

GRACE

CHRISTIAN SCHOOL

4619 Mackinaw Road ■ Saginaw, MI 48603-2197

OFFICE: 989.793.2129 ■ FAX: 989.793.2125

Application for Admission

STUDENT INFORMATION

Date: _____

Student's Full Name: _____ Grade Applied For: _____

Name Student Uses: _____ Date of Birth: _____

Place of Birth: _____ Sex: M or F Age: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____ Home Phone: _____

Special Interests: _____

Physical Disabilities: _____

Personality Traits: *(check all that apply)*

- | | | | | |
|---------------------------------------|--------------------------------------|--------------------------------------|------------------------------------|--|
| <input type="checkbox"/> Well Behaved | <input type="checkbox"/> Mischievous | <input type="checkbox"/> Obedient | <input type="checkbox"/> Fearful | <input type="checkbox"/> Temperamental |
| <input type="checkbox"/> Responsible | <input type="checkbox"/> Domineering | <input type="checkbox"/> Considerate | <input type="checkbox"/> Extrovert | <input type="checkbox"/> Introvert |
| <input type="checkbox"/> Aggressive | <input type="checkbox"/> Confident | <input type="checkbox"/> Boisterous | <input type="checkbox"/> Forgetful | <input type="checkbox"/> Strong-Willed |

FAMILY INFORMATION

Child lives with: Natural Parents Mother/Step-Father Father/Step-Mother
 Mother only Father only Legal Guardian, Relationship: _____

Father / Step-Father / Guardian's Name:

Name: _____

Occupation: _____

Employer: _____

Work Phone: _____ Pager: _____

Please answer with Yes or No:

Have you been divorced? _____

Are you separated? _____ Remarried? _____

Mother / Step-Mother / Guardian's Name:

Name: _____

Occupation: _____

Employer: _____

Work Phone: _____ Pager: _____

Please answer with Yes or No:

Have you been divorced? _____

Are you separated? _____ Remarried? _____

Other Children – Names:

Age:

Boy/Girl

School Attending:

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

TUITION/FEE PAYMENT OPTIONS

All fees and tuition are payable at the beginning of the school year. A \$25.00 late fee will be applied to all payments received ten (10) days after the due date. If payments are not made in a timely manner, the parents/guardians may be asked to withdraw their child(ren) from GCS.

Please check one payment option

- ONE PAYMENT** – One (1) payment of Tuition and Curriculum/Activity Fee paid in full before September 1st. (A 3% Discount on Tuition only is offered with this option.)
- TWO PAYMENTS** – Two (2) equal payments of Tuition and Curriculum/Activity Fee paid before September 1st, and before January 1st.
- TEN EQUAL PAYMENTS PLUS CURRICULUM/ACTIVITY FEE** – Ten (10) equal monthly payments (August – May) on Tuition only. The Curriculum/Activity Fee is paid separately before July 1st.
- TWELVE EQUAL PAYMENTS** – Twelve (12) equal monthly payments (June – May) on Tuition and Curriculum/Activity Fee.
- CHOICE OF PAYMENT DUE DATE** – (Please check one payment option)
- 1st of the Month – or – 15th of the Month

The following must be included in order for this application to be processed:

1. Enrollment Fee
2. Copy of student's birth certificate
3. Copy of student's immunization record
4. Copy of student's most recent report card (if applicable)
5. Copy of diagnostic testing report (if student has been tested for learning disabilities, etc.)
6. Copy of student's discipline report (if applicable)

FOR OFFICE USE ONLY

Date Received: _____ Rejected: _____

Amount Paid: _____ Withdrew: _____

Cash Check #: _____ Refund: _____

Enrollment Curriculum/Activity Fee Tuition Student's Grade: _____

Grace Christian School admits students of any race, color, nationality or ethnic origin to all rights, privileges, programs, and activities generally accorded or made available to students at the school. Grace Christian School does not discriminate on the basis of race, color, nationality or ethnic origin in the administration of its educational policies, admission policies, scholarships, athletic or other school administered programs.

Why do you desire to enroll your child in a Christian School? _____

Who recommended GCS to you or how did you become interested in GCS? _____

Grade last attended: _____ Any grade(s) repeated? No Yes Grade Average: _____

Give the names of all schools attended: *(begin with the previous year)*

School Name: _____	Grade(s): _____	Reason for change in school: _____
_____	_____	_____
_____	_____	_____

Has the student ever been evaluated or referred for evaluation for learning difficulties? No Yes
If yes, please give details including date(s) of evaluation. Include a copy of the most recent evaluation.

Has the student ever been evaluated or referred for evaluation for ADD, ADHD, or any behavior disorders? No Yes
If yes, please be prepared to give details when interviewed.

Has the student received tutoring or other special services? No Yes

Has the student ever been disciplined beyond the normal classroom situation, suspended, or expelled from any school?
 No Yes If yes, a school's student discipline report must be included with their school records.

Please explain: _____

SPIRITUAL INFORMATION

Spiritual status of your child: Saved Unsaved If Saved, explain how and when your child was Saved:

Explain what your child's attitude is toward God, church, and spiritual things. _____

Weekly Church Attendance: *(check all that apply)*

Sunday School:	YES	NO		YES	NO		YES	NO
Father/Step-Father/Guardian	<input type="checkbox"/>	<input type="checkbox"/>	Mother/Step-Mother/Guardian	<input type="checkbox"/>	<input type="checkbox"/>	Student	<input type="checkbox"/>	<input type="checkbox"/>
Church:	YES	NO		YES	NO		YES	NO
Father/Step-Father/Guardian	<input type="checkbox"/>	<input type="checkbox"/>	Mother/Step-Mother/Guardian	<input type="checkbox"/>	<input type="checkbox"/>	Student	<input type="checkbox"/>	<input type="checkbox"/>
Mid-Week:	YES	NO		YES	NO		YES	NO
Father/Step-Father/Guardian	<input type="checkbox"/>	<input type="checkbox"/>	Mother/Step-Mother/Guardian	<input type="checkbox"/>	<input type="checkbox"/>	Student	<input type="checkbox"/>	<input type="checkbox"/>

Father / Step-Father / Guardian:

Are you a Church Member? No Yes

Name of Church: _____

Pastor: _____

Mother / Step-Mother / Guardian:

Are you a Church Member? No Yes

Name of Church: _____

Pastor: _____

Church Phone Number: _____

How long have you attended there? _____

What is a Christian? _____

Who is Jesus Christ to you? _____

What is the Bible to you? _____

Describe your family devotions: _____

Church Phone Number: _____

How long have you attended there? _____

What is a Christian? _____

Who is Jesus Christ to You? _____

What is the Bible to you? _____

Describe your family devotions: _____

PLEDGE OF AGREEMENT AND COOPERATION

Please Note: This section may be completed when you have your interview with our School Principal and are given a School Handbook.

Please put your initials as your response to the following:

- Yes _____ No _____ We have read the Doctrinal Statement in the Student Handbook and support it. We understand that our child(ren) will be taught in accordance with it.
- Yes _____ No _____ We have read the GCS Student Handbook and support it.
- Yes _____ No _____ We pledge our cooperation with GCS in encouraging our child(ren) to follow Christian teachings, to demonstrate spiritual growth, and develop proper attitudes.
- Yes _____ No _____ We will uphold the authority of the teachers, recognizing their right to use the disciplinary measures they deem necessary as outlined in the GCS Handbook.
- Yes _____ No _____ We are currently active in a Bible believing local church and will remain active throughout the school year.

We understand that lack of cooperation with the school in maintaining the spiritual standards or the educational program by either parent/guardian or student will be considered grounds for dismissal. By signing below, we acknowledge our pledge to cooperate with GCS policies:

Signature of Father/Step-Father/Guardian

Signature of Mother/Step-Mother/Guardian