

# APPLICATION

King's Valley Christian School

## STUDENT INFORMATION (PLEASE PRINT OR TYPE ALL INFORMATION)

Student's Legal Name	Birth Date	Sex M F
Complete Mailing Address	Home Phone	Grade
Cultural Heritage (Circle <b>ONE</b> ):		
White, Not Hispanic	Black, Not Hispanic	Asian or Pacific Islander
Hispanic	American Indian or Alaskan Eskimo	Filipino

## STUDENT LIVES WITH (Circle One):

Both Parents, Same Home      Mother Only      Father Only      Grandparents      Other \_\_\_\_\_  
 Alternates Between Mother & Father      Mother & Stepfather      Father & Stepmother      Guardian

NAME AND ADDRESS OF PERSONS LEGALLY RESPONSIBLE FOR THIS STUDENT	
<b>Parent 1:</b> Mr. Mrs. Miss Ms. Dr.	Married    Divorced    Separated    Widowed Relationship to Student:
Mailing Address	Home Phone
Place of Employment Occupation	Bus. Phone
Additional Phone Numbers	E-mail
<b>Parent 2:</b> Mr. Mrs. Miss Ms. Dr.	Married    Divorced    Separated    Widowed Relationship to Student:
Mailing Address	Home Phone
Place of Employment Occupation	Bus. Phone
Additional Phone Numbers	E-mail

## PREVIOUS SCHOOL HISTORY

School last attended: \_\_\_\_\_ Last grade completed: \_\_\_\_\_

**Complete mailing address of school:** \_\_\_\_\_

Student attended this school from (dates): \_\_\_\_\_ to \_\_\_\_\_

**If transferring, state reason for transfer:** \_\_\_\_\_

## PERSON RESPONSIBLE FOR PAYING TUITION AND FEES

Name	Soc. Sec. No.	Relationship
Complete Mailing Address	Bus. Phone	
Additional Phone Numbers	Home Phone	

## GENERAL INFORMATION

1. How did you hear about KVCS?	Yellow Pages	Internet	Referred by:	Other
2. State briefly why you wish your student to attend KVCS:				
3. Please check if your student has had problems in school with regard to any of the following: <input type="checkbox"/> Peer relationships <input type="checkbox"/> Academics <input type="checkbox"/> Truancy <input type="checkbox"/> Absences/Tardiness <input type="checkbox"/> Behavioral difficulties If any are checked, please explain:				
4. Please check if your student has been tested for any of the following: <input type="checkbox"/> Academics <input type="checkbox"/> Learning problems <input type="checkbox"/> Emotional problems <input type="checkbox"/> Attention Deficit If any are checked, please state when and by whom:				
5. Has your student ever been suspended or expelled from school? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, please state when and for what reason.				
6. Has your student been in any difficulty with civil or juvenile authorities? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, please state when and for what reason.				
7. To your knowledge, has your student been involved or experimented with any type of drugs, alcohol, or tobacco? <input type="checkbox"/> YES <input type="checkbox"/> NO If Yes, explain:				

### CHURCH AFFILIATION

<b>Father or Male Guardian:</b>	Are you a Christian? <input type="checkbox"/> YES <input type="checkbox"/> NO	Name of your religion:	Do you attend church? <input type="checkbox"/> YES <input type="checkbox"/> NO	How often do you attend?
Name of church:		City:	Name of pastor:	
<b>Mother or Female Guardian:</b>	Are you a Christian? <input type="checkbox"/> YES <input type="checkbox"/> NO	Name of your religion:	Do you attend church? <input type="checkbox"/> YES <input type="checkbox"/> NO	How often do you attend?
Name of church:		City:	Name of pastor:	
Does your child attend Sunday School or church services? <input type="checkbox"/> YES <input type="checkbox"/> NO   If yes, does your child attend regularly? <input type="checkbox"/> YES <input type="checkbox"/> NO				

### BROTHERS OR SISTERS – Please circle if KVCS or KVP student

NAME:	Age:	KVCS	NAME:	Age:	KVCS
	Grade:	KVP		Grade:	KVP
NAME:	Age:	KVCS	NAME:	Age:	KVCS
	Grade:	KVP		Grade:	KVP

### PARENT AND STUDENT HANDBOOK, PUBLISHING OF STUDENT NAME/LIKENESS, AND DRESS CODE

I have received and thoroughly read the Handbook for Students and Parents including the sections concerning disciplinary policy and dress code. I have had the opportunity to discuss any issue covered by the handbook that I did not thoroughly understand. By signing below, I commit myself to being certain that my student wears clothing that is within the code. I am aware that there may be items in the code to which my child or I do not agree; however, my signature does imply conformity without argument.  **If this box is checked**, then I do NOT agree to have my child's image, or work reproduced in school publications or on the school's Web site. Otherwise, I DO, give my permission for King's Valley Christian School to include my child's image and work in school publications and on the school's Web site. I understand that my child's image on the Web site will not be accompanied by personally identifying information other than his or her first name and last initial. This does NOT apply to the school yearbook.

Father's Signature:	Date:	Mother's Signature:	Date:
Guardian's Signature:	Date:	Student's Signature (Grade 4 - 8 only):	Date: