCS should be aware? **YES** **NO**

Please list: _____

To the best of my knowledge, the information in this application is true and accurate. The applicant desires to be a student at CCS.

Signature of Parent

Date

Signature of Parent

Date

Community Christian School 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, national and ethnic origin in administration of its educational policies, admissions policies, scholarship and local programs, and athletic and other school-administered programs.