

# Southwest Christian School

## Application for Enrollment 2010/2011

### GRADES 1 - 6

**REQUIRED**

Attach  
Student  
Photo  
Here

### STUDENT INFORMATION:

Student Name \_\_\_\_\_ Preferred Name \_\_\_\_\_  
Complete Address \_\_\_\_\_ Applying for grade \_\_\_\_\_  
Street City State Zip  
Home Phone \_\_\_\_\_ Social Security Number \_\_\_\_\_  
Date of Birth \_\_\_\_\_ Age \_\_\_\_\_ Gender \_\_\_\_\_  
Ethnicity (circle one) African-American Anglo Asian Bi-racial Hispanic Native American Other

### ACADEMIC HISTORY:

Current School \_\_\_\_\_ Years of Attendance \_\_\_\_\_  
Previous School \_\_\_\_\_ Years of Attendance \_\_\_\_\_  
Has the applicant ever been asked to withdraw, been put on probation or suspended from school both previous or current ?  
 Yes  No  
If yes, please explain \_\_\_\_\_  
Attended SCS previously  Yes  No When? \_\_\_\_\_ Test for entrance to SCS previously  Yes  No When? \_\_\_\_\_  
Has the applicant ever had to repeat a grade(s)?  yes  no If yes, which grade(s)? \_\_\_\_\_  
Please state the reason for retention \_\_\_\_\_  
Has the applicant ever skipped a grade(s)?  yes  no If yes, which grade(s)? \_\_\_\_\_  
Please state the reason for advancement \_\_\_\_\_  
Has the applicant received any academic honors and/or been enrolled in advanced programs such as gifted/talented?  
\_\_\_\_\_  
\_\_\_\_\_  
Has the applicant ever been enrolled in any schools or programs designed for special learning needs?  yes  no  
If yes, please explain \_\_\_\_\_  
Has the applicant been involved in any extra-curricular, fine arts or special programs? (Music, athletics, etc.)  
\_\_\_\_\_  
\_\_\_\_\_

**Note: Please send copy of applicant's immunization record and certified birth certificate with this application.**



#### **NOTICE OF NON-DISCRIMINATORY POLICY**

Southwest Christian School admits students of any race, color, national or ethnic origin to all the 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, scholarships and loan programs, and athletic and other school-administered programs.

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## GENERAL INFORMATION:

Has the applicant expressed a desire to attend SCS?  Yes  No Please explain:

\_\_\_\_\_

\_\_\_\_\_

### Siblings:

Name	Age	Current Grade	School attending	Applying To SCS?
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

### Grandparent Information:

Please provide the names and addresses of grandparents so we can keep them informed of special events at SCS:  
(If deceased, please indicate)

Paternal Grandfather: \_\_\_\_\_

Paternal Grandmother: \_\_\_\_\_

Maternal Grandfather: \_\_\_\_\_

Maternal Grandmother: \_\_\_\_\_

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## CHURCH INFORMATION:

Denomination \_\_\_\_\_ Home Church \_\_\_\_\_

Attends How Often?  Regularly  Occasionally Family/Youth Pastor: \_\_\_\_\_

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## HEALTH HISTORY:

Name any **medical** conditions, **past or present**, which would restrict physical or academic activities to safeguard this applicant at school (I.E. diabetes, seizures, asthma, etc.): \_\_\_\_\_

\_\_\_\_\_

Name any **behavioral** conditions, **past or present**, which would restrict physical or academic activities to safeguard this applicant at school (I.E. emotional disorders, ADHD, ADD, etc.): \_\_\_\_\_

\_\_\_\_\_

Is the applicant taking any prescription medications? \_\_\_\_\_ If yes, please specify \_\_\_\_\_

\_\_\_\_\_

Is the applicant enrolled in any type of speech or language services?  yes  no

If yes, please explain \_\_\_\_\_

Has the applicant been tested for any of the following? (Please check)\*

Speech/Language  Attention Deficit Disorder  Learning Disabilities  Emotional Issues

Attention Deficit/Hyperactivity Disorder  Other \_\_\_\_\_

**\*If any of the above are checked, please provide the school with a copy of scores and recommendations from the evaluator(s).**

Applicant's Doctor \_\_\_\_\_ Phone No. \_\_\_\_\_

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## PARENT / GUARDIAN INFORMATION:

### *This Section for Parent/Guardian Information Whom Child Lives With:*

#### Parent/Guardian

Full Name \_\_\_\_\_

Employer \_\_\_\_\_

Position/Title \_\_\_\_\_

Business Phone (\_\_\_\_\_) \_\_\_\_\_

Cell or Pager Phone (\_\_\_\_\_) \_\_\_\_\_

Email Address Most Frequently Viewed \_\_\_\_\_

Relationship to Applicant \_\_\_\_\_

Please Check: Married \_\_\_\_\_ Divorced \_\_\_\_\_ Single \_\_\_\_\_

Alumni of SCS?  yes  no

Year Graduated From SCS High School \_\_\_\_\_

Maiden Name (if applicable) \_\_\_\_\_

Denomination \_\_\_\_\_ Home Church \_\_\_\_\_

Senior Pastor \_\_\_\_\_

Please list any religious and/or civic organizations to which you belong: \_\_\_\_\_

