

Student Application

Grade applying for _____ Date of Application _____

Student Social Security # _____

1. Full legal name of student _____ Sex _____
LAST FIRST MIDDLE NICKNAME

2. Date of birth _____ Place of birth _____ Age _____
MO. DAY YR.

Check document submitted to verify birthdate for child entering kindergarten or first grade

Birth certificate () Notarized statement ()
 Hospital statement () Passport or visa ()

Verified by _____
SCHOOL OFFICIAL

3. Student living with: Father () Mother () Stepfather () Stepmother ()

Other _____
SPECIFY

Home address _____ P.O. Box _____
NUMBER STREET

_____ Telephone _____
CITY ZIP

4.

Legal names of those checked in #3	Denom. affiliation	Church where membership held	Languages used at home	Occupation	Business phone

5. Is this student sponsored by an Adventist church member? yes () no ()
 Is this student a baptized member of the Adventist church? yes () no ()

If yes, indicate year baptized _____ Church where membership is held _____

If student has some other church affiliation, specify _____

6. School last attended _____
NAME OF SCHOOL ADDRESS TELEPHONE

7.

Names of other children in family	Sex	Age	Check if living at home	School child is attending

OFFICE USE ONLY

Enter Dates Documents Received: _____
 Verification of birthdate _____
 Transcript(s) _____
 Name _____
 Grade enrolled _____
 Room assigned _____
 Withdraw _____

8. Has this student been previously identified as qualifying for a gifted education program? Yes () No ()
 If yes, what kind? _____ When? _____
 Where? _____ By whom? _____

9. Has this student been previously identified as qualifying for a special education program? Yes () No ()
 If yes, what kind? _____ When? _____
 Where? _____ By whom? _____

10. Does student have an unpaid account at another school? Yes () No ()
 If so, state where _____

11. Name and address of person to whom financial statements are to be sent if different from that given in item #3.

NAME	ADDRESS	TELEPHONE

STUDENT CONTRACT:

I agree to uphold the school's regulations. I pledge my cooperation with and loyalty to the school and its' employees. I will live in harmony with the school's Christian principles.

_____ DATE _____ STUDENT'S SIGNATURE _____

PARENT CONTRACT:

I hereby agree to support school regulations and to help my child observe them, to supply physical examination reports for this student, a) entering school for the first time, b) at grade seven (this should include the scoliosis examination), c) at least once in grades nine through twelve, and d) at other grades, when required by the Conference Board of Education; and to accept all financial educational obligations for this student.

_____ DATE _____ PARENT/GUARDIAN'S SIGNATURE _____

[Stamp school name and address]

**El Cajon Seventh-Day Adventist
 Christian School
 1640 East Madison Ave
 El Cajon, CA 92019
 619-442-6544**



El Cajon Seventh-day Adventist Christian School

1640 E. Madison Ave., El Cajon, CA 92019

619-442-6544 ecsda@yahoo.com

New Student Interview

Name of student _____ Date of birth _____

Father's Name _____ Mother's Name _____

Whom does the child live with? _____

Cell phone of Father _____ Cell phone of Mother _____

e-mail _____ mother _____

Family Religion _____

1. How many schools has your child attended since 1st grade? _____

2. Reason for leaving two most recent ones _____

3. Reason for transferring to this school _____

4. Has your child ever been retained? _____

5. Has your child ever ben home schooled? _____

6. Achievement level: Below Average _____ Average _____ Above Average _____

7. Has this student been placed in special education previously? _____

If yes indicate by whom was the child tested, where, when and type of placement.

Tested by: _____ Where: _____ When? _____ -Placement: _____

8. What learning problems does this child have? _____

9. Has your child ever been suspended? _____ dismissed? _____ from any school? _____

Is yew, please explain: _____

10. Why do you want your child to attend this school? _____

11. Do you owe tuition or fees at any previous school? -----

If yes, how much and name of school? _____

I hereby certify that the information contained in the New Student Interview is true and correct to the best of my knowledge. I agree to have any of the statements verified, and authorize the references listed to provide the school any and all information concerning the applicant. I understand that any misrepresentation, falsification, or material omission of information concerning this student may result in dismissal of the student from school. Since Non-public schools are not mandated or equipped to provide Special Education, this school will determine if it is able to meet the individual needs of the applicant. I understand if it is determined the student cannot be served adequately by this school, recommendations for alternative educational placement will be made, and the student may be asked to withdraw.

Parent/Guardian Signature

Date