

Edgewood Christian School  
P O Box 949  
Edgewood N.M. 87015  
505-281-5091  
Fax: 505-286-5091 [www.edgewoodbelievers.org](http://www.edgewoodbelievers.org)

Student Application

Please print or type the following information and return the form to the school. The non-refundable registration fee of \$100.00 is due upon submission of this application. Edgewood Christian School does not discriminate on the basis of race, national origin, creed or gender. We do reserve the right to refuse entrance to any student who does not meet our specified requirements.

**Date of Application:** \_\_\_\_\_

**Tuition Amount:** \_\_\_\_\_ (to be completed by administrator)

**General Information:**

**Name** \_\_\_\_\_ **Grade Desired** \_\_\_\_\_

**Age** \_\_\_\_\_ **Birth Date** \_\_\_\_\_

**Address** \_\_\_\_\_ **City/St** \_\_\_\_\_

**Zip Code** \_\_\_\_\_ **Home Phone** \_\_\_\_\_ **Cell Phone** \_\_\_\_\_

**E-mail Address** \_\_\_\_\_

**Last Grade Completed** \_\_\_\_\_ **Grades repeated(if any)** \_\_\_\_\_

**Parent/Guardian Names** \_\_\_\_\_

**Last school attended, from which we may request records (please include name, address, and phone number)**

\_\_\_\_\_  
\_\_\_\_\_

**Reason for transfer** \_\_\_\_\_

**Has your child ever been suspended or expelled from school?** \_\_\_\_\_ **If yes, please explain**

\_\_\_\_\_  
\_\_\_\_\_

**Father's Employment** \_\_\_\_\_ **Phone** \_\_\_\_\_

**Mother's Employment** \_\_\_\_\_ **Phone** \_\_\_\_\_

**Student Application**

**In the event of an emergency, if parents not available, please list two people whom we may contact.**

**Name** \_\_\_\_\_ **Phone** \_\_\_\_\_

**Name** \_\_\_\_\_ **Phone** \_\_\_\_\_

**Personality Information:**

**Briefly describe your child's personality and special attributes** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Please list any serious allergies** \_\_\_\_\_

**Parent Inquiry**

**Does your family have a church of preference?** \_\_\_\_\_

**Why have you chosen our school?** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**What is your view on respect for authority, and how do you instruct your child on this issue?** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**What form of discipline do you use at home?** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**By signing this application, you agree to the terms and conditions. If you should decide to withdraw your child for any reason after the first 30 days of school, you will be charged a withdrawal fee of \$250.00, as it puts a financial hardship on the school when a child is withdrawn early.**

**Parent Signature** \_\_\_\_\_

**Parent Signature** \_\_\_\_\_