



Madras Christian School

**New Student Application**  
**2019-2020**

Date of Application \_\_\_\_\_

Student's Full Legal Name \_\_\_\_\_  
First Middle Last

Applying for Grade \_\_\_\_\_ Sex \_\_\_\_\_ Birth Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Current Age \_\_\_\_\_

Church Membership \_\_\_\_\_

\_\_\_\_\_ We are not involved with a church at this time.

Full Legal Names of Parents or Guardians

1 Parent/Guardian \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell \_\_\_\_\_  
Email \_\_\_\_\_

2 Parent/Guardian \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell \_\_\_\_\_  
Email \_\_\_\_\_

Last School Attended Name \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_

Please state briefly why you are interested in having your student attend our school.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Does your child have any special needs of any kind?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Briefly describe your student's academic strengths and weaknesses.

**Strengths**

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**Weaknesses**

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**Briefly describe your student's social skills**

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**How have you been involved in your child's education in the past?**

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Please give the 3 signed reference forms to the individuals you have indicated below.

**PASTOR**

Name \_\_\_\_\_

Phone \_\_\_\_\_

**LAST TEACHER/SCHOOL PERSONNEL**

Name \_\_\_\_\_

Phone \_\_\_\_\_

**OTHER \_\_\_\_\_**

Name \_\_\_\_\_

Phone \_\_\_\_\_

**OTHER \_\_\_\_\_**

Name \_\_\_\_\_

Phone \_\_\_\_\_