



NEWNAN CHRISTIAN SCHOOL

Enrollment Application

1485 Hwy. 34 East, Suite B-2

Newnan, Georgia 30265

(770) 253-7175

FAX (770) 253-4776

Office Use Only

Grade applied for _____
Date application received _____
Application fee paid _____
Date registration paid _____
Date interviewed _____

Add'l registration required? _____

Date tested _____

Grade placed _____

Accept _____ Reject _____

Notes

Newnan Christian School is a privately-operated school, under the sponsorship of Bible Baptist Church, Inc., Newnan, Georgia, and receives no federal, state, or government assistance. We depend entirely on tuition, gifts, and fundraising projects for our financial needs. Newnan Christian School admits students of any race, color, and national or ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at our school and does not discriminate on the basis of race, color, and national or ethnic origin in administration of our educational policies, admissions policies, scholarship and loan programs, and athletic and other school-administered programs. The submission of an enrollment application does not insure admittance. Admittance depends upon qualifications and available space as applications are received. Admittance also depends on the approval of the administrator after an interview. Initial admittance and ongoing matriculation in Newnan Christian School is tentative and may be withdrawn if, in the judgment of the administration, the student and/or guardians are not in compliance with the policies of Newnan Christian School as indicated in the Parent/Student Handbook.

P E R S O N A L	Last name		First name		Middle	Date
	Street Address				Mailing Address (if different)	School year
	City		State, Zip		County	Home Phone
	Date of Birth	County, City, State of Birth			Social Security Number	Sex Race
	Father's Name or Guardian with Custody		Employer		Business Phone	Cell Phone
	Mother's Name or Guardian with Custody		Employer		Business Phone	Cell Phone
	Marital Status of Parents Married _____ Widowed _____ Divorced _____ Separated _____				Child Lives With: Both parents _____ Father _____ Mother _____ Guardian _____ If guardian specify relationship:	
	List names and ages of brothers and sisters of applicant				E-Mail Address	
	Other than a parent, whom should we contact in case of emergency?				Relationship	
	Home Phone		Work Phone		Cell Phone	

E D U C A T I O N	School last attended		Grade last year	Grade applied for
	Any outstanding financial balance with previous school(s)? NO _____ YES _____			
	Street Address		City, State	
	Grade Average A _____ B _____ C _____ D _____ F _____		Has student repeated any grades? NO _____ YES _____ If yes, explain:	
			Has student ever had any discipline or emotional problems in school? NO _____ YES _____ If yes, explain:	
	Ever suspended? NO _____ YES _____ If yes, please explain:			
	Ever expelled? NO _____ YES _____ If yes, please explain:			
	Has the applicant ever been denied enrollment in any other school? NO _____ YES _____ If yes, explain:			
	Special learning disabilities			
	Reason for sending applicant to Newnan Christian School			
Where did you first hear of NCS?				

S P I R I T U A L	Church Affiliation:	Name of Church:
	Member _____	Name of Pastor:
	Attend Regularly _____	Address:
	Attend Occasionally _____	Church Denomination:
	List any unusual factors in applicant's life (divorce, adoption, arrests, questioned or detained by legal authorities, etc.)	
Is applicant saved?		

M E D I C A L	Family Doctor	Phone Number
	List any allergies or physical limitations	
	List any medical or emotional problems	
	List any medications applicant takes daily	
	If needed, do we have your permission to administer non-aspirin pain reliever? YES <input type="checkbox"/> NO <input type="checkbox"/>	

P E	For <u>GRADES 4 AND ABOVE</u> , please specify sizes below for physical education uniform:				
	SHIRT	Adult XLarge <input type="checkbox"/>	Adult Large <input type="checkbox"/> Youth Large <input type="checkbox"/>	Adult Medium <input type="checkbox"/> Youth Medium <input type="checkbox"/>	Adult Small <input type="checkbox"/> Youth Small <input type="checkbox"/>
	SWEATPANTS (Boys)	Adult XLarge <input type="checkbox"/>	Adult Large <input type="checkbox"/> Youth Large <input type="checkbox"/>	Adult Medium <input type="checkbox"/> Youth Medium <input type="checkbox"/>	Adult Small <input type="checkbox"/> Youth Small <input type="checkbox"/>
	CULOTTES (Girls)	Waist Measurement or Culotte Size			

S I G N A T U R E	In making this application, I understand that if my student is matriculated in Newnan Christian School:	
	<ol style="list-style-type: none"> 1. My child will go on scheduled field trips and other school activities off-campus and I will not hold the school liable for injury which may occur during these functions. 2. The staff has my authorization to administer first aid and/or give or obtain emergency medical assistance including admitting my child to the hospital if needed and I release them from any further liability in connection therewith. I also assume full financial responsibility for any such medical service rendered. 3. The administration has full discretion in the discipline of my child and I am aware and approve of corporal punishment in the form of spanking being used as a means of discipline. 4. I will be supportive and cooperative of the staff in attempting to educate and train my student. I will bring any questions and criticisms directly to the administration and I agree to not be publicly critical of school policy. 5. I am responsible to pay the tuition and related expenses in full and on time and I understand that report cards and other records will not be released until these are paid and my child may not be permitted to attend class if for some unforeseen reason my account is delinquent more than 30 days. 6. I understand that if my child is accepted as a student at Newnan Christian School, <u>students are enrolled for the entire academic year</u>. I agree to do everything possible to have my child complete the year understanding that an enrolled student has a reserved place for a year--a privilege which may be denied to another family as a result of my child's enrollment. I also understand that if my child is withdrawn or expelled, that <u>this year's tuition and fees are still due</u> and registration and tuition paid is non-refundable except in the case of family move 35 miles or more out of this area. 7. I am aware and approve of the school's determination to maintain a drug-free, non-violent, morally pure, and honest environment. I do support the administration's use of drug testing and/or polygraph tests when deemed necessary to maintain this environment. 8. For advertising purposes, should my child's picture be needed, I give permission for my child's picture to be used. 9. These terms are valid only after a student is accepted for matriculation by the administration and the registration fee is paid. 	
	Father's Signature	Mother's Signature
	Social Security Number	Social Security Number
	Signature of person responsible for bill if other than above	
Social Security Number		