

APPLICATION FOR ADMISSION

Grace Christian School admits students of any race, color, nationality, and ethnic origin to all rights, privileges, programs, and activities generally accorded or made available to the students at the school.

2011-2012

GRACE CHRISTIAN SCHOOL
2915 14TH AVE.
COLUMBUS, GA. 31904
PHONE: 706-323-9161 FAX: 706-323-8554
WWW.AMAZINGGRACE.NET

For office use only:

Date received: _____
Reg. Fee Paid: _____
Payment Plan: _____
Test Scores: _____
Report Card: _____
Immunization: _____
Birth Certificate: _____
Forms Signed: _____

STUDENT'S INFORMATION:

Name _____ Goes By: _____
Last First Middle
Address _____
Street City State Zip Telephone
Date of Birth _____ Age _____ Place of Birth _____
SSN _____ Sex _____ For Government Purposes, check one of the following:
American Indian ___ Asian ___ African American ___ Hispanic or Latino ___ Native Hawaiian/Pacific Islander ___ White ___
Last School Attended: _____ Previous Grade Completed _____
Grade Entering: Kindergarten: K-3 _____ K-4 _____ Extended Care Needed _____ (12:00 - 6:00 p.m.)
K-5 _____ Extended Care Needed _____ (3:00 - 6:00 p.m.)
Elementary Grade _____ Extended Care Needed _____ (3:00 - 6:00 p.m.)
Junior High Grade _____ Extended Care Needed _____ (3:00 - 6:00 p.m.)
High School Grade _____ Extended Care Needed _____ (3:00 - 6:00 p.m.)
Number Of Brothers Or Sisters At Grace _____
Circle Grades Previously Attended At Grace: K3, K4, K5, 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12
Scholastic Grades Have Been: Above Average _____ Average _____ Below Average _____
Has Student Ever Repeated Any Grade? Yes _____ No _____ If Yes, Which One (s) _____
Has Student Ever Been Expelled, Suspended, Or Disciplined By A Former School? Yes _____ No _____
If Yes, Please Explain When, Why And What School _____

PARENT INFORMATION:

Father's Name _____ Home Phone _____
Address _____
Street City State Zip Cell Phone or Pager
Employer _____ Work Phone _____
Father's SSN: _____
Mother's Name _____ Home Phone _____
Address _____
Street City State Zip Cell Phone or Pager
Employer _____ Work Phone _____
Mother's SSN: _____
Have Parents Accepted Jesus Christ As Their Personal Savior? Father _____ Mother _____
Marital Status: Married _____ Single _____ Separated _____ Widowed _____
Student Lives With: Both Parents _____ Father _____ Mother _____ Guardian _____ Other _____
Why Do You Wish To Enroll Your Child Into Grace Christian School? _____

GRANDPARENT INFORMATION:

Paternal Grandparents _____ Home Phone _____
Address _____
Street _____ City _____ State _____ Zip _____

Maternal Grandparents _____ Home Phone _____
Address _____
Street _____ City _____ State _____ Zip _____

CHURCH INFORMATION:

Home Church _____
Address _____ Phone _____
Pastor's Name _____ Youth Pastor _____
Has Student Accepted Jesus Christ As His/Her Personal Savior? _____ If Yes, When? _____
Do You Faithfully Attend: Sunday School _____ Morning Worship _____
Sunday Evening _____ Mid-Week Service _____
List any activities or ministries the student is presently involved in _____

EMERGENCY INFORMATION:

Parents Will Be Contacted First In Any Situation! However, Please Give Us The Name And Relationship Of Someone We Can Call If You Cannot Be Reached.

Name/Relationship _____ Home Phone _____
Address _____
Street _____ City _____ State _____ Zip _____ Cell Phone Or Pager _____
Employer _____ Work Phone _____
Student's Physician _____ Phone _____
Does The Student Have Any Physical, Emotional, Or Mental Disabilities Or Limitations? Yes _____ No _____
If Yes, Explain: _____
Is The Student Allergic To Any Thing or Medicine? _____

REGISTRATION INFORMATION:

1. All Students Registering After July 1st Must Pay The Registration And Book Fee At The Time Of Registration.
2. All Students Must Have An Up-To-Date Immunization Form #3231 When Registering.
3. All Students in K-5 and 1st Grade Must Also Have A Hearing, Vision, and Dental Form #3300, And A Copy Of Their Birth Certificate.
4. Entrance Test Will Be Required Unless The Student Has A Copy Of The Standardized Test Taken The Previous Year.
5. Registration Fees And Entrance Test Fees Are Due With The Application And Are Non-Transferable And Non-Refundable.
6. Who is Ultimately Responsible For The Tuition Payment?
Name _____ Home Phone _____
Address _____
Street _____ City _____ State _____ Zip _____

Note: We Will Not Make Agreements With Two Parties!

STATEMENT OF COOPERATION:

In making application for my child to attend Grace Christian School, it is my desire that he/she completes the school year. I further agree that:

1. The teacher, subject to the approval of the Pastor and Administrator, has full authority in the discipline of my child according to the standards outlined in the Bible (Proverbs 22:6; Proverbs 22:15).
2. My child has permission to take part in all school activities, including sports and field trips, and I will not hold the school liable to me or my child because of injury to my child at school or during any school activity.
3. The school has permission to administer general first aid, but will not administer any oral medication (including aspirin). Prescription medication sent from home may be administered upon written request by parents.
4. I agree to attend ALL Parent-Teacher meetings at the school so that I will stay informed of the activities of the school and of my child's progress.
5. I understand and agree with the tuition and fees.
6. When problems arise, I will use the following procedure in the order listed:
 - a. Contact the teacher and speak directly with him/her.
 - b. Request a conference with the supervisor if the problem is not solved.
 - c. Request a conference with the Administrator, if necessary.
 - d. With a good spirit, withdraw my child if I cannot support the policies, procedures, or staff of the school.
7. In an effort to help keep the tuition costs as low as possible, I am making a commitment to support the school in any and all school-wide fund raisers.
8. I acknowledge that the facts set forth in my application for enrollment are true and complete. I understand that misrepresentation or omission of facts called for on this application, is cause for rejection of this application and/or dismissal after acceptance.
9. I further certify that I have carefully read and do understand the above statements.
10. I understand that the students must abide by all the rules of the school both in action and attitude. The school reserves the right to dismiss any student who does not respect its spiritual standards or cooperate in the educational program.
11. I understand that attendance at Grace Christian School is a privilege rather than a right, therefore, I will support and cooperate with the school in its aims and ideals.
12. I understand that even if I believe that the teacher is wrong, I will seek to rectify the problem with the teacher privately, and will not undermine the authority in front of my child whether at school or at home.

I have read the Student Handbook and will abide by the policies stated therein. I realize that it is my obligation to train and educate my child; therefore, I am pledging my full support and cooperation to Grace Christian school and its faculty. It is my prayerful desire that my family contributes positively to the spirit of the school and live lives pleasing to the Lord.

Signature of Parent: _____ Date: _____

Signature of Student: _____ (Grades 7-12 Only)