



Columbia County Christian School

PO Box 448 • St. Helens, OR 97051 • Phone: (503) 366-9209 • Fax: (866) 717-5568 • www.ccchristianschool.net

APPLICATION FOR ADMISSION

Please print in black ink or type

Applicant for grade: Kindergarten Elementary 1-5 Middle School (6-8)

Grade Applying for: _____

STUDENT INFORMATION

STUDENT'S FULL NAME: _____
(Last) (First) (Middle) (Name Used)

(Please print name exactly as it should appear on all permanent records)

Date of Birth ___/___/___ Place of Birth _____ Select one: M F

Name of Parents or Guardian _____

Present Address _____

_____ City State Zip Home Phone Cell Phone

Parent's Email Address: _____

Applicant lives with: (check all that apply)

- Father
- Stepfather
- Grandparent
- Mother
- Stepmother
- Guardian

Check any that apply: Applicant's

- Father is deceased
- Parents are divorced
- Mother is deceased
- Parents are separated

Father's Name: _____
Last First

Mother's Name: _____
Last First

Father's Occupation: _____

Mother's Occupation: _____

Firm Name: _____

Firm Name: _____

Business Address: _____

Business Address: _____

Service/Business Product: _____

Service/Business Product: _____

Telephone: _____

Telephone: _____

School applicant is attending or last attended: _____

Name School District

Address City State Zip Code Phone Number

Please list siblings below:

Name: M/F Age School or Occupation

Will any of the siblings listed above be attending CCCS? Yes No

To Be Completed by Parent or Guardian:

Has applicant ever been retained? Yes No

Comments:

Has applicant ever been tested or received special help for a reading or learning difficulty? Yes No
(If yes, please discuss the results and include a copy of the report.)

Has the applicant ever been diagnosed for or enrolled in any special education program or special school (e.g. resource room, L.D. placement, attention deficit, etc.)? Yes No If yes, please explain.

Does the applicant regularly require medication? Yes No If yes, please explain.

Has the applicant ever received severe disciplinary censure at school or from the community? Yes No
If yes, please explain.

Why do you desire to have your child at CCCS?

Complete the section below if you currently have a church home.

Family's Church _____	Address _____
Years in Attendance _____	
Pastor's Name _____	Phone Number _____
Please check the appropriate boxes:	
<input type="checkbox"/> Applicant attends church regularly	<input type="checkbox"/> Parents attend church regularly
<input type="checkbox"/> Belongs to church's youth group	<input type="checkbox"/> Applicant attends Sunday School
<input type="checkbox"/> Other _____	

Other Important Information:

Name of relative, if any now or previously at CCCS. (Please state relationship and/or grade)

We **first learned** of CCCS through: (Please check only **one**)

- Student(s) currently enrolled
- Catalog on private schools
- Pastor
- Newspaper
- Internet
- Other _____
- Parents of CCCS student
- Telephone book

The **two factors** most influencing us to apply to CCCS: (Please check only **two**)

- Location
- Academic reputation
- Christian philosophy
- Displeasure with public schools
- Recommendations of CCCS Families
- Desire to attend private school

- ◆ In order to keep grandparents of our current students informed, they will receive selected school mailings and invitations to special events. Please name living grandparents and give their addresses:

First Name _____ Last Name _____ Mailings: Yes__ No__
 Address _____ City _____ State _____ Zip _____

City	State	Zip	Last Name	Address	

First Name _____ Last Name _____ Mailings: Yes__ No__
 Address _____ City _____ State _____ Zip _____

First Name _____ Last Name _____ Mailings: Yes__ No__
 Address _____ City _____ State _____ Zip _____

First Name _____ Last Name _____ Mailings: Yes__ No__
 Address _____ City _____ State _____ Zip _____

PLEASE ENCLOSE WITH THIS APPLICATION

- ◆ Registration Fee per student (Non-Refundable)
- ◆ Copies of required forms listed on the Columbia County Christian School Admission Process page.
- ◆ Student Application (grades 6 – 8 only)
- ◆ Society Fees - \$100.00 per family (tax deductible)

Return to:

Columbia County Christian School
 Admissions
 P.O. Box 448
 Saint Helens, OR 97051

