

Mingo Valley Christian School
Educating for Today, Tomorrow and Eternity

Application for Admission

Student's Legal Name (Last) (First) (Middle) (Preferred Name)

Student's Current Grade Level: _____ Applying For Student To Enter Grade Level: _____

Age Birthdate Home Phone

Address City State Zip County
 Male Female

Home Email _____

Student's Ethnic Background (optional) African American American Indian Asian Caucasian Hispanic Other

Full Name of Father/Guardian: _____ **Email:** _____

Address: _____ **City:** _____ **State:** _____ **Zip Code:** _____

Home Phone: (____) _____ **Cell Phone:** (____) _____ **Work Phone:** (____) _____

Occupation: _____ **Employer:** _____

Full Name of Mother/Guardian: _____ **Email:** _____

Address: _____ **City:** _____ **State:** _____ **Zip Code:** _____

Home Phone (____) _____ **Cell Phone:** (____) _____ **Work Phone:** (____) _____

Occupation: _____ **Employer:** _____

Please check **all** that apply: Student lives with both parents Parents are separated

Student lives with father Student lives with mother Parents are divorced

Father is deceased Mother is deceased Grandparent(s) has (have) custody

Father has custody Mother has custody

Joint custody of student is held between _____ and _____

Person responsible for payment of tuition and fees _____ Relationship _____

Address _____ Phone _____

Name of Sibling:	Age:	Grade:	Current School:
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Academic Information:

School last attended _____ Year: _____ Grade: _____

Reason for leaving _____

MVCS recommended by _____

Has this student ever been retained? (Please use a separate sheet of paper to explain, if necessary) _____

It is the general policy of Mingo Valley Christian School not to accept students who have been suspended or expelled. Has this student ever been suspended or expelled from school? (Please use a separate sheet of paper to explain, if necessary)

Has this student ever been denied admission to a school? If yes, explain: _____

Has this student ever been home-schooled? If yes, give dates, grade level(s), and curriculum used: _____

Has this student ever had a clinical diagnosis of a learning disability? If yes, please explain: _____

Has this student ever had any additional testing or tutoring? If yes, please explain: _____

Has this student been recommended for any special testing or services, whether or not that recommendation was followed? Explain circumstances: _____

Has this student undergone formal testing or counseling? If yes, explain: _____

Do you approve of corporal discipline (spanking with a paddle)? _____

Other Information:

Please describe any recent changes in this student's life that may impact his or her performance, success, and/or conduct at MVCS? (i.e. family relocation, loss of a loved one, broken home, unusual family illnesses):

Please check the characteristics below that best describe your son/daughter:

- | | | | |
|-------------------------------------|--------------------------------------|-------------------------------------|-----------------------------------|
| <input type="checkbox"/> Aggressive | <input type="checkbox"/> Passive | <input type="checkbox"/> Leader | <input type="checkbox"/> Follower |
| <input type="checkbox"/> Dependent | <input type="checkbox"/> Independent | <input type="checkbox"/> Confident | <input type="checkbox"/> Fearful |
| <input type="checkbox"/> Extrovert | <input type="checkbox"/> Introvert | <input type="checkbox"/> Respectful | <input type="checkbox"/> Anxious |

What does your child like best about school? _____

Least? _____

How does your child feel about starting a new school? _____

What are your child's favorite hobbies or free-time activities? _____

List the types of TV programs your child and family watch: _____

List the types of music your child and family enjoy: _____

List the types of reading material that your child likes to read: _____

Does your family attend church on a regular basis? _____

Church Attending: _____ Church affiliation: _____

Pastor's Name: _____

Has your child ever professed faith in Jesus Christ, as Lord? _____

Has at least one custodial parent/guardian ever professed faith in Jesus Christ, as Lord? _____

Are you willing to cooperate with the school in the spiritual, as well as academic, lessons the student should learn? _____

Are you willing to cooperate with the teacher and school in any disciplinary action that should be taken? _____

Notice Of Nondiscriminatory Policy As To Students

Mingo Valley Christian School admits students of any race, color, nationality and ethnic origin to all rights, privileges, programs, and activities generally afforded or made available to students at the school. It does not discriminate on the basis of race, color, nationality and/or ethnic origin in the administration of its educational policies, admissions policies, and athletic and other school-administered programs.

However, it is not our purpose to accept a child with severe learning disabilities, low IQ, or behavioral problems. Mingo Valley Christian School was founded for the purpose of training average to above-average students.

Admissions Procedure

To apply for admission to Mingo Valley Christian School, please return this application completed and signed (One per student) along with the following forms for each student:

- Copy of recent report card
- Copy of recent standardized test scores
- Copy of immunization records (complete)
- Copy of Birth Certificate
- Pastor Recommendation Form (Pastor may send this separately)
- \$25 nonrefundable Application Fee

When all forms and application fee are received and if space is available, a family interview and entrance test will be scheduled.

As the parent or legal guardian of the above-named child, I submit all of the above information as true and accurate to the best of my knowledge..

Signature of Parent/Guardian

Date

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(918) 294-0404 * Fax

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