



Glorifying God Through Spiritual and Academic Excellence

8555 Uva Drive P.O. Box 9 Redwood Valley CA 95470 485-8778

Application For Admission 2010-2011

Student's Full Name: _____ Grade Entering _____

Social Security Number: _____

Age: _____ Date of Birth: _____

Interested in Car Pooling

Does child live with both parents? _____ If not, please explain: _____

Mother's Name: _____

Home Address: _____ City: _____ Zip: _____

Mailing Address _____ City: _____ Zip: _____

Email Address: _____ Cell Phone #: _____ Home Phone # _____

Father's Name: _____

Home Address: _____ City: _____ Zip: _____

Mailing Address: _____ City: _____ Zip: _____

Email Address: _____ Cell Phone #: _____ Home Phone # _____

Family Information:

Father's Occupation: _____ Employer: _____

Employer's Address: _____ Work Phone #: _____

Is Father and/or Grandfather a full time Pastor in either Lake or Mendocino County? _____

If yes, Church Name: _____ Church Phone #: _____

Mother's Occupation: _____ Employer: _____

Employer's Address: _____ Work Phone #: _____

Emergency Contacts:

Name: _____ Relationship: _____ Phone #: _____

Name: _____ Relationship: _____ Phone #: _____

Please list all other children living with your family:

Name: _____ Age _____ Name of school they attend: _____

OFFICE USE ONLY

Date Received

- Interview
- Testing
- Letters of Reference
- Report Card
- Transcript
- Parent Commitment
- Immunizations
- Health Exam
- Birth Certificate
- Medical Consent
- Enrollment Fee

Date Accepted

Name: _____ Age _____ Name of school they attend: _____

Name: _____ Age _____ Name of school they attend: _____

Briefly state why you would like your child to attend this school: _____

Student Information:

School last attended: _____

Address: _____

Name of Principal: _____ Name of Teacher: _____

Grade in school last year: _____ Passed: _____ Retained: _____ Expelled: _____ Suspended: _____

Explain: _____

Does your child have any health issues or physical problems (illness or disease, vision, hearing, speech, allergies, recent operations), of which we should be aware? Yes: _____ No: _____

If "Yes" to either, please explain: _____

Does your child have any special problems or areas of concern which might affect his/her education:

Behavioral issues: _____ Learning disabilities: _____ Emotional: _____ Handicaps: _____

Custody issues: _____ Family life: _____

Briefly explain those checked above _____

Is your child seeing a therapist or counselor for any reason? Yes: _____ No: _____

If "Yes" please

explain: _____

Church Information:

We attend church at: _____

Our church attendance is: Weekly: _____ Occasionally: _____ Rarely: _____

What is your church involvement? (Offices held or ministries serving in, etc.)

Husband: _____

Wife: _____

Have you read and do you support Deep Valley Christian School's Statement of Faith? _____

Please return completed Applications to the Bookkeeping Office, Attention: Peggy Huffman

Additional registration documents will be provided at that time.