

**2026-2027 WESTWOOD CHRISTIAN SCHOOL**  
**PRESCHOOL - 12th GRADE NEW STUDENT ENROLLMENT APPLICATION**

Today's Date: \_\_\_\_\_ Grade Level for 2026-2027: \_\_\_\_\_ Child's Birth Date: \_\_\_\_\_ Age: \_\_\_\_\_

**STUDENT INFORMATION:** New Student: \_\_\_\_\_ (\$25 non-refundable Application Fee enclosed)

►Friday Shirt Size: YXS\_YS\_YM\_YL\_ AXS\_AS\_AM\_AL\_AXL\_

**Student Name** \_\_\_\_\_  
First Middle Last

**Mailing Address** \_\_\_\_\_  
Street City State Zip Code

**Main Phone Number** \_\_\_\_\_ **Optional - A Copy of SS Card to WCS** \_\_\_\_\_

**Gender at Birth:** M \_\_\_\_\_ F \_\_\_\_\_

**Race/Ethnicity (please check one):** Hispanic/Latino \_\_\_\_\_, American Indian/Alaska Native \_\_\_\_\_,  
Asian \_\_\_\_\_, Black/African American \_\_\_\_\_, Native Hawaiian/Pacific Islander \_\_\_\_\_, White \_\_\_\_\_

►**Step Up For Students 2026-27 Award ID # (K-12 students - if applicable):** \_\_\_\_\_  
**New Students must provide the 2026-27 Award ID # before they are enrolled into WCS.**

►There is a non-refundable **\$550 Commitment fee per student per year** not covered by SUFS, which is the responsibility of the parent/guardian per child per year.  
If accepted, **\$100 of it will be due the FIRST week of school.**

**EMERGENCY CONTACTS**

►**Parent/Guardian 1** \_\_\_\_\_ **Relationship** \_\_\_\_\_

**Address** (if different from above) \_\_\_\_\_  
Street City State Zip Code

**Parent/Guardian 1 Email** \_\_\_\_\_ **Parent Cell Phone** \_\_\_\_\_

**Employer** \_\_\_\_\_  
Name Phone

►**Parent/Guardian 2** \_\_\_\_\_ **Relationship** \_\_\_\_\_

**Address** (if different from above) \_\_\_\_\_  
Street City State Zip Code

**Parent/Guardian 2 Email** \_\_\_\_\_ **Parent Cell Phone** \_\_\_\_\_

**Employer** \_\_\_\_\_  
Name Phone

►**WCS Student Email (Grades 9-12 only) (If applicable):** \_\_\_\_\_

►**Child lives with (check all that apply)** Both Parents \_\_\_\_\_, Mother \_\_\_\_\_, Father \_\_\_\_\_, Grandparents \_\_\_\_\_, Grandmother \_\_\_\_\_,  
Grandfather \_\_\_\_\_, Stepfather \_\_\_\_\_, Stepmother \_\_\_\_\_, Other \_\_\_\_\_

►**SIBLING(S)** - Please list all siblings if they are enrolled in WCS preschool through high school; please provide information.

Name \_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_

►Name/location of child care/school previously attended, if applicable \_\_\_\_\_

►Has this student ever been dismissed from/not allowed to return to any school facility? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, please explain: \_\_\_\_\_

►Please describe any concerns regarding speech, language, social, emotional, or development you have about your child:

\_\_\_\_\_  
\_\_\_\_\_

►Please note any allergies, prescription medications, serious conditions, or restricting physical conditions the school should be aware of: \_\_\_\_\_

►For the safety of all students and staff, please describe any mental health conditions. Has your child been Baker Acted, or placed in a psychiatric hospital? Is there a history of depression, cutting, suicidal thoughts/attempts, or other mental illness? If yes, explain. \_\_\_\_\_

►Has your child been **retained**? \_\_\_ Yes \_\_\_ No If yes, which grade(s)? \_\_\_\_\_

►Does your child have an IEP or a 504 Plan? \_\_\_ Yes \_\_\_ No (If yes, bring a copy to the interview.)

►Tell us about your child. What are their hobbies and interests? \_\_\_\_\_

►WCS uses a variety of media outlets (including Facebook, our website, internet publications, photography, video recording, live streaming, Remind, etc.) to promote our school and students. All students are automatically **opted in** for media use. Parents may choose to opt out; however, please note that doing so may limit your child’s ability to fully participate in certain school activities.

*Please note: All students are automatically **opted in for Chapel service posts.***

If you choose to OPT OUT. Please sign here: X \_\_\_\_\_

►The following individuals **have** permission to pick up my child(ren) from Westwood Christian School:

NAME	RELATIONSHIP	PHONE NUMBER 1	PHONE NUMBER 2

►Are there any legal or court/custody orders concerning your child? \_\_\_ Yes \_\_\_ No  
If yes, please provide WCS with a copy of the court order.

►Is there anyone who **CANNOT** pick up your child? If so, please list below.

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_

(An additional sheet may be used for additional comments.)

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►Your child is automatically opted in to School Counseling services and may use them as needed.

**I do NOT give permission for my child** to speak with the School Counselor. X \_\_\_\_\_

►In the event of an emergency and I cannot be reached, I give Westwood Christian School permission to have my child **transported** to the local emergency department at HCA Florida Suwannee Emergency, 1100 SW 11th Street, Live Oak, Florida. Parent/guardian signature: X \_\_\_\_\_

► **TEST SCORES** - The student’s most recent standardized test scores must be submitted. Additional Testing may be required for your student. This will be at a cost of \$15.00 for materials and scoring, which will be due at the time of testing. A time will be scheduled if this is needed.

► Please fill out the **Records Request Form** to request all records. They are required before the interview can take place.

**Parent/Guardian: Please read carefully and initial below.**

\_\_\_\_\_ The Bible, God’s Holy Word, provides the foundation of our school beliefs. WCS will not tolerate dishonor to the Godhead, the Word of God, or disrespect to any personnel at WCS.

\_\_\_\_\_ I pledge to pay my financial obligation(s) to the school by the given deadlines.

\_\_\_\_\_ I pledge to support the disciplinary, academic, and attendance standards set by WCS. This includes ensuring that homework is being completed at home and turned in on time.

\_\_\_\_\_ I understand that falsifying or leaving out any requested or pertinent information on this application may lead to dismissal from WCS.

\_\_\_\_\_ I understand my child may be withdrawn for violation of any of these standards.

\_\_\_\_\_ I understand this application does not constitute a contract for enrollment until acceptance by school administration is granted.

\_\_\_\_\_ I understand that my child(ren) will not be enrolled until the SUFS Award ID # is turned in.

Parent/Guardian signature: \_\_\_\_\_

\*This application must be completed before it can be processed. An interview with parents and any student, new to WCS, will be required before an acceptance decision is made. Westwood Christian School does not discriminate on the basis of race, color, religion, gender, age or national/ethnic origin.

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**For office use only:** Birth Certificate\_\_\_\_ SUFS Award Letter\_\_\_\_ Physical Exam\_\_\_\_ Immunization Record\_\_\_\_ SS Card/copy\_\_\_\_

Application Fee \_\_\_\_ Commitment Fee \_\_\_\_ Academic Records \_\_\_\_ Testing Results \_\_\_\_ Date Received: \_\_\_\_\_