



Date
Administrator
Admissions Fee
Birth Certificate
SC Immunization
TransReq
TransRec
Achievement Test
FACTS SIS
FACTS SS

## APPLICATION FOR ADMISSION 2019-2020

Student's name \_\_\_\_\_  
   Last    First    Middle    Called by

Person(s) with whom student lives \_\_\_\_\_ Cell \_\_\_\_\_

Address \_\_\_\_\_

Age \_\_\_\_\_ Sex \_\_\_\_\_ Birth date \_\_\_\_\_ SS# \_\_\_\_\_ Grade entering \_\_\_\_\_

Financially responsible person \_\_\_\_\_ E-mail address \_\_\_\_\_

Date entering \_\_\_\_\_ If K3, K4, or K5: half-day \_\_\_\_\_ full-day \_\_\_\_\_ Sibling(s) enrolled in NCS? \_\_\_\_\_

Last school attended \_\_\_\_\_

Address \_\_\_\_\_

How did you learn about Northside? \_\_\_\_\_

What is the primary reason you chose Northside over other private schools in the area? \_\_\_\_\_

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

Father's name _____	Home phone _____
Employer _____	Work phone _____
Mother's name _____	Home phone _____
Employer _____	Work phone _____

Church family attends _____	Are you a member? _____
Pastor's name _____	Attend Sunday AM? _____ PM? _____ Other? _____
Has the student made a profession of salvation? _____	

*Please be sure to complete the back of this form, sign it, and bring what is needed for the interview.*

Northside Christian School does not discriminate on the basis of race, color, or national origin in its admissions procedures or in any other of its policies or practices.

**ALL STUDENTS**

Has the child ever been expelled? \_\_\_\_\_ Suspended? \_\_\_\_\_ Is he currently suspended? \_\_\_\_\_  
Is there a balance due at another school? \_\_\_\_\_ Name of school \_\_\_\_\_  
Does the child have significant health problems? \_\_\_\_\_ allergies? \_\_\_\_\_ seizures? \_\_\_\_\_  
Is he currently on any medication? \_\_\_\_\_ which one(s)? \_\_\_\_\_  
Does he have emotional problems of which we should be aware? \_\_\_\_\_  
Behavioral problems? \_\_\_\_\_ Learning disabilities? \_\_\_\_\_

**STUDENTS IN GRADES 6-12 ONLY**

Has the student smoked? \_\_\_\_\_ used alcohol? \_\_\_\_\_ used illegal drugs? \_\_\_\_\_ been arrested? \_\_\_\_\_  
Has the student parented a child? \_\_\_\_\_ Is the student married? \_\_\_\_\_

**STATEMENT OF COOPERATION**

It is my intention to have my child complete the school year at Northside unless otherwise indicated.

I intend to pay fees when due and the Annual Payment according the terms of my *FACTS Agreement*. Report cards and transcripts are not released if the account is past due. I understand that if my account becomes 30 days in arrears, my children may be placed on Financial Probation; after 45 days, on Financial Suspension.

I give my child permission to participate in all school activities, such as field trips, fine arts competition, and athletics.

**I have read pertinent sections of the *Parent and Student Handbook* and agree with its contents, especially the "Goals in Christian Education" included in the Parent-Student Handbook. I pledge to encourage my child in his homework and other special projects as well in the application of Bible principles to his life and learning.**

If I have a question regarding a classroom issue, I will speak first to the teacher, then to the administration rather than to other parents. If I have a question regarding a matter of policy, I will approach the Administrator. If I cannot continue to support Northside, I will withdraw my child without seeking to undermine or discredit the ministry or its personnel.

I agree with the following: In keeping with the Northside Baptist Church Youth Ministries Policy, the school does not practice corporal punishment. For students in Fifth Grade and below, teachers usually maintain appropriate classroom management. The Administrator may ask parents to pick up a disorderly child in order to maintain a safe academic environment. For students in Middle and High School, NCS depends primarily on staff and administrative counseling. The Administrator issues demerits to communicate specified conduct issues to parents.

I will inform the office of any changes in the following: address, personal phone numbers (home, cell phone, pager, beeper, or employer), persons (with phone numbers) authorized to pick up my children, other emergency numbers, medical information, and the custodial status of my children.

Date \_\_\_\_\_

Parent's/Guardian's signature \_\_\_\_\_

Date \_\_\_\_\_

6-12 Student's signature \_\_\_\_\_

- For the interview, please bring \_\_\_\_\_ your child
- \_\_\_\_\_ the completed Application
- \_\_\_\_\_ a copy of the most recent report card
- \_\_\_\_\_ a copy of achievement testing results
- \_\_\_\_\_ a copy of the Birth Certificate
- \_\_\_\_\_ the SC Certificate of Immunization (form #2740)

**The Application for Admission fee is not refundable.**