

GRACE

CHRISTIAN SCHOOL

4619 Mackinaw Road ■ Saginaw, MI 48603-2197

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www.gcsdefenders.com

Application for Admission

STUDENT INFORMATION

Date: _____

Student's Full Name: _____ Grade Applied For: _____

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: _____

Father / Step-Father / Guardian's Name:

Name: _____

Occupation: _____

Employer: _____

Cell Phone: _____ Work: _____

Email: _____

Mother / Step-Mother / Guardian's Name:

Name: _____

Occupation: _____

Employer: _____

Cell Phone: _____ Work: _____

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 of Tuition and Curriculum/Activity Fee paid in full before September 1st. (A 3% Discount on Tuition only is offered with this option.)

TWO PAYMENTS – Two (2) equal payments of Tuition and Curriculum/Activity Fee paid before September 1st, and before January 1st.

TEN EQUAL PAYMENTS PLUS CURRICULUM/ACTIVITY FEE – Ten (10) equal monthly payments (August – May) on Tuition and Curriculum/Activity Fee.

TWELVE EQUAL PAYMENTS – Twelve (12) equal monthly payments (June – May) on Tuition and Curriculum/Activity Fee.

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: _____

Amount Paid: _____ Withdrew: _____

Cash Check #: _____ Refund: _____

Enrollment Curriculum/Activity Fee Tuition Student's Grade: _____