

FOURSQUARE CHRISTIAN SCHOOL
ADMISSIONS PROCEDURES

Name _____ Date _____

_____ Request for Student Records (1st Grade and Above)

_____ Student Application

_____ Emergency Information

_____ Religious Information/Scholastic Information

_____ Authorization to Consent to Treatment of Minor/Request for Permission to Transport Pupil

_____ Foursquare Christian School Statement of Agreement

_____ Report of Health Examination (1st Grade)

_____ Immunizations

_____ Birth Certificate

_____ FACTS Management Tuition Service Information

For office use only:

Accepted by _____

Foursquare Christian School

144 Butte Street
Crescent City, CA 95531
(707) 464-9501 * Fax (707) 465-3254

Request for Student Records

(for students 1st Grade and above)

Student's Last Name

First

Middle

Date of Birth

Last Day of Attendance

Grade

Name and Address of last school attended:

Please forward all cumulative record folders for this student to:

Foursquare Christian School
144 Butte St.
Crescent City, CA 95531

Authorized Employee Signature

Date

Parent/Guardian Signature

Date

FOUR SQUARE CHRISTIAN SCHOOL
STUDENT APPLICATION

Student's Name: _____

Address: _____ City _____ Zip _____

Phone: _____ Date of Birth: _____ City of Birth: _____

Nationality: _____ Age: _____ Grade applying for: _____

Name and address of last school attended: _____

FAMILY INFORMATION

Student lives with (*check all that apply*): Mother Father Step Parent Legal Guardian Grandparent
Other _____

Legal Father's Name: _____

Address: _____ City _____ Zip _____

Employer: _____ Position: _____

Home Phone: _____ Cell: _____ Work Phone: _____

Legal Mother's Name: _____

Address: _____ City _____ Zip _____

Employer: _____ Position: _____

Home Phone: _____ Cell: _____ Work Phone: _____

Email: _____

Marital Status: Married Widowed Divorced Separated Never Married Remarried

Stepfather's/mother's Name: _____

Legal custody of student? Yes No How long related to student? _____

Employer: _____ Position: _____

Home Phone: _____ Cell: _____ Work Phone: _____

Guardian's Name: _____

Address: _____ City _____ Zip _____

Employer: _____ Position: _____

Home Phone: _____ Cell: _____ Work Phone: _____

Email: _____

Names of children living at home:	Age	Relation to student:
_____	_____	_____
_____	_____	_____
_____	_____	_____

FOURSQUARE CHRISTIAN SCHOOL
RELIGIOUS INFORMATION

Student Name _____

Church Attending _____

Address _____

Pastor _____ Phone _____

Has child ever made a profession of faith in Jesus Christ? Yes _____ No _____

Father: Christian? Yes _____ No _____

Mother: Christian? Yes _____ No _____

SCHOLASTIC INFORMATION

Please indicated level of previous work: Excellent _____ Good _____ Average _____ Poor _____

Has child ever been expelled, dismissed, suspended, or refused admission to another school?
Yes _____ No _____

Has child ever had disciplinary difficulties?
Yes _____ No _____

Has child ever been in trouble with the law, arrested, etc.?
Yes _____ No _____

Has child ever used tobacco or drugs of any kind?
Yes _____ No _____

Has child ever failed in school?
Yes _____ No _____

Has child ever been enrolled in a Special Education Program?
Yes _____ No _____

Has child ever been retained in a grade?
Yes _____ No _____

If you chose yes for any of the above questions please explain on the back of this page.

How did you hear about this school? _____

FOURSQUARE CHRISTIAN SCHOOL
AUTHORIZATION TO CONSENT TO TREATMENT OF A MINOR

I authorize, pursuant to the provisions of Section 25.8 of the Civil Code of California to give such attention to _____ as may be thought necessary by the physician/medical
(student's name)
advisor in charge, in case of an emergency and I cannot be reached. I also realized that the local police may be called, in certain circumstances, in order to insure emergency treatment.

Parent or Guardian

Date

Parent or Guardian

Date

REQUEST FOR PERMISSION TO TRANSPORT PUPIL

We, the undersigned, do hereby grant permission for the Foursquare Christian School to transport _____ to and from school-sponsored activities, including,
(student's name)
but not limited to, study trips, field trips, athletic activities and social events.

Field trip Permission Forms are also sent home at least one week prior to each field trip.

Parent or Guardian

Date

Parent or Guardian

Date

FOURSQUARE CHRISTIAN SCHOOL
STATEMENT OF AGREEMENT

Please read and initial each of the following:

_____ I hereby pledge to pay my financial obligations to the school on the date due and understand that it may be necessary to withdraw my child if proper arrangements are not made on a past due account.

_____ I give permission for my child to take part in all school activities, including sports and school-sponsored trips away from the school premises and absolve the school from liability to me or my child because of any injury to my child at school or during any school activity.

_____ I agree to uphold and support the high academic standard of the school by providing a place at home for my child to study and giving my child encouragement in the completion of any homework or assignments.

_____ I appreciate the standards of the school and do not tolerate profanity, obscenity in word or action, dishonor to God and the Word of God, or disrespect to the personnel of the school. I hereby agree to support all regulations of the school in the applicant's behalf and authorize this school to employ discipline as deemed wise and expedient for the training of my child, according to the Discipline Policy.

_____ I understand that the school reserves the right to dismiss any child who fails to comply with the established regulations and discipline or whose financial obligation remains unpaid.

_____ I understand the *Foursquare Christian School Discipline Policy* and that my active support of school discipline is important to my child's learning process and respect for standards and responsibility. I hereby pledge to partner with the school in communication regarding the discipline of my child.

_____ I have read the *Purpose and Objectives* in the *Foursquare Christian School Handbook* and have prayed about it and I agree to support it.

_____ I have read the *Statement of Philosophy* and *Statement of Faith* and I agree to support them.

_____ I have read the *Foursquare Christian School Handbook*, completed the student Application, and understand the terms stated on this application and agree thereto.

Parent or Guardian

Date

Parent or Guardian

Date