

For office use only

App Fee _____ CK# _____

Date Rec'd _____

Notes _____

Interviewed by _____



CALVARY CHAPEL CHRISTIAN SCHOOL
 2009/2010 SCHOOL YEAR
 1st - 5th GRADE STUDENT APPLICATION

1. Please write clearly. Please be as thorough as possible. Incomplete applications will not be given serious consideration.
2. All applicants **must attach** a copy of their most current report card.
3. All applicants **must also attach** their most recent SAT10 or AIMS test scores
4. Return completed application to the CCCS office. Please keep the information sheet for your reference.
5. **Application Fee - \$50 per student is collected with the application.**

Student Data

Application for Grade _____ Today's Date: _____ Check here if a returning student

Student Name _____

Address _____

City & Zip _____

Home Phone () _____

Date of Birth _____ Male Female



Grade Presently enrolled In	School Presently Attending & City	School Phone Number
Has your child been enrolled in, or recommended for, any of the following special classes: <input type="checkbox"/> Physically Handicapped <input type="checkbox"/> Speech Therapy <input type="checkbox"/> Learning Disability <input type="checkbox"/> GATE <input type="checkbox"/> Other Please explain		Has your child ever been referred to school administration for discipline? Please explain. Has he/she ever been suspended or asked to leave a school? Please explain.
List Siblings <i>Currently Attending CCCS</i> Name/s _____ Grade/s _____		List any Siblings <i>Applying for Enrollment to CCCS</i> Name/s _____ Grade/s _____

Parent Information

	Parents First & Last Name	Occupation	Employer	Contact Number	Lives w/ student Y/N
Father				Work # Cell#	
Mother				Work # Cell#	
Step Parent				Work # Cell#	
Marital Status of Parent/s: <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed <input type="checkbox"/> Separated					
Are you financially able to meet the monthly tuition? Yes _____ No _____ If no, then how much are you able to pay? _____					

PARENTS FILL OUT THE INFORMATION ON THIS PAGE

What do you see as your part in your child's education? _____

How did you learn of our school? What has prompted your application? _____

Why would you like your child to attend Calvary Chapel Middle School? _____

Church Information and Christian Walk

Do you regularly attend Calvary Chapel of Tucson? _____

Yes _____ NO _____

How often do you attend? _____

How long have you attended? _____

Which services do you attend? _____

List your child's youth pastor's name _____

List a pastor or elder who could give you a reference (if possible): _____

We participate in the ministry of the church in the following ways: _____

Do you attend another church? _____

If so, what church? _____

List a pastor or elder who could give you a reference (if possible): _____

Name

Phone

If you attend a church other than Calvary Chapel of Tucson, please list the ways in which you participate in the ministry of your church: _____

Parents: Please describe, briefly, your walk with the Lord at the present time: _____

FOR STUDENTS APPLYING FOR **THIRD GRADE OR ABOVE:** Please have your child write in his own words a brief statement expressing why he wishes to attend CCCS.

Only one parent signature is required, however both parents should sign if possible.

I/we certify that the information on this application is complete and accurate. I understand that any information found to be inaccurate may be considered grounds for dismissal from this school. I have attached the required information-most recent report card, and testing scores for my child.

Date _____

Parent's Signature (signature required)