\_\_\_\_\_

#### Parent/Guardian

Full Name \_\_\_\_\_

Employer \_\_\_\_\_

Position/Title \_\_\_\_\_

Business Phone (\_\_\_\_\_) \_\_\_\_\_

Cell or Pager Phone (\_\_\_\_\_) \_\_\_\_\_

Email Address Most Frequently Viewed: \_\_\_\_\_

Relationship to Applicant \_\_\_\_\_

Alumni of SCS?  yes  no

Year Graduated From SCS High School \_\_\_\_\_

Maiden Name (if applicable) \_\_\_\_\_

Denomination \_\_\_\_\_ Home Church \_\_\_\_\_

Senior Pastor \_\_\_\_\_

Please list any religious and/or civic organizations to which you belong: \_\_\_\_\_

\_\_\_\_\_

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### *This Section For Non-Custodial Parent/Guardian Information Whom Child Does Not Live With:* (If Applicable)

#### Parent/Guardian

Full Name \_\_\_\_\_

Employer \_\_\_\_\_

Position/Title \_\_\_\_\_

Business Phone (\_\_\_\_\_) \_\_\_\_\_

Cell or Pager Phone (\_\_\_\_\_) \_\_\_\_\_

Relationship to Applicant \_\_\_\_\_

Email Address Most Frequently Viewed \_\_\_\_\_

Relationship to Applicant \_\_\_\_\_

Please Check: Married \_\_\_\_\_ Divorced \_\_\_\_\_ Single \_\_\_\_\_

Alumni of SCS?  yes  no

Year Graduated From SCS High School \_\_\_\_\_

Maiden Name (if applicable) \_\_\_\_\_

Denomination \_\_\_\_\_ Home Church \_\_\_\_\_

Senior Pastor \_\_\_\_\_

Please list any religious and/or civic organizations to which you belong: \_\_\_\_\_

\_\_\_\_\_

#### Parent/Guardian

Full Name \_\_\_\_\_

Employer \_\_\_\_\_

Position/Title \_\_\_\_\_

Business Phone (\_\_\_\_\_) \_\_\_\_\_

Cell or Pager Phone (\_\_\_\_\_) \_\_\_\_\_

Relationship to Applicant \_\_\_\_\_

Email Address Most Frequently Viewed: \_\_\_\_\_

Relationship to Applicant \_\_\_\_\_

Please Check: Married \_\_\_\_\_ Divorced \_\_\_\_\_ Single \_\_\_\_\_

Alumni of SCS?  yes  no

Year Graduated From SCS High School \_\_\_\_\_

Maiden Name (if applicable) \_\_\_\_\_

Denomination \_\_\_\_\_ Home Church \_\_\_\_\_

Senior Pastor \_\_\_\_\_

Please list any religious and/or civic organizations to which you belong: \_\_\_\_\_

\_\_\_\_\_

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#### Additional Parent/Guardian (if applicable)

If divorced, please indicate the type of custody ordered by the court: \_\_\_\_\_ Joint \_\_\_\_\_ Sole

**(The school will require a copy of the court order concerning custody for school records once student is accepted at SCS)**

To whom should notices of school activities be sent? \_\_\_\_\_

To whom should financial statements be sent? \_\_\_\_\_

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## QUESTIONNAIRE:

We appreciate your interest in enrolling your child at Southwest Christian School. We view ourselves as partners with you in providing a college preparatory education within a Christian community committed to integrating Biblical faith and learning.

### How did you first hear of Southwest Christian School?

*(If any of these are checked, please give names so we can send proper thanks.)*

Current Student/Parent \_\_\_\_\_

SCS Faculty \_\_\_\_\_

Alumnus \_\_\_\_\_

Church \_\_\_\_\_

### Has your decision to pursue an education at Southwest Christian School been influenced by any of the following?

Newspaper  Magazine ad  Realtor  Telephone book  Private School Fair  
 Word of mouth  Website  Radio  Referral from another school \_\_\_\_\_

### The factor(s) most influencing us to apply to SCS are:

Christian philosophy  Academic standards  Location  
 Reputation of SCS  Desire to attend private school  Displeasure with local schools  
 Extra-curricular programs  Class size  Other \_\_\_\_\_

### What goals are you hoping your child will achieve by enrolling him/her at Southwest Christian School?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Why do you want your child to receive a Christian Education?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Are you applying to any other schools in the area?

Yes  No If yes, which schools? \_\_\_\_\_

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## CERTIFICATION OF AUTHENTICITY:

I have read and understand the mission statement and statement of philosophy of **Southwest Christian School**. I/We agree, if accepted, to support and follow all rules and regulations of the school and understand that failure to do so could result in disciplinary action (which may include suspension or expulsion). Furthermore, I/we understand that all new students are accepted on academic and behavioral probation for a period of one calendar year. *I/We certify that **no** information relevant to my child's application has been withheld and agree to the terms of this application and the policy of the school.* Failure to note any situations that could influence acceptance could result in the student's separation from **Southwest Christian School**. I/We understand that acceptance of this application by Southwest Christian School in no way guarantees enrollment. All applicants are considered in accordance with the official admission policy, and final decisions will be made by the Administration of **Southwest Christian School, Inc.** By my/our signature hereon, we certify that we understand these policies and that all information provided on this application is true and correct to the best of our knowledge.

Parent's Signature \_\_\_\_\_ Date \_\_\_\_\_

**OFFICE OF ADMISSIONS—Elementary**  
**SOUTHWEST CHRISTIAN SCHOOL**  
6801 Dan Danciger Road • Fort Worth, Texas 76133  
817-294-0350 • Fax 817-294-0752