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## APPLICATION FOR ADMISSION

### STUDENT INFORMATION

Date: \_\_\_\_\_ Grade Applied For: \_\_\_\_\_

Student's Full Name: \_\_\_\_\_ Name Student Uses: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_ Sex: M or F Age: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Home Phone: \_\_\_\_\_

### FAMILY INFORMATION

Child lives with:  Mother  Father  Step-Mother  Step-Father  Grandparents

Legal Guardian, Relationship: \_\_\_\_\_  Other, Relationship: \_\_\_\_\_

Does the parent that this child lives with share custody, legal or physical, with anyone?  No  Yes

If so, Who \_\_\_\_\_ . Please provide a copy of the court documentation of this agreement.

Circle your response to the following:

**YES NO** We pledge our cooperation with GCS in encouraging our child(ren) to follow Biblical teachings to demonstrate spiritual growth and to develop proper attitudes.

**YES NO** We will uphold the authority of the teachers, recognizing their right to use the disciplinary measures they deem necessary as outlined in the Student Handbook.

**YES NO** We are currently active in a Bible believing local church and will remain active throughout this school year. The name of the church we attend is \_\_\_\_\_.

We understand that lack of cooperation with Grace Christian School in maintaining the Biblical standards or the educational program by either the parent(s) or student(s) will be considered grounds for dismissal.

\_\_\_\_\_  
SIGNATURE OF FATHER DATE

\_\_\_\_\_  
SIGNATURE OF MOTHER DATE

Father / Step-Father / Guardian's Name:

Mother / Step-Mother / Guardian's Name:

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Occupation: \_\_\_\_\_

Occupation: \_\_\_\_\_

Employer: \_\_\_\_\_

Employer: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Work: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Work: \_\_\_\_\_

Email: \_\_\_\_\_

Email: \_\_\_\_\_

Other Children: Names: \_\_\_\_\_ Age: \_\_\_\_\_ Boy/Girl \_\_\_\_\_ School Attending: \_\_\_\_\_

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

Why do you desire to enroll your child in a Christian School? \_\_\_\_\_

Who recommended GCS to you or how did you become interested in GCS? \_\_\_\_\_

Grade last attended: \_\_\_\_\_ Any grade(s) repeated?  No  Yes Grade Average: \_\_\_\_\_

Give the names of all schools attended: *(begin with the previous year)*

School Name:	Grade(s):	Reason for change in school:
_____	_____	_____
_____	_____	_____

Has the student ever been evaluated or referred for evaluation for physical or learning difficulties?

No  Yes If yes, please give details including date(s) of evaluation.

\*Include a copy of the most recent evaluation. \_\_\_\_\_

Has the student ever been evaluated or referred for evaluation for ADD, ADHD, or any behavior disorders?  No  Yes  
If yes, please be prepared to give details when interviewed.

Has the student received tutoring or other special services?  No  Yes

Has the student ever been disciplined beyond the normal classroom situation, suspended, or expelled from any school?  
 No  Yes If yes, a school's student discipline report must be included with their school records.

Please explain: \_\_\_\_\_

## CHURCH INFORMATION

Do you attend church?  No  Yes How long have you attended? \_\_\_\_\_ Name of your church: \_\_\_\_\_

## TUITION/FEE PAYMENT OPTIONS

All fees and tuition are payable at the beginning of the school year. A \$25.00 late fee will be applied to all payments received ten (10) days after the due date. If payments are not made in a timely manner, the parents/guardians may be asked to withdraw their child(ren) from GCS.

Please check one payment option

- ONE PAYMENT** – One (1) payment paid in full before September 1st. *(A 3% Discount on Tuition is offered with this option.)*
- TWO PAYMENTS** – Two (2) equal payments paid before September 1st, and before January 1st.
- TEN EQUAL PAYMENTS PLUS CURRICULUM/ACTIVITY FEE** – Ten (10) equal monthly payments *(August – May)*.
- TWELVE EQUAL PAYMENTS** – Twelve (12) equal monthly payments *(June – May)*.
- CHOICE OF PAYMENT DUE DATE** – *(Please check one payment option)*  1st of the Month – or –  15th of the Month

The following must be included in order for this application to be processed:

1. Enrollment Fee
2. Copy of student's birth certificate
3. Copy of student's immunization record
4. Copy of student's most recent report card *(if applicable)*
5. Copy of diagnostic testing report *(if student has been tested for learning disabilities, etc.)*
6. Copy of student's discipline report *(if applicable)*

### FOR OFFICE USE ONLY

Date Received: \_\_\_\_\_ Rejected: \_\_\_\_\_

Withdrew: \_\_\_\_\_ Refund: \_\_\_\_\_

Student's Grade: \_\_\_\_\_

Amount Paid: \_\_\_\_\_  Cash

Check #: \_\_\_\_\_

Enrollment  Tuition

Grace Christian School admits students of any race, color, nationality or ethnic origin to all rights, privileges, programs, and activities generally accorded or made available to students at the school. Grace Christian School does not discriminate on the basis of race, color, nationality or ethnic origin in the administration of its educational policies, admission policies, scholarships, athletic or other school administered programs.