



Student Name: \_\_\_\_\_

Academic Year: \_\_\_\_\_ Date: \_\_\_\_\_

We'd like to get to know you. Please complete the following questions. Answer each question and be complete and specific.

Note 'N/A' if the question is 'Not Applicable' or does not apply to you. This questionnaire will be used in the student interview and the information will factor into enrollment decisions.

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**PARENTS:** Please complete the following questions regarding your child. (Continue on a separate sheet if needed.)

1. Why do you want your child to attend Abundant Life Christian School? \_\_\_\_\_

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

2. What are your expectations for your child for the coming year? \_\_\_\_\_

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

3. In the following areas, what would be helpful for us to know about your child?

**Academic:** \_\_\_\_\_

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

**Spiritual:** \_\_\_\_\_

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

**Social:** \_\_\_\_\_

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

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**Behavioral:** \_\_\_\_\_

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**Other:** \_\_\_\_\_

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4. How well does your son/daughter speak and understand English? \_\_\_\_\_

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5. How well can your son/daughter read and write in English? \_\_\_\_\_

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6. Is your child on any medication? \_\_\_\_\_

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7. Has your child ever been (check all that apply):

- Suspended, expelled, or asked to withdraw voluntarily
- Placed on academic probation
- Referred to juvenile authorities

If applicable, please explain \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

8. Has your child been accused or charged with lying, cheating or stealing in any context, sexual misconduct, drug usage, illegal alcohol consumption or tobacco?

- Yes       No

If so, please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

9. Please list any/all other student issues not previously listed (e.g., court orders, counseling issues, psychological evaluations rehabilitation programs, etc.).

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

# Special Needs

10. Is there an awareness or suspicion of any learning differences or difficulties with your child?

Yes       No

If so, please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

11. Has your child been referred for special education testing or screening in regard to any learning difference, disability, impairment, behavioral problem, etc.? If so, please explain the outcome: \_\_\_\_\_

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

12. Has your child ever had an I.E.P. (Individual Education Program)?       Yes       No

If there is an I.E.P. currently in use, please describe the program: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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If yes, please provide ALCS with a copy of the I.E.P. evaluation and program.

***PARENT/GUARDIAN AFFIRMATION: Each parent/guardian must sign here.***

I hereby affirm that all of the information contained in this application is true, accurate and complete to the best of my knowledge and I agree that providing any false information or withholding pertinent information is sufficient reason for rejection of this application or for dismissal of student at a later date. I consent to have administration verify information contained herein.

I further understand that I may be asked for additional written information concerning such items as academic and behavioral records. I further agree that if my student has been suspended, expelled or involved in the criminal or juvenile justice system that I will supply all documents substantiating those circumstances. I understand and submit to the policy of ALCS that a student with such a record must first successfully complete not less than a full semester elsewhere before becoming eligible to enroll here. *I understand that the first year is probationary for all students.*

\_\_\_\_\_  
Father's / Guardian's Signature

\_\_\_\_\_  
Mother's / Guardian's Signature

**STUDENT:** Please complete the following questions about yourself. This section must be completed by the student. Continue on a separate sheet if needed.

1. Why do you want to be a student at Abundant Life Christian School? \_\_\_\_\_

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2. What are your expectations as a student of Abundant Life Christian School? \_\_\_\_\_

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3. What contributions will you make as a student at Abundant Life Christian School? \_\_\_\_\_

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4. What is (are) your favorite subject(s)? \_\_\_\_\_

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5. What subjects are most difficult for you? \_\_\_\_\_

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6. What is your favorite hobby or extra-curricular activity outside of school? \_\_\_\_\_

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7. What is most important to you at this time in your life? \_\_\_\_\_

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8. Whom do you most admire at this time and why? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

9. Do you go to church or youth group? Tell us about your church or youth group. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

10. How do you spend time with God? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

11. Have you traveled outside of your home country before. If so, where and when? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

12. What is your favorite: food, music group, movie, color, and book/author? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

13. Looking back at last year, share a few of your accomplishments. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

14. List two realistic goals you have for your life – a short-term goal to reach this year and a long-term goal to be reached in the next five years. \_\_\_\_\_

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**STUDENT AFFIRMATION:** with my signature below, I acknowledge that I have answered each the questions above honestly and in my own words. The information I listed is true, accurate, and complete.

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**Student’s Signature** **Date**

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**Father’s / Guardian’s Signature** **Date**

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**Mother’s / Guardian’s Signature** **Date**