

# Kings Christian School

## APPLICATION FOR ADMISSION

(NOTE TO PARENT/GUARDIAN: Please complete the following information and return it to the Admission Office)

### STUDENT APPLICATION (Please print)

Last	First	Middle	Preferred
Home address _____			
Number and Street		City and State	Zip Code
Home Telephone _____	Birth Date ____/____/____	Place of Birth _____	
Applying for admission to Grade ____ beginning _____		Month	Year
Social Security Number _____		_____M ____F	
Family Nationality: ____White ____Hispanic ____Black ____Asian/Pacific Isle ____American Indian ____Other			

Has your child ever been suspended or expelled from a previous school for discipline? Yes / No, if yes, please explain:

Child's behavior ( in trouble, please circle one)	Never	Once in while	Frequently
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### FAMILY (please print)

KCS Alumni? \_\_\_\_ Year

Father's Full Name _____	Home Telephone _____		
Home address (if different from applicant's) _____			
Driver's License # _____	Social Security # ____-____-____	Cell# _____	Email address _____
Occupation _____	Title/Position _____		
Employer _____	Name of Firm _____		
KCS Alumni? ____ Year			

Mother's Full Name _____	Home Telephone _____		
Home address( if different from applicant's) _____			
Driver's License # _____	Social Security # ____-____-____	Cell# _____	Email address _____
Occupation _____	Title/Position _____		
Employer _____	Work #: _____		
Name of Firm			

### STEP PARENT/GUARDIAN INFORMATION (please print)

KCS Alumni? \_\_\_\_ Year

Stepfather's Full Name _____	Home Telephone _____		
Home Address ( if different from applicant's) _____			
Email Address _____	Cell # _____	Work Telephone _____	
Employer _____	Occupation _____	Title/Position _____	
Name of Firm			

KCS Alumni? \_\_\_\_ Year

Stepmother's Full Name _____	Home Telephone _____		
Home Address ( if different from applicant's) _____			
Email Address _____	Cell# _____	Work Telephone _____	
Employer _____	Occupation _____	Title/Position _____	
Name of Firm			

If the applicant does not live with both natural parents, please complete the following:

Parents are: \_\_\_\_Separated \_\_\_\_Divorced \_\_\_\_Mother deceased \_\_\_\_Mother remarried \_\_\_\_Father deceased \_\_\_\_Father remarried

Applicant is NOT to be released to: (A court order must be attached) \_\_\_\_\_

Applicant lives with: \_\_\_\_\_

### BROTHERS AND SISTERS

Name	Birth Date	School	Grade: _____
Name	Birth Date	School	Grade: _____

**BROTHERS AND SISTERS (continued)**

Does this student have siblings applying to KCS? \_\_\_\_ Yes \_\_\_\_ No If so, Name (s) and Grade (s) \_\_\_\_\_

Do other children (siblings) in your family attend/have attended KCS? \_\_\_\_ Yes \_\_\_\_ No If so, Names (s) and Grade (s) \_\_\_\_\_

**PARENTAL COVENANT**

**STATEMENT OF COOPERATION:**

I/we, the parent (s)/guardian (s) have read and do hereby acknowledge the following points as they pertain to the working presuppositions by which Kings Christian School Inc., is organized and operated.

1. Although children of many Christian denominations make up the Kings Christian School student body (as well as some children who attend no church), each child (and parent) enters with the awareness that teaching will be based upon the fundamental presupposition that God is, that He has revealed Himself with His will for us through the Person of His son, the Lord Jesus Christ, and through His Living Word, the Bible. At all times the Bible will be presented as without error and inspired by God word for word and from cover to cover.
2. Kings Christian School accepts doctrine of “en loco parentis” ( or in place of the parents). We emphatically view the school as an extension of the home and local church with the primary function of assisting the parents in fulfilling their responsibility to “ train up their children in the way they are to go.” As an extension of the local church, no attempt will ever be made to “pull” children away from their church.
3. The services of Kings Christian School are available to any student regardless of race, color, national or ethnic origin, provided the student and parent (s) are willing to meet the achievement, behavioral, moral and biblical standards of the school.
4. I give Kings Christian School, Inc. permission for my child to take part in all school activities, including bus trips, sports activities and school sponsored trips away from the school premises. I also believe that discipline is necessary for the welfare of each student, as well as for the entire school.
5. I give permission for my child’s teacher or another agent of the school to make and enforce classroom regulations in a manner consistent with Christian principles and discipline as set forth in the Scriptures.
6. I further agree that should legal action, for any reason, be taken against Kings Christian School, Inc. or any agent thereof, on my child’s behalf and the school or its agent is found not to be at fault, to pay any attorney and court fees, damages, or other costs that Kings Christian School, Inc. or its agent should incur to defend against such action.

I authorize Kings Christian School, Inc. to exercise its prerogatives as explained in it’s role “en loco parentis” on the behalf of my child.

