



Application for Admission

STUDENT INFORMATION

Please PRINT

Applying for Grade (circle one): PK3, Full Day T/TH PK3, Half Day T/TH
PK4, Full Day M-F PK4, Full Day M/W/F PK4, Half Day M/W/F

Kdg 1st 2nd 3rd 4th 5th 6th 7th 8th

Applying for School Year _____ Application Date _____

 Last Name First Name Middle Name Prefers to be called

 Street Address Apt. # City State Zip

Gender (M/F) _____ Language spoken in the home _____

Date of Birth _____ Race/Ethnicity: _____ African _____ African-American

Place of Birth _____ _____ Asian _____ Caucasian _____ Hispanic

Age _____ _____ Native American _____ Bi-Racial

FATHER/GUARDIAN INFORMATION

 Last Name First Name

 Street Address Apt. # City State Zip

Home _____ Work _____

Cell _____

Email _____

Place of Employment _____

Job Title _____

MOTHER/GUARDIAN INFORMATION

 Last Name First Name

 Street Address Apt. # City State Zip

Home _____ Work _____

Cell _____

Email _____

Place of Employment _____

Job Title _____

FINANCIAL RESPONSIBILITY

 Last Name First Name Phone Number

 Street Address Apt. # City State Zip

LIVING SITUATION

Parents are:

_____ Married and Living Together _____ Separated _____ Divorced
_____ Single _____ One Parent Deceased _____ Natural Parent and Step-Parent
Student legally resides with: _____ Both Parents _____ Mother _____ Father
_____ Joint Custody, if divorced (Please provide address and phone number of other parent.)

Last Name	First Name	Phone Number
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Street Address	Apt. #	City	State	Zip
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Are there any unusual factors in the child's life? (Absence of father or mother, invalidism of either, in-laws or grandparents in the home, unusual accidents or serious illness, adoption?)

Comment: _____

If there are other children in your family, please complete the following:

Name	Age	Grade	School
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Name	Age	Grade	School
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Name	Age	Grade	School
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EMERGENCY INFORMATION

In the event of illness or emergency and parents can not be reached, we should notify (an adult who **speaks English**):

1.

First and Last Name	Relationship	Phone
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2.

First and Last Name	Relationship	Phone
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EDUCATIONAL INFORMATION

Please list schools your child has attended (if applicable):

School	Address/City/State/Zip	Phone	Grades Attended

Student's grades have been: _____ Superior _____ Above Average _____ Average _____ Below Average

Has your child ever failed a grade? _____ If yes, state grade and date: _____

Has your child ever had an Individual Education Plan (IEP) or 504 plan, received speech/language services, support from a reading, math or resource specialist or other support services (i.e. occupational therapy)?

If so, please explain _____

*FCS provides minimal support services. Both school and family need to be comfortable with our ability to meet your child's needs, and full disclosure of information will facilitate that process. Any such documentation needs to be on file with the school prior to the first day of attendance.

Has your child been expelled, suspended, voluntarily withdrawn or denied re-enrollment at any school _____

If yes, please note which one applies and give details. _____

Physical limitations/problems _____

Has your child, to your knowledge, used any type of drugs, alcohol, tobacco, or has he/she ever been in any type of trouble with the law? _____

Describe your child's interests, talents, abilities: _____

If applicable, why is your child transferring from his/her present school? _____

Why do you want your child to attend FCS? _____

CHURCH ATTENDANCE

Name of church or parish that you attend? _____

Denomination _____

What is the frequency of the parent's/guardian's church attendance?

_____ Weekly _____ Frequently _____ Infrequently

What is the frequency of your child's church attendance?

_____ Weekly _____ Frequently _____ Infrequently

AGREEMENT

Have you read the Philosophy and Purpose and do you desire this education for your child? _____

By signing this application, you are stating that you are personally in agreement with and committed to the basic tenets of historic, orthodox Christianity listed below?

- a. God is a Triune God - the Father, Son, and Holy Spirit.
- b. The Bible is God's infallible and authoritative Word to humanity. It is the only standard by which faith and practice are to be measured.
- c. The chief end of man is to glorify God.

- d. People are created in the image of God. Through His relationship to Adam, man is a sinner by nature and does himself practice sin. He is thus alienated from God, his neighbor, and the world. All are sinners.
- e. Jesus Christ is the only Savior of sinners, the only way to the Father. He died as a substitute for sinners and was raised from the dead so that they might be reconciled to God.
- f. Eternal life is a free gift that is received through faith in Jesus alone. Eternal life is neither deserved by anyone nor can it be earned by good deeds.

If your child is accepted, your signature on this application is your promise to:

- Support the school and its policies concerning dress, conduct, and all other matters.
- Assume the responsibility for your child's education by supervising assigned homework, keeping in regular contact with your child's teachers, and guiding your child toward Godly character.
- Support to the best of your ability the various activities of the school.
- Check Renweb regularly for your child's grades, homework, and attendance information.
- Communicate with your child's teacher and all FCS staff in a professional and collaborative way.
- Support to the best of your ability the school's entire program?

Father/Guardian Signature

Date

Mother/Guardian Signature

Date

FCS admits students of any race, color, national and ethnic origin to all the rights, privileges, programs, and activities made available to students of the school. It does not discriminate on the basis of race, color, national and ethnic origin in the administration of its educational policies, admissions policies, scholarships, athletics, or any other school administered programs.

How did you hear about Forcey Christian School? _____

FOR OFFICE USE ONLY

Registration fee paid: Date _____ Check # _____

If check includes more than one student: Check # _____ Total \$ _____

Forcey Christian School Financial Contract

I/We understand that upon signing this agreement, all fees are due in full by May 15 of the school's year end. Further I/We acknowledge the school has the right to terminate the attendance of my student for the failure of the parent to maintain their financial obligation to Forcey Christian School.

I/We understand that if any payment is not made within thirty (30) days of the due date, the student's continued enrollment may be suspended and Forcey Christian School is under no obligation to provide services, educational or otherwise, to said student.

I/We understand if my student withdraws, or is suspended or dismissed from Forcey Christian School for any reason on or after August 15, 2019, a withdrawal fee with one month's tuition per student will be assessed. If a prepayment has been made, the refund will be prorated from the day of withdrawal. Registration fees will not be returned or prorated for any reason. Forcey Christian School is not responsible for any late Smart Tuition fees you incur on tuition or activity fees.

I/We understand in the event that prior or present obligations have not been met; any sum paid for any purpose including registration deposit for a future year will be applied first to the satisfaction of prior and/or current obligations.

I/We understand in the event that prior or present financial obligations to FCS including miscellaneous fees have not been met; registration for the upcoming school year will not be permitted until all financial obligations to date of registration have been paid in full. **I/We** also understand that if financial obligations to FCS are not met, transcripts, report cards, and records will be held and Renweb access will be terminated.

I/We understand that if semi-annual and annual payments are to be made in full by the due date. Failure to do that will result in your account being switched to monthly and charged at the monthly rate.

I/We understand that if for any reason our account is forced into collection, cost associated with the collections process will be accrued and added to the outstanding balance, which is owed to the school. It is understood that delinquent accounts of 60 days may be sent to a collection agency. If my/our account is assigned to a third party collection agency for collection or placed with an attorney to obtain judgement or otherwise satisfy payment of said account, a collection fee equal at minimum to 33 1/3 % of unpaid balance will be added to the account. I agree to pay such fees. I further agree to pay all reasonable attorney's fees and courts cost associated with the collection of my/our account.

Parent Signature

Date