

## Student Information

2022-23

• **DATE:** \_\_\_\_\_

### General Information

Name: Last \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_ Nickname: \_\_\_\_\_

Sex: Female \_\_\_ Male \_\_\_ Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Grade Entering: \_\_\_\_\_ Grade last attended \_\_\_\_\_

Home Phone: \_\_\_\_\_ Student Cell Phone: \_\_\_\_\_

Race (IN Req.):  White  Black  Hispanic  Asian  Multiracial  Other \_\_\_\_\_

Primary Language \_\_\_\_\_ **Student resides with:**  Both parents  Mother  Father  Guardian

Complete Address \_\_\_\_\_

Previous School and Location (if not CCS) \_\_\_\_\_

Has the applicant ever repeated a grade? Yes \_\_\_ No \_\_\_ If yes, state the grade repeated and the reason for repeating.  
\_\_\_\_\_

Has the applicant been suspended from school? Yes \_\_\_ No \_\_\_ If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_

Has the applicant been expelled from school? Yes \_\_\_ No \_\_\_ If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_

### Physical Information

Does the applicant have any mental, emotional, or physical disabilities which would require special teachers and/or accommodations? Yes \_\_\_ No \_\_\_ If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Did the applicant miss more than ten days of school last year? Yes \_\_\_ No \_\_\_ If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Does the applicant currently take medication? Yes \_\_\_ No \_\_\_ If yes, please indicate the name of the medicine, dosage, frequency, and side effects.  
\_\_\_\_\_  
\_\_\_\_\_

### Social/Emotional Information

Has the applicant experienced any social, emotional, or disciplinary problems at a previous school? Yes \_\_\_ No \_\_\_  
If yes, please explain. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Has the applicant ever received Special Ed or IEP Services? Yes \_\_\_ No \_\_\_ If yes, please explain:  
\_\_\_\_\_  
\_\_\_\_\_

### Academic Information (check the appropriate response)

The applicant's attitude toward learning in school \_\_\_Very good \_\_\_Good \_\_\_Fair \_\_\_Poor

The applicant's level of self-motivation \_\_\_Very good \_\_\_Good \_\_\_Fair \_\_\_Poor

The level of applicant's overall academic ability \_\_\_Very good \_\_\_Good \_\_\_Fair \_\_\_Poor

How would you rate the applicant in reading? \_\_\_Very good \_\_\_Good \_\_\_Fair \_\_\_Poor

How would you rate the applicant in mathematics? \_\_\_Very good \_\_\_Good \_\_\_Fair \_\_\_Poor

### Religious Information

Church Attendance: Full Time \_\_\_\_\_ Frequently \_\_\_\_\_ Sometimes \_\_\_\_\_ Looking for a Church \_\_\_\_\_

Name of your Church \_\_\_\_\_ Church Phone # \_\_\_\_\_

**Parent / Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_