

# APPLICATION FOR ADMISSION



*discover-develop-deploy*

Family (Last) Name \_\_\_\_\_ School Year 2019-2020

Father  Stepfather  Guardian

Name \_\_\_\_\_

*First*

*Last*

Living with child?  yes  no

Home Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone (\_\_\_\_) \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Occupation \_\_\_\_\_

Employer \_\_\_\_\_

Work Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Work Phone (\_\_\_\_) \_\_\_\_\_

Cell Phone (\_\_\_\_) \_\_\_\_\_

Educational Background — Major: \_\_\_\_\_

Minor: \_\_\_\_\_

Mother  Stepmother  Guardian

Name \_\_\_\_\_

*First*

*Last*

Living with child?  yes  no

Home Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone (\_\_\_\_) \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Occupation \_\_\_\_\_

Employer \_\_\_\_\_

Work Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Work Phone (\_\_\_\_) \_\_\_\_\_

Cell Phone (\_\_\_\_) \_\_\_\_\_

Educational Background — Major: \_\_\_\_\_

Minor: \_\_\_\_\_

Yes, include my personal information in the school directory

Include my  land line number

cell number

mailing address

email address(s)

No, do not include my personal information in the school directory

**2707 Maranatha Ct. SE, Turner, OR 97392**

**Phone: 503-391-9082**

**Fax: 503-378-0507**

**Email: info@crosshillchristian.com**

**2105 Keizer Rd. NE, Keizer, OR 97303**

**Phone: 503-566-8520**

**Fax: 503-304-2014**

**Email: keizer@crosshillchristian.com**

**Website: www.crosshillchristian.com**

Please list all children living in your household:

NAME	AGE	BOY OR GIRL

How did you hear about Crosshill Christian School?

- Internet
- Friend
- Other \_\_\_\_\_

Have you applied or will you be applying to any other schools this year?  yes  no

### SPIRITUAL BACKGROUND

What church does your family attend? \_\_\_\_\_

Number of years \_\_\_\_\_ Are you a member?  yes  no

*Please check all that apply:*     The family attends church regularly     The applicant attends church regularly  
 The family is currently looking for a church     The family does not attend church

Please give the name of a pastor, Sunday School teacher, or other church leader who is familiar with your family.

Name \_\_\_\_\_ Phone number (\_\_\_\_) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

We hereby certify that the information provided on this application is true and given with no reservations.

\_\_\_\_\_  
Father's Signature Date

\_\_\_\_\_  
Mother's Signature Date

All information provided in this application will remain confidential.

Crosshill Christian School does not discriminate against any person because of race, color, national or ethnic origin, gender, age or qualified disability.