

**ATTACH  
CURRENT  
PICTURE  
HERE**



8600 Lake Shore Blvd.  
Mentor, OH 44060  
Phone: (440) 257-3172  
**STUDENT APPLICATION**

*Office Use Only*

Date received\_\_\_\_\_

Interview schd \_\_\_\_\_

Interview compt \_\_\_\_\_

Applying for Grade \_\_\_\_\_

Accepted\_\_\_Rejected\_\_

Trans. request \_\_\_\_\_

Trans. Received \_\_\_\_\_

Reg fee pd \_\_\_\_\_

Notified of dec. \_\_\_\_\_

Grade placement \_\_\_\_\_

S.O.C. \_\_ PP

EC 10 TAP

**STUDENT INFORMATION**

Legal Name \_\_\_\_\_  
(Last) (First) (Middle)

Sex  Male  Female Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_

Grade enrolling \_\_\_\_\_ Last grade successfully completed \_\_\_\_\_ Public School district \_\_\_\_\_

PREVIOUS SCHOOL ATTENDED	ADDRESS	DATES	GRADES COMPLETED

**PARENTAL INFORMATION**

Father's Name: _____	Mother's Name: _____
Natural Parent <input type="checkbox"/> Step Parent <input type="checkbox"/> Guardian <input type="checkbox"/>	Natural Parent <input type="checkbox"/> Step Parent <input type="checkbox"/> Guardian <input type="checkbox"/>
Address: _____	Address: _____
City/State/Zip: _____	City/State/Zip: _____
Phone: _____	Phone: _____
Email: _____	Email: _____
Occupation: _____	Occupation: _____
Employer: _____	Employer: _____
Business phone: _____	Business phone: _____

Do any of the following apply?  
 \*Divorced  \*Separated  Remarried  Widower   
 \*Divorced/Separated must have custody papers on file in office

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**CHURCH INFORMATION**

Family Church \_\_\_\_\_ Family Church \_\_\_\_\_  
 Pastor's Name \_\_\_\_\_ Pastor's Name \_\_\_\_\_  
 Church Phone \_\_\_\_\_ Church Phone \_\_\_\_\_

Briefly state your understanding as to the meaning of "Receive Jesus Christ as personal Savior". \_\_\_\_\_

Has the father received Christ?  Mother?  Student?

Why do you wish to enroll your child in Mentor Christian School? \_\_\_\_\_

Do you have an outstanding balance due at another Christian school? Yes  No

Are you applying for all school-age children in your family? \_\_\_\_\_ If not, please explain \_\_\_\_\_

Please give the names of other children in your family.

Name	Birthday	Grade

Does applicant have any emotional/behavioral difficulties? YES  NO

Does applicant have any learning/mental disabilities? YES  NO

Does applicant have any physical disabilities? YES  NO

Does applicant have any disciplinary problems at school or with civil authorities? YES  NO

(If YES, please explain on a separate sheet of paper.)

In making this application, I understand that:

1. The teacher decides the course of correction in the classroom discipline of my child, within the boundaries of Mentor Christian School policy.
2. The administration will have full responsibility for placing my child in the proper class.
3. My cooperation is expected in:
  - a. Regular tuition payment
  - b. Help at home with schoolwork
  - c. regular church attendance
  - d. abiding by the Standards of Conduct
4. The school reserves the right to dismiss any student who does not cooperate in the educational process or abide by the Standards of Conduct.
5. My child will be taught in accordance with the school's philosophy and objectives which are based on Scripture.
6. I am making application for my child to attend for the entire school year (or for the rest of the school year should I be applying during the school year). Should I decide to withdraw my child for any reason other than our family moving out of the area, the tuition and maintenance fee paid will become non-refundable.

\_\_\_\_\_  
Signature of Father Date

\_\_\_\_\_  
Signature of Mother Date

Mentor Christian School admits students of any race, color, national and 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, scholarship and loan programs, and athletic and other school-administered programs.