

Preschool
 Elementary School
 Middle School
 High School



For Office Use Only
 Received _____
 Interviewed by _____
 Date _____
 Accepted/Denied _____
 Referred by _____

Current VCS Family Addition

Valley Christian Schools Business Office 10818 Artesia Blvd., Cerritos, CA 90703 Phone 562/860-0556 Fax 562/860-4323 www.vcschools.org

Parent Information

Father's name _____
Last Name First Name Middle Initial Area Code + Home Telephone

Mother's name _____
Last Name First Name Middle Initial Area Code + Home Telephone

Home Address _____
Number/Street City State Zip Code

Address of parent if different from home address _____

Father's Occupation: Title _____ Employer _____ Business Phone _____

Business Address _____ Email Address _____

Mother's Occupation: Title _____ Employer _____ Business Phone _____

Business Address _____ Email Address _____

Marital status Married Divorced Widowed Separated Single Parent Remarried

Student(s) live with Both parents Father Mother Other _____

Number of dependent children at home _____ Ages _____

What church does your family attend? _____ Are you members? _____

Is father a graduate of Valley Christian High School? _____ If yes, what year? _____

Is mother a graduate of Valley Christian High School? _____ If yes, what year? _____ Maiden name _____

Students to be added:

Please check all that apply

Preschool Kindergarten half-day Kindergarten full-day Elementary School Middle School High School

Last Name First Name Middle Name Date of Birth Birthplace US Citizen Y/N Male/Female Grade Entering

Last Name First Name Middle Name Date of Birth Birthplace US Citizen Y/N Male/Female Grade Entering

Last Name First Name Middle Name Date of Birth Birthplace US Citizen Y/N Male/Female Grade Entering

School(s) last attended _____



Student Information Form

Please complete this form and return or fax it to the VCS Business Office at the address at the bottom of this page.

Student's name _____
First Name Middle Initial Last Name

Applying to Grade _____ Beginning September, 20__

I hereby authorize the release of my child's records to Valley Christian Schools.

Parent or Guardian Signature _____ Phone Number _____ Date _____

Remainder of form to be completed by authorized staff persons at the school in which the student is currently enrolled.

Name of School _____

Address Street City State Zip

Telephone _____

How long has this student been enrolled at your school? _____

Principal's Name _____ Teacher's Name _____

In what capacity and for how long have you known the applicant? _____

Please indicate your ratings by numbers in the right-hand column. Use a question mark where you have insufficient evidence. Your candid estimate of the applicant will be of invaluable assistance to the Admissions Committee and your comments will be held in strict confidence.

Confidential Principal/Teacher Recommendation

	1	2	3	4	5	Ratings
Academic Potential	Exceptionally promising student	Generally strong student	Average student, capable of satisfactory work	Below average Marginal ability Lacks motivation	Questionable candidate	
Personal Qualities	Outstanding – leads and participates	Generally strong	Average	Below average, immature	Very immature for age	
Emotional Stability	Exceptionally stable	Well balanced	Generally well balanced	_Excitable _Unresponsive _Distractible	_Hyper-emotional _Apathetic	
Summary	Outstanding	Above Average	Average	Below Average	Poor	

1. Please comment on the applicant's attitude toward school. _____

2. To your knowledge, has the applicant had any history of involvement with drugs, alcohol, or juvenile delinquency?
Yes _____ No _____ If yes, please explain _____

3. Has the applicant ever been suspended or expelled? Yes _____ No _____ If yes, please explain _____

4. To your knowledge, has the applicant had any history of conduct or behavior problems? Yes _____ No _____ If yes, please explain _____

5. Does the candidate have any history of learning disability or has he/she required any specific help to meet academic requirements?
Yes _____ No _____ If yes, please explain. _____

6. Additional comments, if needed _____

Teacher's Signature _____ Date _____
Principal's Signature _____ Date _____