

Attach a recent student photo



To Seek, Know, Live and Proclaim the Truth

Office of Admission
Student Application Form

Application for grade ___ for term commencing Fall ___ Winter ___ Spring ___ Year 20___

STUDENT INFORMATION

Applicant's Full Legal Name _____ Goes by _____

Birth date ___/___/___ Birth Place _____ Male ___ Female ___

Home Address _____

City _____ State _____ Zip _____

Home Phone(_____) _____ E-mail Address _____

Resides in School District # _____ Current Grade: 7 8 9 10 11 12 (circle one)

Current School Name and Address:

With whom does the applicant live? _____

FAMILY INFORMATION

Mother/Guardian

Full Name: Ms./Mrs./Dr./Rev. _____

Home Address _____

City _____ State _____ Zip _____

Home Phone (_____) _____ Cell Phone (_____) _____

E-mail Address _____

Profession _____ Employer _____

Work Phone (_____) _____

Hobbies/Interests/Expertise _____

I give permission for the above information (profession, hobbies/interests) to The Parent Connection (school volunteer information.)

Father/Guardian

Full Name: Mr./Dr./Rev. _____

Home Address _____

City _____ State _____ Zip _____

Home Phone (____) _____ Cell Phone (____) _____

E-mail Address _____

Profession _____ Employer _____

Work Phone (____) _____

Hobbies/Interests/Expertise _____

____ I give permission for the above information (profession, hobbies/interests) to The Parent Connection (school volunteer information.)

Parents are:

____ Married ____ Separated ____ Divorced ____ Single Parent

____ Mother Deceased ____ Father Deceased ____ Mother Remarried ____ Father Remarried

Stepmother

Full Name: Ms./Mrs./Dr./Rev. _____

Home Address _____

City _____ State _____ Zip _____

Home Phone (____) _____ Cell Phone (____) _____

E-mail Address _____

Profession _____ Employer _____

Work Phone (____) _____

Hobbies/Interests/Expertise _____

____ I give permission for the above information (profession, hobbies/interests) to The Parent Connection (school volunteer information.)

Stepfather

Full Name: Mr./Dr./Rev. _____

Home Address _____

City _____ State _____ Zip _____

Home Phone (____) _____ Cell Phone (____) _____

E-mail Address _____

Profession _____ Employer _____

Work Phone (____) _____

Hobbies/Interests/Expertise _____

____ I give permission for the above information (profession, hobbies/interests) to The Parent Connection (school volunteer information.)

SIBLINGS

List other children in the family:

Name Birthdate School Attending Current Grade

CHURCH INFORMATION

Church family attends _____

Denomination _____ Are you a member? _____

Address _____

City _____ State _____ Zip _____

Pastor/Youth Pastor _____

ACADEMIC INFORMATION

List chronologically (beginning with the most recent) all schools attended, including home school. If there was any tutored study, please describe course and give dates.

Date Grade Name of School Mailing Address of School incl. City and Zip

Date	Grade	Name of School	Mailing Address of School incl. City and Zip
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

The student's scholastic grades have been (check one):

____ Superior ____ Above Average ____ Average ____ Below Average

Any grade repeated? _____

To what other schools are you applying? _____

Would you like to be sent an application for financial aid? Yes _____ No _____

SWCHS STATEMENT OF FAITH

1. We believe the Bible to be the inspired, the only infallible, authoritative, inerrant Word of God.
2. We believe there is one God, eternally existent in three persons - Father, Son and Holy Spirit.
3. We believe that Creation was an act of God.
4. We believe in the Deity of Christ, His virgin birth, His sinless life, His miracles, His vicarious and atoning death, His resurrection, His ascension to the right hand of the Father, and in His eventual personal return in power and glory.
5. We believe in the absolute necessity of regeneration by the Holy Spirit for salvation because of the exceeding sinfulness of human nature; and that individuals are justified on the single ground of faith in the shed blood of Christ and that only by God's grace and through faith we are saved.
6. We believe in the resurrection of both the saved and the lost; they that are saved unto the resurrection of life, and they that are lost unto the resurrection of damnation.
7. We believe in the spiritual unity of believers in our Lord Jesus Christ.
8. We believe in the present ministry of the Holy Spirit by whose indwelling the Christian is enabled to live a godly life.

By making application I state that I have read and live by the above Statement of Faith, and am willing to have my child trained in accordance with this Statement. I also understand that:

- A. My student will go on scheduled field trips and other school activities.
- B. The administration and teachers will use wise discretion in the correction and discipline of my student as set forth in the Scriptures.
- C. The administration has full responsibility for placing my student in the proper grade.
- D. My cooperation is expected in (a) the regular payment of tuition (b) practical help (c) faithful prayer (d) special gifts (tuition does not cover all costs).
- E. SWCHS is a private school: attendance is a privilege and not a right. SWCHS reserves the right to require the withdrawal of a student at any time if such action is deemed necessary.

Signature of both parents or legal guardians preferred, one will be accepted:

Father _____ Mother _____

I have read and live by the Statement of Faith, and agree to "E" as stated above.

Student's signature _____ Date _____

Please send this form to SWCHS with your non-refundable \$75 application fee.

Southwest Christian High School
 Attn: Admission Office
 103 Peavey Road
 Chaska, MN 55318
 952-556-0040
www.swchs.org

Southwest Christian High School, Inc. admits students of any race, color, national and ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available at the school. It does not discriminate on the basis of race, color, national and ethnic origin in administration of its educational policies, admission policies, scholarship and loan programs, and athletic and other school-administrated programs.

For office use only:
 Date of receipt of application and fee: _____ Check # _____