



SOUTHWEST CHRISTIAN SCHOOL

www.scswildcats.org . 14605 SW Weir Road . Beaverton . Oregon . 97007 . 503.524.8000

Please Clearly Print All Information

Today's Date: ____ / ____ / ____

For School Year: 20____ - 20____

Student Information

Student Will Be Entering: _____

Child's Name: _____
(Last) (First) (Middle)

Child's Preferred First Name: _____

Date Of Birth: ____ / ____ / ____ Age: _____ Sex: Male Female

Address: _____

City, State, Zip: _____

Home Phone: _____ Dad's Cell: _____ Mom's Cell: _____

Dad's Email Address: _____

Mom's Email Address: _____

School Last Attended: _____

Address: _____

Family Information

Father's Name: _____

Employment: _____ Position: _____ Phone: _____

Mother's Name: _____

Employment: _____ Position: _____ Phone: _____

Marital Status: Married Widow Divorced Separated

Other Children:

Name: _____ Age: _____

_____ Age: _____

_____ Age: _____

Reason They Are Not Applying: _____

Religious Information

Does Family Attend Church Regularly? Yes No

Church Attending: _____ Years In Attendance: _____

Pastor: _____ Church Phone Number: _____

Have Parents Received Christ As Savior? Father - Yes No Mother - Yes No

Has Child Ever Made A Profession Of Faith In Christ? Yes No

How Do You Provide Spiritual Training For Your Child At Home? _____

Scholastic Information

Has Child Ever Been Suspended, Dismissed Or Refused Admission To Another School? Yes No

If Yes, Please Explain: _____

Did This Student Have Any Disciplinary Problems In Their Previous School? Yes No

If Yes, Please Explain: _____

What Method Of Discipline Do You Use In Training Your Child? _____

Please Indicate Academic Level Of Child's Previous Work: Excellent Good Average Poor

Has Child Ever Failed In School? Yes No

If Yes, Please Explain: _____

Medical Information

Please List Any Pertinent Information You Think The School Should Have On Record For Your Child: Allergies, Food

Allergies, Daily Medications, Reaction To Bee Sting, Etc.: _____

Are There Any Diagnosed Learning Disabilities Such As Dyslexia, That Require Special Treatment and/or Programs?

_____ (Include Additional Sheet If Needed)

Emergency Contact: _____ Emergency Phone Number: _____

(Please Note That You Are Responsible To Update This Information With The School)

General Information

We First Learned About Southwest Christian School Through:

- Child(ren) Currently Enrolled
- Alumni
- Friend/Neighbor
- Phonebook
- Internet
- Other: _____

What Are Your Reasons For Enrolling Your Child At Southwest Christian School? _____

What Factors Most Influenced You To Apply To Southwest Christian School?

- Location
- Desire To Attend Private Christian School
- Academic Reputation
- Recommendation Of Other SCS Families
- Christian Philosophy
- Displeasure With Public Schools

References

Please List Three Personal References For This Student:

Name	Relationship to Student	Phone
_____	_____	_____
_____	_____	_____
_____	_____	_____

Financial Information

Though a ministry of Southwest Bible Church, Southwest Christian School is financially self-sustaining without aid from the church. Our income comes from student tuitions, fees and limited fund-raising. According to our tuition schedule, can you pay the tuition and fees for this student? Yes No

Enclose Application Fee: \$30.00. This Application Fee will apply towards your Registration Fee, which is nonrefundable (see schedule). Please note that a completed Application is not a guarantee of admission, but only a request for admission.

By my signature, I certify that I have answered the above questions honestly and completely. I further realize that attendance at Southwest Christian School is a privilege and I will do my best to adhere to all rules and policies.

 Father's Signature

 Mother's Signature

Today's Date: _____ Today's Date: _____

Southwest Christian School Admits Students Of Any Race, Color, Nationality And/Or Ethnic Origin.

FOR OFFICE USE ONLY: Interview, Date _____ Application Fee Paid: _____

Notes: _____