

FAITH CHRISTIAN SCHOOL
Student Admission Application

Full Name _____ Social Security # _____ - _____ - _____

Street Address _____

City _____ State _____ Zip _____ Age _____ Gender _____

Birthdate (Month) _____ (Day) _____ (Year) _____ Grade Desiring to Enter _____

Last School Attended _____

School Principal _____ Phone Number _____

Church You Attend _____

Are you a member? Yes _____ No _____ Are you active? Yes _____ No _____

Has Student made a public profession of Jesus Christ as Savior? Yes _____ No _____

Father's Name _____ Mother's Name _____

Father's Employer _____ Mother's Employer _____

Father's Contact Numbers: (Home) _____ (Cell) _____

(Work) _____

Mother's Contact Numbers: (Home) _____ (Cell) _____

(Work) _____

Email Address: (Student) _____

(Parent) _____

Does the student live with both parents? Yes _____ No _____ If not, who has custody of the student? _____

Student Signature _____ Parent Signature _____

Note: Failure to answer application questions truthfully will be considered grounds for denial of admission and/or expulsion.