

# Jim Elliot Christian High School

Accredited ACSI / WASC

## APPLICATION FOR ADMISSION

Please type or print in black ink

Attach  
Applicant's  
Photograph  
here

Grade Applying for: \_\_\_\_\_ Application date \_\_\_\_\_

STUDENT'S NAME: \_\_\_\_\_

(Last)

(First)

(Middle)

(Name Used)

(Please print name exactly as it should appear on all permanent records)

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Place of Birth \_\_\_\_\_  Male  Female Social Security # \_\_\_\_/\_\_\_\_/\_\_\_\_

Name of Parents or Guardian \_\_\_\_\_

Present Address: \_\_\_\_\_

Address

City

State

Zip

Home Phone \_\_\_\_\_

Mom's Cell Phone \_\_\_\_\_

Dad's Cell Phone \_\_\_\_\_

Family Email Address \_\_\_\_\_

Applicant lives with: (check all that apply)

Father

Stepfather

Grandparent

Mother

Stepmother

Guardian

Check any that apply: Applicant's

Father is deceased

Parents are divorced

Mother is deceased

Parents are separated

Father's Name: \_\_\_\_\_

Last

First

Mother's Name: \_\_\_\_\_

Last

First

Father's Occupation: \_\_\_\_\_

Mother's Occupation: \_\_\_\_\_

Firm Name: \_\_\_\_\_

Firm Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

Business Address: \_\_\_\_\_

Business Phone: \_\_\_\_\_

Business Phone: \_\_\_\_\_

School applicant is attending/last attended: \_\_\_\_\_

School Name

School District

School Address

City

State

Zip

Phone Number

Student's Name, Address and Phone Number may be listed in the Student Directory  Yes  No

Please list siblings below:

Name: \_\_\_\_\_ M/F \_\_\_\_\_ Age \_\_\_\_\_ School /Occupation \_\_\_\_\_ JECHS Attendee \_\_\_\_\_ JECHS Alumni \_\_\_\_\_

Are you planning for any of these siblings to apply to Jim Elliot Christian High School in the future?  Yes  No

Are you alumni of JECHS? \_\_\_\_ If so what year did you graduate \_\_\_\_\_ Maiden Name (if applicable) \_\_\_\_\_

Name of relative, now or previously, enrolled at JECHS

Name

Relationship to Applicant

Has applicant ever been retained?  Yes  No (If yes, please explain.)

Has applicant ever been tested or received special help for a reading or learning difficulty?  Yes  No  
(If yes, please discuss the results and include a copy of the report.)

Has the applicant ever been diagnosed for, or enrolled in, any special education or special school?  
 Yes  No (If yes, please explain.)

Does the applicant regularly require medication?  Yes  No (If yes, please explain.)

Has the applicant ever received severe disciplinary censure at school or from the community (i.e., suspension, expulsion, arrest, community service, etc.)  Yes  No (If yes, please explain.)

Parents: why do you desire for your child to attend Jim Elliot Christian High School?

Parents: please make a statement describing your personal Christian experience and faith.  
(An additional page may be used if desired)

**FAMILY'S CHURCH:** \_\_\_\_\_

Pastor's Name: \_\_\_\_\_ Phone Number \_\_\_\_\_

Years in Attendance: \_\_\_\_\_ How often does your family attend this church?  Weekly  Monthly  Occasionally.

Please check the appropriate boxes:

- Applicant participates in church's youth group  
 Applicant attends worship service regularly  Dad attends worship service regularly  Sunday School or Bible Study  
 Applicant attends Sunday School/Bible Study  Mom attends worship service regularly  Sunday School or Bible Study  
 Applicant serves at church Position(s)? \_\_\_\_\_

**References:**

Please list the three people to whom you have given reference forms. (They may not be related to the applicant.) References must be turned in with application in a sealed envelope with signature of person making the reference across the envelope seal. Home-schooled students who have questions about securing references should contact the JECHS office immediately.

*For the church, please indicate the applicant's pastor, youth pastor or other church worker who is familiar with the applicant.*

**Church Reference:** Name \_\_\_\_\_ Phone \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code \_\_\_\_\_

*The first school reference must be from the applicant's current school counselor or principal.*

**Administrator Reference:** Name \_\_\_\_\_ Phone \_\_\_\_\_

*The second school reference must be from one of the applicant's current teachers.*

**Teacher Reference Name** \_\_\_\_\_ Phone \_\_\_\_\_

**Other Important Information**

We first learned of JECHS through:

- Student(s) currently enrolled  Alumni  Minister  Newspaper  
 Parents of JECHS student  Phone Book  Other \_\_\_\_\_

The top factors most influencing us to apply at JECHS are:

- Location  Academics  Christian philosophy  Dissatisfaction with public schools  
 Teachers  Safety  Positive school environment  Desire to attend private school  
 Recommendations of JECHS families  Strength of extracurricular programs

In order to keep grandparents of our current students informed about school activities, they will receive the school's newsletter and invitations to special events. If you would like this, please provide the following information:

\_\_\_\_\_  
First Name Last Name Address City State Zip

\_\_\_\_\_  
First Name Last Name Address City State Zip

\_\_\_\_\_  
First Name Last Name Address City State Zip

## **PARENTAL COMMITMENT**

- A. In case of emergency, illness or accident to my child, the school is authorized to take my child to an emergency hospital or licensed physician. The school will notify me as soon as possible. I understand that I am responsible for any medical expenses incurred.
- B. I give permission for my child to take part in all school activities, including school sponsored field trips and social events away from the school premises and absolve the school from liability to me or my child because of injury to my child at school, during any activity or while being transported to or from events.
- C. I have read and understand the Tuitions and Fees and agree to be personally responsible for tuition and other expenses incurred by the school on behalf of my student.
- D. I grant permission to the school to use any photographs taken in the normal course of the school year and displayed in the school yearbook and advertising/promotional materials, including but not limited to brochures, The Soar, and the website.
- E. I recognize that attendance at Jim Elliot Christian High School is a privilege, not a right; therefore, I recognize that if my student becomes undesirable based on the standards of JECHS, the school reserves the right to suspend or expel him/her from school.
- F. I agree to support and abide by the school policies and procedures.
- G. I will loyally support JECHS through praying for its programs and by donating time and money, as I am able.
- H. I will support the faculty and administration of the school and agree to make every effort to resolve conflicts in a Biblical manner.
- I. I have read and accept the above statements and will abide by the rules, regulations and decisions set forth by JECHS.

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## **STUDENT COMMITMENT**

- A. It is my desire to attend JECHS. I recognize that attendance at JECHS is a privilege, not a right; therefore, I recognize that if I become undesirable based on the standards of JECHS, the school reserves the right to suspend or expel me from school.
- B. I agree to support and abide by the school policies and procedures.
- C. I will loyally support JECHS through praying for its programs, students, and staff.
- D. I will support the faculty and administration of the school and agree to make every effort to resolve conflicts in a Biblical manner.
- E. I understand that the standards of JECHS do not tolerate profanity, vulgarity, obscenity, racial remarks in word or action, dishonor to God and the Word of God, taking the Lord's name in vain, disrespect to the personnel of the school or parents, or continued disobedience to the established policies of the school.
- F. I understand the expulsion is probable for the following offenses when occurring at any time: involvement with drugs, involvement with alcohol, gang affiliation, threat of harm to staff or students, possession of any weapon on campus, and sexual immorality.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_