Student (s) full Name \_\_\_\_\_

I understand that this especially and particularly includes permission to discipline as deemed wise and expedient for my child ( including corporal punishment), to counsel my children biblically when matters of child welfare arise.

This Statement of Cooperation will be in effect for as long as my child attends Kings Christian School whether it be in elementary, junior, senior high or summer school.

I understand that should my marital status change, it is my responsibility to have a corrected Statement of Cooperation signed, updated, and delivered to Kings Christian School office.

\_\_\_\_\_  
Father (Print Name): Signature: Date:

\_\_\_\_\_  
Mother (Print Name): Signature: Date:

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## GRANDPARENT (S) INFORMATION:

In order to keep grandparents of our students informed about school activities, they will receive the school's monthly newsletter and invitations to special events. Please name living grandparents and give their address.

Mr. & Mrs. \_\_\_\_\_  
First Name Last Name Address City/State/Zip

Mr. & Mrs. \_\_\_\_\_  
First Name Last Name Address City/State/Zip

Mr. & Mrs. \_\_\_\_\_  
First Name Last Name Address City/State/Zip

Mr. & Mrs. \_\_\_\_\_  
First Name Last Name Address City/State/Zip

## ADDITIONAL INFORMATION

Please tell how you heard about Kings Christian School (if through friends, whom):

\_\_\_\_\_

\_\_\_\_\_

## FAMILY CHURCH INFORMATION

Church Name: \_\_\_\_\_ Member? Yes \_\_\_ No \_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

Pastor's Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

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**INDIVIDUAL TESTING INFORMATION ( Please Print)**

Has the applicant ever been tested for learning disabilities (e.g. ADD, ADHD, Dyslexia, etc.)? \_\_\_ Yes \_\_\_ No, If "Yes" and an I.E.P. (Individual Education Program) is available, please provide a copy. If no I.E.P. is available, please indicate test results and attach a copy of any documentation you may have.

Has applicant ever been in counseling? ( Please explain briefly.) \_\_\_\_\_

**SCHOOLS:**

Present Grade \_\_\_\_\_ Present School \_\_\_\_\_ Teacher's Name: \_\_\_\_\_

School Address: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Previous Schools Attended:

School Name	Address	Dates Attended	Telephone #

School Name	Address	Dates Attended	Telephone #

**Notice of Nondiscrimination Policy as to Students**

Kings Christian School admits students of any race, color, nationality and ethnic origin to all 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 polices, athletic and other school administered programs.

*I/we understand that my/our child's likeness may be photographed or videotaped by the school in the course of school activities. I/we hereby give consent for the school to use my/our child's likeness in promotional and/or advertising materials.*

Signature of Parent \_\_\_\_\_  
Father \_\_\_\_\_ Mother \_\_\_\_\_

Please print name \_\_\_\_\_  
Father \_\_\_\_\_ Mother \_\_\_\_\_

Signature of Guardian \_\_\_\_\_  
Relationship to Applicant \_\_\_\_\_

Please print name \_\_\_\_\_

**Our signature certifies the accuracy and completeness of the information provided. We understand that any misrepresentation may be cause for denial or cancellation of admission or enrollment.**

Today's Date: \_\_\_/\_\_\_/\_\_\_

Signature of Parent \_\_\_\_\_  
Father \_\_\_\_\_ Mother \_\_\_\_\_

Please print name \_\_\_\_\_  
Father \_\_\_\_\_ Mother \_\_\_\_\_

Signature of Guardian \_\_\_\_\_  
Relationship to Applicant \_\_\_\_\_

Please print name \_\_\_\_\_

Please personally deliver application package components or mail with the Application Processing Fee in the amount of \$1 50.00. A late Application Processing Fee (after the first day) is \$175.00 to:

Kings Christian School Admissions Office, 900 East D Street, Lemoore, CA 93245, Telephone: 559-924-8301 - Fax: 559-924-0607

**For Office Use Only**

Process Date \_\_\_\_\_ Grade \_\_\_\_\_ App. Fee \$ \_\_\_\_\_ MM \_\_\_\_\_ H.S. Covenant of Cooperation \_\_\_\_\_ Substance Abuse Policy \_\_\_\_\_ Internet Use \_\_\_\_\_  
B.D. verified \_\_\_\_\_ B.C. (state) \_\_\_\_\_ Shot record \_\_\_\_\_ Library \_\_\_\_\_ Teacher Reference \_\_\_\_\_ Adult Reference \_\_\_\_\_ Prospective Student \_\_\_\_\_ Transcripts \_\_\_\_\_  
Class Lists \_\_\_\_\_ Parent Reference \_\_\_\_\_ Report Card \_\_\_\_\_ Emergency Medical \_\_\_\_\_ High School Sports Physical \_\_\_\_\_ Accounting \_\_\_\_\_ Processed by \_\_\_\_\_