

Stephenville Christian School

New Family Application 2024 - 2025

Date of application: _____

Name of Parent/Guardian filling out application: _____

- Home Address _____
- Phone Number(s) _____
- Email Address _____

Name of student applying to enroll: _____

- Age on September 1, 2024 _____ Grade level for 2024-2025 school year _____
- Name of school currently attending _____

Church information:

- Home Church _____ # Years attended _____
- Pastor's Name _____ Phone Number _____
- Is the Word of God (the Bible) taught regularly in your home? _____
- Does the father proclaim Christ as Savior? _____ Does the mother proclaim Christ as Savior? _____

**If new to the area, please provide the name and pastoral reference from the last church attended.

Why do you wish to enroll your child at Stephenville Christian School?

If enrolling in Preschool, are you looking for *preschool only* or to continue in K-8th? _____

Who, according to your understanding, is Jesus Christ?

Please describe your relationship with Jesus Christ and how you incorporate your faith into your family life.

Are you willing and agreeable to have your student(s) participate in daily prayer, worship, and Bible class that instructs students to grow in their personal walk with Christ, displaying Christian character according to Biblical standards?

How did you hear about Stephenville Christian School?

Has the student being enrolled ever been dismissed or suspended from any school? ___ Yes ___ No If yes, explain

Have you been indicted or convicted of an offense against a child that is under the age of 18? ___ Yes ___ No. If yes, explain.

To better assist your child in his/her educational success, are there any learning challenges or physical conditions which could affect school performance of which the school should be made aware? Does your child currently receive an IEP, modifications, or special education services or have been referred for services at their previous school, including dyslexia or speech?

My signature below indicates my agreement and willingness to comply with the SCS vision and policies, and my willingness to support SCS in my actions and prayers. I will faithfully uphold the Christian lifestyle in my home, and be faithful to my church.

Providing false information on any portion of the Registration or New Family Application may result in an immediate dismissal from Stephenville Christian School.

Signature _____ **Date** _____

Stephenville Christian School

Pastoral Recommendation

The purpose of Stephenville Christian School is to work with the Christian family and church while presenting our covenant children a unified, distinctively Christian view of the world and their unique place in it as God's people. Due to our desire to help you in your mission to raise your children in covenant with our Lord Jesus Christ we ask that this form of recommendation be signed by the Pastor of the local church in which you are a member. Please return this completed form with your application.

We understand our role as a Christian school to be supportive. As you seek to raise your children in the nurture and admonition of the Lord, along with your church we seek to provide an environment in which together we can reach this highest goal of Christian discipleship. Enrollment at Stephenville Christian School is both a privilege and a responsibility for Christian families. Our goal is to help every student in partnership with their family grow into a responsible citizen of our world and the kingdom of Christ. Further consultation with the Admissions Committee will follow as we seek to help provide the best Christian education possible for the children of Stephenville Christian School.

I, Pastor _____ of _____
Church wholeheartedly recommend _____ to be enrolled at
Stephenville Christian School. By signing this form I affirm that this family is faithfully
seeking to live out their covenant with God in this church and is a member in good standing.

Pastor's Signature

Date

Name of Student