

Southwest Christian School

Application for Enrollment 2010/2011

GRADES 7-12

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
Applicant's Adult T-Shirt Size _____

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 _____
Has the applicant ever had an encounter with law enforcement or juvenile authorities? 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 _____

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.

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: _____

CHURCH INFORMATION:

Denomination _____ Home Church _____

Attends How Often? Regularly Occasionally Family/Youth Pastor: _____

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 **behaviorial** 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. _____

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 _____

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

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 _____

Alumni of SCS? yes no

Year Graduated From SCS High School _____

Maiden Name (if applicable) _____

Denomination _____

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

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? _____

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? _____

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—Preparatory
SOUTHWEST CHRISTIAN SCHOOL
7001 Benbrook Lake Drive · Fort Worth, TX 76132
(817) 294-9596 · Fax (817) 292-3644