

***STUDENT
INFORMATION
AND
PARENTAL
AGREEMENT FORM***

"TRAIN UP A CHILD..."

***COEUR D'ALENE
CHRISTIAN
SCHOOL***

6439 N. 4TH STREET, DALTON GARDENS, ID 83815

STUDENT INFORMATION

NAME _____ DATE _____
 LAST FIRST MIDDLE
ADDRESS _____
CITY _____ STATE _____ ZIP _____
TELEPHONE _____
AGE _____ SEX _____ BIRTHDATE _____
SCHOOL LAST ATTENDED _____ LAST GRADE COMPLETED _____
ADDRESS _____

K4/K5 STUDENTS ATTENDING: ___ AM ONLY ___ 3FULL&2HALF ___ FULL TIME

FAMILY INFORMATION

FATHER'S NAME _____
EMPLOYMENT _____
POSITION _____ BUSINESS PHONE _____
FATHER'S CELL PHONE _____
MOTHER'S NAME _____
EMPLOYMENT _____
POSITION _____
MOTHER'S CELL PHONE _____
EMERGENCY PHONE NUMBERS (OTHER THAN NUMBERS ABOVE - 2 PLEASE)

MARRIED _____ DIVORCED _____ WIDOWED _____ SEPARATED _____ SINGLE _____

OTHER CHILDREN IN FAMILY:

NAME _____	AGE _____
NAME _____	AGE _____
NAME _____	AGE _____
NAME _____	AGE _____

RELIGIOUS INFORMATION

CHURCH ATTENDING _____
FATHER ATTENDS? _____ MOTHER ATTENDS? _____ CHILDREN ATTEND? _____

***ALL GRADES PARTICIPATE IN CHAPEL, BIBLE CLASSES AND MEMORY VERSES ON A DAILY BASIS.**

MEDICAL INFORMATION

FAMILY PHYSICIAN _____ **PHONE** _____

DOES STUDENT HAVE ANY PHYSICAL DEFECTS OR ALLERGIES? _____

EXPLAIN: _____

IS STUDENT TAKING ANY DAILY MEDICATIONS? _____

EXPLAIN: _____

PLEASE PROVIDE A COPY OF BIRTH CERTIFICATE AND IMMUNIZATIONS.

SCHOLASTIC INFORMATION

PLEASE INDICATE ACADEMIC LEVEL OF STUDENT'S PREVIOUS WORK:

EXCELLENT: _____ **GOOD** _____ **AVERAGE** _____ **POOR** _____

HAS STUDENT EVER BEEN DIAGNOSED WITH ANY LEARNING DISABILITIES? _____

EXPLAIN: _____

HAS STUDENT EVER FAILED A GRADE OR SUBJECT IN SCHOOL? _____

EXPLAIN: _____

**HAS STUDENT EVER BEEN EXPELLED, DISMISSED, SUSPENDED OR REFUSED
ADMISSION TO ANOTHER SCHOOL?** _____ **EXPLAIN:** _____

HAS STUDENT EVER HAD DISCIPLINARY DIFFICULTIES? _____

EXPLAIN: _____

HAS STUDENT EVER BEEN IN TROUBLE WITH THE LAW, ARRESTED, ETC.? _____

EXPLAIN: _____

HAS STUDENT EVER USED TOBACCO OR DRUGS OF ANY KIND? _____

EXPLAIN: _____

GENERAL INFORMATION

THIS INFORMATION FORM MUST BE FILLED OUT COMPLETELY FOR BOTH NEW AND RETURNING STUDENTS BEFORE ENROLLMENT CAN BE PROCESSED. AN INTERVIEW WITH THE PARENTS AND THE CHILD WILL BE REQUIRED OF NEW STUDENTS BEFORE FINAL ACCEPTANCE; PLACEMENT TESTING MAY ALSO BE REQUIRED. UPON ACCEPTANCE, A REGISTRATION FEE OF \$ _____ MUST ACCOMPANY THIS FORM AND IS NOT REFUNDABLE.

