



“Building Christian Character,  
Training Servant Leaders”

# APPLICATION FOR ADMISSION

*This application does not assure final enrollment, but provides information upon which a decision will be based.*

Admission date desired: \_\_\_\_\_

Grade for which applying: \_\_\_\_\_

## STUDENT INFORMATION

\_\_\_\_\_  
Last Name First Name Middle Name  
Male Female Age: \_\_\_\_\_ Goes by: \_\_\_\_\_

\_\_\_\_\_  
Address City State Zip

(\_\_\_\_\_) \_\_\_\_\_  
Home Telephone Email Address Social Security Number

Birth Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Place of Birth: \_\_\_\_\_

Please describe your son or daughter: \_\_\_\_\_

## SCHOOL HISTORY

Is this your child’s first school experience? Yes No

List previous schools attended:

1) Name of School: \_\_\_\_\_ Address: \_\_\_\_\_

Telephone#: \_\_\_\_\_ Grade: \_\_\_\_\_ Dates of Enrollment: \_\_\_\_\_

2) Name of School: \_\_\_\_\_ Address: \_\_\_\_\_

Telephone#: \_\_\_\_\_ Grade: \_\_\_\_\_ Dates of Enrollment: \_\_\_\_\_

How would you describe your child as a student? Check all that apply:

- excels academically
- above average
- average
- dislikes school
- likes school
- highly motivated
- indifferent
- struggles academically

Does your child have an identified learning disability? If so, please explain:

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

What school district do you currently reside in? \_\_\_\_\_



PATERNAL GRANDPARENTS:

MATERNAL GRANDPARENTS:

\_\_\_\_\_  
 First Names Last Name

\_\_\_\_\_  
 Address

\_\_\_\_\_  
 City State Zip

\_\_\_\_\_  
 Phone

\_\_\_\_\_  
 First Names Last Name

\_\_\_\_\_  
 Address

\_\_\_\_\_  
 City State Zip

\_\_\_\_\_  
 Phone

If the student does not live with both parents, the student lives with:

natural mother only    natural father only    natural mother and stepfather    natural father and stepmother    guardian    adoptive parents

Who has legal custody of the student? \_\_\_\_\_  
(Written documentation is required prior to enrollment)

Is either parent forbidden by court order from having equal access to the child or the school records?    Yes    No (Written documentation required)

Primary Language spoken at home: \_\_\_\_\_    Second Language: \_\_\_\_\_

SIBLINGS:

\_\_\_\_\_  
 Name

\_\_\_\_\_  
 Present School

\_\_\_\_\_  
 Age

\_\_\_\_\_  
 Grade

Applying to CSH?    Yes    No

\_\_\_\_\_  
 Name

\_\_\_\_\_  
 Present School

\_\_\_\_\_  
 Age

\_\_\_\_\_  
 Grade

Applying to CSH?    Yes    No

\_\_\_\_\_  
 Name

\_\_\_\_\_  
 Present School

\_\_\_\_\_  
 Age

\_\_\_\_\_  
 Grade

Applying to CSH?    Yes    No

**CHRISTIAN COMMITMENT AND CHURCH INVOLVEMENT**

Father accepted Christ as Savior? \_\_\_\_\_    Mother accepted Christ as Savior? \_\_\_\_\_

Church affiliation: \_\_\_\_\_    Members?    Yes    No

What activities are you or members of your family involved in besides Sunday worship? \_\_\_\_\_

What factors have provided the greatest impact on the spiritual life of your family? \_\_\_\_\_

What do you think are the characteristics of a Christian family? \_\_\_\_\_

How would you describe your child spiritually? \_\_\_\_\_

Has your child made a personal decision for Christ? \_\_\_\_\_    If yes, at what age? \_\_\_\_\_

Interest in spiritual matters:    strong    growing interest    indifferent    antagonistic

## SUPPLEMENTAL INFORMATION

Why do you want your child(ren) to attend Calvary Schools of Holland? \_\_\_\_\_

How did you hear of the school? \_\_\_\_\_

Are you here as a result of a referral from a CSH family?    No    Yes    Family Name: \_\_\_\_\_

Has either parent graduated from CSH? \_\_\_\_\_

Have you been satisfied with the education your child has had until now? \_\_\_\_\_

If not, in what areas do you desire improvement? \_\_\_\_\_

What expectations do you have of the education your child will be receiving at Calvary Schools of Holland? \_\_\_\_\_

If your child is seeking admission at this time and will enter the 6<sup>th</sup> grade or above, please have him or her complete the following question.

Why do you want to attend or not to attend Calvary Schools of Holland?

I accept the policies of Calvary Schools of Holland and I authorize the school to hold my child accountable to Calvary standards and policies. Further, I agree to have my child taught according to the doctrinal position of the school. I accept the policies detailed in the Student Handbook and agree to abide by the school's discipline policies. I promise to pay my financial obligations to Calvary on or before the due date or accept the consequences of the delinquent tuition policy. I give consent for my child to take part in all school activities, including sports and school-sponsored trips away from school premises, and absolve the school of liability because of injury to my child during school activities accept for the willful, wanton, or reckless misconduct of Calvary, its employees, or volunteers. I pledge my cooperation in regular tuition payments, practical service, prayer, and special gifts as the Lord enables me. I understand that any false information or significant omissions may disqualify my child from admission and may be justification for dismissal from Calvary if discovered at a later date. Finally, I give permission to have my son or daughter's photograph used in school related print and web-based publications.

*I have read the terms stated on this application and agree.*

Signature of parent or guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of parent or guardian: \_\_\_\_\_ Date: \_\_\_\_\_

### NON-DISCRIMINATORY POLICY

In accordance with Title VI of the Civil Rights Act of 1964, it is the policy of Calvary Schools of Holland to admit students of any race, color, national ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, national and ethnic origin in administration of its educational policies, admissions policies, class assignments, scholarship programs, and other school-administered programs.

### FOR OFFICE USE ONLY

Child's Name: \_\_\_\_\_

Date Received: \_\_\_\_\_ Application Fee Paid:    Yes    No    Interview Date: \_\_\_\_\_

Starting Date: \_\_\_\_\_ Birth Certificate: \_\_\_\_\_ Immunization Record: \_\_\_\_\_

Release Form: \_\_\_\_\_ Testing:    Yes    No



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