

Fort Myers Christian School  
**2010-2011 APPLICATION for ADMISSION**

Date submitted \_\_\_\_/\_\_\_\_/\_\_\_\_

Grade Applying For: \_\_\_\_\_

Pre K- 3 day: \_\_\_\_ 5day: \_\_\_\_

# **STUDENT INFORMATION** #

Student's last name \_\_\_\_\_ First \_\_\_\_\_ MI \_\_\_\_\_

Address \_\_\_\_\_ Sex M F

City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_ Birth date \_\_\_\_/\_\_\_\_/\_\_\_\_

Race:  White  African American  Hispanic  Asian  Other: \_\_\_\_\_

Primary Speaking Language: Student \_\_\_\_\_ Parent: \_\_\_\_\_

<b>FOR OFFICE USE ONLY</b>
Reg. Fee Pd. \$ _____
Application Fee \$ _____
Interview date _____
Acceptance Letter mailed _____

# **FAMILY INFORMATION** #

	Parent 1/ Guardian	Spouse	Parent 2 (If applies)	Spouse
Full Name				
Address (If different from above)				
Occupation				
Employer				
Home Phone				
Work Phone				
Cell Phone				
Email Address				
Lives With	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no
Send Mail	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no

Natural parents are:  Married together at home  Separated  Divorced  Widowed

If child **does not live** with both natural parents, please describe and submit legal documentation of custody: \_\_\_\_\_  
 \_\_\_\_\_

Who has your permission to pick up your child (please include name, relationship, and phone number)?  
 \_\_\_\_\_  
 \_\_\_\_\_

YES  NO Does student have a medical condition? Describe \_\_\_\_\_  
 \_\_\_\_\_

YES  NO Is student currently on medication? Describe. \_\_\_\_\_  
 \_\_\_\_\_

YES  NO Is student currently under psychiatric care or counseling? Describe \_\_\_\_\_  
 \_\_\_\_\_

<p>√ <b>Students entering Kindergarten must be 5 before Sept. 1<sup>st</sup>. All kindergartners must be tested. K-testing helps us determine whether your student will be accepted.</b></p> <p>√ <b>ALL students must submit a birth certificate and immunization records with application.</b></p> <p>√ <b>ALL new Pre-K, K, and out-of-state students must submit proof of a Florida physical within the last 12 months.</b></p> <p>√ <b>Interviews may be requested by the administration.</b></p> <p>√ <b>Copies of the latest report card and standardized testing are to be submitted with the application. If this is unavailable administration may request the student take an entrance test.</b></p> <p>√ <b>All Kindergarten and 7<sup>th</sup> grade students must have proof of current state required immunizations.</b></p>
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**Name and complete address of living grandparents:**

Name(s) \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_  
Phone (\_\_\_\_) \_\_\_\_\_

Do not put on the mailing list.

Name(s) \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_  
Phone (\_\_\_\_) \_\_\_\_\_

Do not put on the mailing list.

Name(s) \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_  
Phone (\_\_\_\_) \_\_\_\_\_

Do not put on the mailing list.

Name(s) \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_  
Phone (\_\_\_\_) \_\_\_\_\_

Do not put on the mailing list.

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

Name \_\_\_\_\_ Age \_\_\_\_\_ School \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ School \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ School \_\_\_\_\_

**# A C A D E M I C I N F O R M A T I O N #**

Grades completed: K 1 2 3 4 5 6 7 8 Any grades ever repeated? N Y Which? \_\_\_\_\_

List previous schools attended \_\_\_\_\_

Principal's Name \_\_\_\_\_ Teacher's Name \_\_\_\_\_ Phone \_\_\_\_\_

Has student ever been suspended? Y N Expelled? Y N Asked to withdraw? Y N

(If so, please give full particulars on a separate sheet of paper, including principal's name, school address, and phone number of school.)

Please list subjects that the student is functioning below level in:

\_\_\_\_\_

Has student ever attended summer school? Y N When? \_\_\_\_\_ Where? \_\_\_\_\_

Why is the student leaving his/her present school?

\_\_\_\_\_

\_\_\_\_\_

Any physical, emotional, or learning problems?

\_\_\_\_\_

Where did you "hear" about FMCS?

Newspaper  Radio  Phone Book  Church  Website/Internet  Other \_\_\_\_\_

Referred by: \_\_\_\_\_

# SPIRITUAL INFORMATION #

√ FMCS works with the home and church to build spiritual values and principles in the lives of our students.

√ We believe children reach their full potential through a personal relationship with Jesus Christ and a life committed to the principles laid down in the Bible.

Family Church \_\_\_\_\_

Address \_\_\_\_\_

Pastor \_\_\_\_\_ Phone \_\_\_\_\_

Years you've attended there \_\_\_\_\_ Are parents current members? Y N

Parents' church attendance: Gweekly Gfrequently Ginfrequently

Student's church/Sunday School attendance: Gweekly Gfrequently Ginfrequently

According to admissions policies, **AT LEAST ONE PARENT OR STUDENT MUST HAVE ACCEPTED JESUS CHRIST AS THEIR PERSONAL SAVIOR.** Please indicate how your family meets this criteria:

Father  Mother  Student  Entire family (*mark all which apply*)

Briefly summarize how your family came to the Lord and your spiritual activities now:

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

FMCS enrolls not only students, but families as well. In case the school should need further information on your family, please list references that the school may contact:

A **pastor** who knows your family well:

Name \_\_\_\_\_ Day Phone \_\_\_\_\_

Position/Church \_\_\_\_\_

A **past teacher** of the student:

Name \_\_\_\_\_ Phone (home/day) \_\_\_\_\_

Position/School \_\_\_\_\_

A **family member or friend** who knows the student well:

Name \_\_\_\_\_ Phone (home/day) \_\_\_\_\_

Relationship \_\_\_\_\_

□ **PARENTS' (or legal guardian's) STATEMENT** □

**In making application for my child to attend Fort Myers Christian School,**

I agree to abide by the spiritual, academic, disciplinary, dress, and all other standards of the school as outlined in the Parent/Student Handbook.

**If my student is accepted and enrolled at Fort Myers Christian School,**

1. I agree to assume the responsibility for my student's education by supervising homework and keeping in regular contact with my student's teachers.
2. I agree to allow my student to go on scheduled field trips and other school activities with the proper notification.
3. I agree to support the school's entire program and leadership through prayer, time and financial gifts.  
NOTE: The school depends upon gifts above and beyond the tuition.
4. I agree to support the administration in the academic and discipline program of the school. When there is a concern about the classroom, I understand that I should talk with the teacher first and then discuss the matter with the administration, if necessary.
5. I understand that this application cannot be considered without the Registration Fee and that, if my student is accepted, I agree to the payment and refund policies listed in the school's fee schedule.
6. I understand that I must keep my account balance current.
7. I understand that if I voluntarily withdraw my student or my student is dismissed from the school, during a given month I will be charged for the full month. A withdraw fee will be charged for each student being withdrawn after enrollment and acceptance into our school. I understand that records cannot be forwarded to another school until all financial obligations have been satisfied.
8. I will make every effort to attend meetings and parent functions of the school regularly.

FMCS reserves the right to refuse any application, or dismiss any student, at any time, for unacceptable work or conduct (in school or off campus as outlined in the Handbook), or any other reason it deems necessary. Neither this application nor payment of fees is considered to be binding upon Fort Myers Christian School.

\_\_\_\_\_  
Father/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Mother/Guardian Signature

\_\_\_\_\_  
Date

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