FOR YOUR CONVENIENCE IN MEETING YOUR FINANCIAL OBLIGATIONS, TUITION IS DIVIDED INTO TEN INSTALLMENTS. THE FIRST PAYMENT IS DUE ON OR BEFORE THE FIRST DAY OF SCHOOL; THE TENTH PAYMENT IS DUE ON OR BEFORE JUNE 1ST. FINAL REPORT CARDS CANNOT BE RELEASED UNTIL ALL TUITION AND FEES ARE PAID.

YOU MUST PROVIDE 30 DAYS NOTICE IN WRITING IF PLANNING ON LEAVING THE SCHOOL PRIOR TO THE END OF THE SCHOOL YEAR. YOU WILL BE RESPONSIBLE FOR THE ENTIRE TUITION AMOUNT OTHERWISE.

****I AM AWARE THAT I CAN RECEIVE A 5% TUITION DISCOUNT BY:**

- A. PAYING IN FULL BY AUGUST 31ST;**
 - B. RECRUITING A NEW STUDENT (MUST BE ROOM IN THAT GRADE; NOT FROM YOUR FAMILY; AND LIKE ANY NEW STUDENT, MUST BE ONE WE CAN ACCEPT).**
- NOTE: ONLY ONE DISCOUNT OPTION PER FAMILY.**

****I AGREE TO PAY MY FINANCIAL OBLIGATIONS TO THE SCHOOL ON THE DUE DATE.**

LATE FEES WILL BE CHARGED ON ALL PAST DUE ACCOUNTS.

****I UNDERSTAND THAT IF PROPER ARRANGEMENTS ARE NOT MADE ON PAST DUE ACCOUNTS, MY CHILD WILL NOT BE ALLOWED TO CONTINUE IN SCHOOL.**

****I GIVE PERMISSION FOR MY CHILD TO PARTICIPATE IN ALL SCHOOL ACTIVITIES, INCLUDING SPORTS AND SCHOOL-SPONSORED TRIPS AWAY FROM THE SCHOOL PREMISES, AND ABSOLVE THE SCHOOL FROM LIABILITY TO ME OR MY CHILD BECAUSE OF ANY INJURY TO MY CHILD AT SCHOOL OR DURING ANY SCHOOL ACTIVITY.**

HOMEWORK

****I AGREE TO SUPPORT THE HIGH ACADEMIC STANDARD OF THE SCHOOL BY PROVIDING A PLACE AT HOME FOR MY CHILD TO STUDY, AND GIVING MY CHILD ENCOURAGEMENT IN THE COMPLETION OF ANY HOMEWORK ASSIGNMENTS.**

****I HAVE READ THE PARENT/STUDENT HANDBOOK AND APPRECIATE THE STANDARDS OF THE SCHOOL. I WILL NOT TOLERATE PROFANITY, OBSCENITY IN WORD OR ACTION, DISHONOR TO GOD OR HIS WORD, OR DISRESPECT TO THE PERSONNEL OF THE SCHOOL. I HEREBY AGREE TO SUPPORT ALL REGULATIONS OF THE SCHOOL IN THE STUDENT'S BEHALF AND AUTHORIZE THIS SCHOOL TO DISCIPLINE, AS IT DEEMS WISE AND EXPEDIENT FOR THE TRAINING OF MY CHILD.**

****I UNDERSTAND THAT THE SCHOOL RESERVES THE RIGHT TO DISMISS ANY CHILD WHO FAILS TO COMPLY WITH THE ESTABLISHED REGULATIONS OR WHOSE FINANCIAL OBLIGATIONS REMAIN UNPAID.**

****I UNDERSTAND THE TERMS STATED ON THIS INFORMATION/PARENTAL AGREEMENT FORM AND AGREE THERETO.**

**SIGNATURE OF FATHER
(OR LEGAL GUARDIAN)**

**SIGNATURE OF MOTHER
(OR LEGAL GUARDIAN)**

DATE _____ **DATE** _____