

Date: \_\_\_\_\_  
Grade Applying for: \_\_\_\_\_

\_\_\_ New Student  
\_\_\_ Returning Student

*Liberty Christian School*  
2010-2011 Student Application

Student's Name      First                      Middle                      Last                      Date of Birth                      Age

Address                                      City                      State                      Zip                      Home Phone

Has the Student Accepted Christ?                      When?                      Church Attending

Name of Siblings                                      Age                                      Grade

\_\_\_\_\_

\_\_\_\_\_

Ethnicity                      Language Spoken at Home                      Has Student Repeated Any Grade?

Ever suspended or disciplined at any school? If yes, please explain:

Last School Attended:                      School Name                      Address                      City, State & Zip

\_\_\_\_\_

**Name of Father or Guardian**                      Marital Status – Circle One                      Date of Birth

\_\_\_\_\_ Married Single Divorced Widow(er) Separated

Home Address, if different from student address                      Work Phone                      Home Phone                      Cell Phone

Employer Name, Address and Phone

Accepted Christ?                      When?                      Church Attending

\_\_\_\_\_

**Name of Mother or Guardian**                      Marital Status – Circle One                      Date of Birth

\_\_\_\_\_ Married Single Divorced Widow(er) Separated

Home Address, if different from student address                      Work Phone                      Home Phone                      Cell Phone

Employer Name, Address and Phone

Accepted Christ?                      When?                      Church Attending

\_\_\_\_\_

Parents Education Level – Please check the highest education level obtained

Mother's Education                      Father's Education

\_\_\_ Not a High School Graduate                      \_\_\_ Not a High School Graduate

\_\_\_ High School Graduate                      \_\_\_ High School Graduate

\_\_\_ Some College                      \_\_\_ Some College

\_\_\_ College Graduate                      \_\_\_ College Graduate

\_\_\_ Graduate school/post graduate training                      \_\_\_ Graduate school/post graduate training

Reason for choosing Liberty Christian School

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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### Student Development

Are there any unusual factors in this child's life that we should know about to better assist his/her growth, security and stability? (Absence of a parent, grandparents living in the home, family member with a serious illness, etc.)

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Are there any circumstances that would hinder his/her normal participation in a regular classroom or playground?

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Has your child had psychological testing? If so, please explain.

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How receptive is your child and your family to Bible-based teaching?

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Please state any other information, which you feel, would be helpful to the teachers and administrators working with your child.

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- In making application for my child it is my desire to have him/her complete the entire school year.
- It is also my understanding that the policy of the school is to make no refunds on fees and tuition.
- I also give permission for my child to take part in all school activities, including sports and school-staffed trips away from the school premises to the local playground, library and other locations within walking distance.

Father/Guardian's Signature \_\_\_\_\_ Date \_\_\_\_\_

Mother/Guardian's Signature \_\_\_\_\_ Date \_\_\_\_\_

For Office Use Only:

Date Application Given                      Date Application Received                      Received by                      Forwarded to

Registration Fee                      Date Paid                      Cash, Check or Money Order #

Date Financial Agreement Received                      Amount Tuition Payment                      Date Paid                      Cash, Check or Money Order #

Date Application for Extended Care Received                      Amount                      Date Paid                      Cash, Check or Money Order #

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## *Financial Agreement*

Please initial over the boxes after reviewing this information with the Director.

- All fees and tuition paid are **non-refundable**.
- I am responsible for the entire year's tuition.
- Monthly payments are divided equally into 10 months, August 1 to May 1.
- If circumstances arise and you must withdraw your student, you must give a two-week written notice. You are still responsible for the remaining quarter in which you withdraw your student.
  - Before the first day of school - 0% of tuition
  - First Day of School thru October 31<sup>st</sup> - 25% of tuition
  - November 1<sup>st</sup> thru January 31<sup>st</sup> - 50% of tuition
  - February 1<sup>st</sup> thru March 31<sup>st</sup> - 75% of tuition
  - April 1<sup>st</sup> thru Last Day of School - 100% of tuition
- Tuition and Extended Care payments must be paid on the 1<sup>st</sup> of every month.
- A late payment fee of \$20.00 will be assessed after the 10<sup>th</sup> of every month.

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_  
Additional Students &  
Grades: \_\_\_\_\_

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Due upon acceptance at Liberty Christian Schools

Registration Due: \_\_\_\_\_

Books & Supplies: \_\_\_\_\_

***Total Due Immediately:*** \_\_\_\_\_

Payment Option due August 1st

Full Payment \_\_\_\_\_

10 Month Option \_\_\_\_\_

Mother/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Father/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_