



Marcus Pointe Christian School

Student Admissions Application

Student Information

Full Name: _____ Goes By: _____
Last First MI

Address: _____
Street Address Apartment/Unit #

_____ *City State ZIP Code*

Gender: Male Female DOB: _____ Grade to Enter: _____

List any health issues (including allergies) we need to be made aware of:

Parent Information

Father or Guardian:

Name: _____ Relationship to student: _____

Email: _____ Social Security #: _____

Address: Same as student : YES NO If different than student please complete information below.

_____ *Street Address Apartment/Unit #*

_____ *City State ZIP Code*

Home Phone: _____ Cell Phone: _____

Employer: _____ Work Phone: _____

Mother or Guardian:

Name: _____ Relationship to student: _____

Email: _____ Social Security #: _____

Address: Same as student : YES NO If different than student please complete information below.

_____ *Street Address Apartment/Unit #*

_____ *City State ZIP Code*

Home Phone: _____ Cell Phone: _____

Employer: _____ Work Phone: _____

Emergency Contact/ Authorized Pick-up

Emergency Contact (in the event a parent cannot be reached):

Name: _____

Phone: _____

Authorized Pick-up (in the event of change, please notify the school office immediately):

1. _____

2. _____

3. _____

4. _____

5. _____

6. _____

School History

Last school attended: _____

Grade completed: _____

Has your student:

-ever been retained? YES NO

-had any discipline problems? YES NO

-had any academic problems? YES NO

-been tested for learning disabilities? YES NO

-been tested for Attention Deficit Disorder? YES NO

If yes to any of the above, please explain further:

Enrollment is incomplete without previous school records. (Applicable to 1st-5th grade)

Additional Information

How did you hear about Marcus Pointe Christian School? Internet Social Media Friend/Family Referral Referred by: _____

Other _____

Are you a member of Marcus Pointe Baptist Church? YES NO

Active Duty or retired military? YES NO

Commitment

I would like to register my child for Marcus Pointe Christian School. I have read the Marcus Pointe Christian School Student Handbook, Statement of Faith, and Parent Commitment Form and agree to abide by its policies. I understand the registration fee is non-refundable.

Signature: _____ Date: _____
Father's Signature

Signature: _____ Date: _____
Mother's Signature

Signature: _____ Date: _____
Billing Party Signature (If different)