

Heritage Christian School New Family/Student Application

<u>For Office Use Only</u>	
	Date: _____
Received	_____
Interview	_____
Registration fee paid	_____

A NONREFUNDABLE FEE OF \$75 MUST ACCOMPANY THIS APPLICATION PER STUDENT

Student Name & Grade: _____

Parent/Guardian _____

Relation to student _____ Cell phone _____ Email _____

Place of employment _____ Work phone _____

Parent/Guardian _____

Relation to student _____ Cell phone _____ Email _____

Place of employment _____ Work phone _____

Address _____ City, State, Zip _____

With whom does the child(ren) reside? _____

Are there special child custody provisions? _____ If so, please provide documentation

I/We hereby authorize HCS to obtain all scholastic information and files from all previous schools. Yes/No

Please describe the type of previous instruction that your child has received (ex: home schooled, public schooled, etc.) Also include the length of instruction (in years) and the name of the school.

Has student ever been expelled, suspended, re-assigned or asked to leave any school for any reason?

Yes _____ No _____ If yes, please explain: _____

Has student ever been bullied or been disciplined for bullying? Yes _____ No _____

If yes, please explain: _____

Is or has student been under the care of a Psychologist/Psychiatrist? Yes _____ No _____

If yes, please explain: _____

Has student been tested for or do you feel that your child could potentially have any of the following?

Yes _____ No _____ If yes, please give dates:

_____ Speech/Language	_____ Attention Deficit/Hyperactivity Disorder
_____ Attention Deficit Disorder	_____ Dyslexia
_____ Learning Disabilities	_____ Communication Delay
_____ Occupation Therapy	_____ Neuropsychological Evaluation
_____ Other	

Has student ever been on an IEP or ISP? Yes _____ No _____

*If answered yes, please attach a copy or further explanation.

Has student ever had a 504 plan? Yes _____ No _____

*If answered yes, please attach a copy or further explanation.

We understand that sometimes there are unforeseen circumstances, but to the best of your knowledge what are your future education plans for enrollment with HCS?

1 year _____ Keep child/children enrolled in future years _____

Family Size: _____ Are you enrolling all your children? _____

Is parent or guardian of the student enrolling an alumni of HCS? Yes _____ No _____

If yes, what years did you attend? _____

Please explain why you would like your child(ren) to attend HCS.

Please include your parental perspective on your child. Include your child's strengths and abilities, special interests, areas of concern and his/her relationship with God. We appreciate your assistance in helping us to know your child better. _____

Pastoral reference: Name _____ Phone _____

Personal reference: Name _____ Phone _____

Church now attending: _____ Phone _____

Do you attend regularly? _____

How did you hear about HCS? _____

I have completed this application truthfully, to the best of my knowledge, and give permission to HCS to contact listed references.

(Signature of parent/guardian)

(Date)