



**ST. CLOUD  
CHRISTIAN SCHOOL**  
*Integrating Faith & Learning*  
- since 1979 -

**Admission Application  
2018-2019**

**[www.StCloudChristian.org](http://www.StCloudChristian.org)**

St. Cloud Christian School  
**APPLICATION FOR ADMISSIONS**

2018-19 School Year

Please type or print clearly.

**Student Information:** Please list information for each student you desire to enroll.

Name	Birth Date	Age	Grade	Sex
				M/F
				M/F
				M/F
				M/F

List names and ages of other children living at home:

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Name: \_\_\_\_\_ Age: \_\_\_\_\_  
Name: \_\_\_\_\_ Age: \_\_\_\_\_ Name: \_\_\_\_\_ Age: \_\_\_\_\_

Name of school(s) child(ren) attended last? \_\_\_\_\_  
School District(s): \_\_\_\_\_

Student's Ethnic Background\*:

\_\_\_ Caucasian \_\_\_ Hispanic \_\_\_ African American \_\_\_ Native American \_\_\_ Asian  
\_\_\_ Other: \_\_\_\_\_

Student's Primary Language\*: \_\_\_ English \_\_\_ Other: \_\_\_\_\_

\*Optional, not necessary to complete

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**Parent Information:**

Family/Child's Last Name: \_\_\_\_\_

**Father's** Full Name: \_\_\_\_\_ Father's Cell Phone: \_\_\_\_\_

**Mother's** Full Name: \_\_\_\_\_ Mother's Cell Phone: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

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

County of Residence: \_\_\_\_\_ Child lives with: \_\_\_ Mother \_\_\_ Father \_\_\_ Both

Parent's Marital Status: \_\_\_ Married \_\_\_ Widowed \_\_\_ Divorced \_\_\_ Separated

**Father's** Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Years with present employer: \_\_\_\_\_

**Mother's** Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Years with present employer: \_\_\_\_\_

Please check if **full-time minister**

Answering “yes” to a question on this page will not automatically disqualify an applicant. However, due to limited programming options, St. Cloud Christian School carefully reviews all applications to help insure that the needs of enrolled students can be met.

1. Any general health problems?  Yes  No      Any physical limitations?  Yes  No

If you have answered “Yes” above, please explain:

\_\_\_\_\_

2. Has your child been *diagnosed, referred for services, or received services* for any of the following health/learning concerns:

A.D.D.     Hyperactivity     Convulsions     Hearing     Title I or Tutoring

A.D.H.D.     Vision     Speech     Allergies     Asthma

O.D.D.     Diabetic     Epilepsy     Orthopedic     Medications

Heart     Referred for Counseling     Other Behavioral Concerns

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

If you checked one of the above conditions, please explain: (attach additional pages if needed)

\_\_\_\_\_

\_\_\_\_\_

3. Either now or in the past, has your child had an educational IEP or any accommodation or modification plan?

YES     NO    If yes, a current copy of the plan must accompany this application.

Please briefly explain the content of the plan: \_\_\_\_\_

\_\_\_\_\_

4. Are there any other physical or emotional issues that may affect your child’s educational needs?

YES     NO    If yes, please explain: \_\_\_\_\_

5. Has your child ever repeated a grade?

YES     NO    If yes, please explain: \_\_\_\_\_

6. Has your child ever been arrested, referred to juvenile court, social service, etc.?

YES     NO    If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

7. Has your child ever been treated, referred for treatment, or had issues related to drug or alcohol use or abuse?

YES     NO    If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

8. Has your child ever been under academic or disciplinary suspension, disqualification, expulsion, dismissal, refused admission, or similar action at any school?

YES     NO    If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

9. Are you aware of any other factors that would affect the educational process for your child, including below average progress in any subject areas?

YES     NO    If yes, please explain \_\_\_\_\_

\_\_\_\_\_

## Christian Partnership:

What church does your family attend? \_\_\_\_\_ How long? \_\_\_\_\_

Church address: \_\_\_\_\_  
[Street] [City] [State] [Zip]

Pastor's name: \_\_\_\_\_ Phone: \_\_\_\_\_

How regularly do you attend? \_\_\_\_\_

Describe your family's involvement in church related activities. \_\_\_\_\_

Are both parents committed to and supportive of Christian schooling? \_\_\_ YES \_\_\_ NO

If "No," please describe any family situation that you feel may interfere with Christian principles being taught in your home and reinforced at this school. *(St. Cloud Christian School requires that at least one parent/guardian be a committed Christian, acknowledging Jesus Christ as their Lord and Savior.\*\*)*

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So that we may more fully understand your position, please write a brief testimony/description of what you believe is necessary to become a Christian and how you came to have a personal relationship with Jesus Christ. Use additional sheets if necessary.

Father: \_\_\_\_\_

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Mother: \_\_\_\_\_

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Why do you desire to enroll your child(ren) in St. Cloud Christian School?

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What do you see as your student's greatest strengths?

Spiritually: \_\_\_\_\_

Academically: \_\_\_\_\_

Socially: \_\_\_\_\_

Are there any weaknesses or areas of concern?

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Is there any other information you would like to share with u

## SCCS Statement of Faith:

St. Cloud Christian School was founded and functions upon the basic fundamental principles of the Word of God and espouses a historic Christian view of life as presented in the Bible. The following is the statement of faith of St. Cloud Christian School. We believe:

1. That all 66 books of the Bible are the inerrant inspired (God-breathed) Word of God (2 Peter 1:20-21). It is given for salvation, reproof, correction, and training in righteousness. (2 Timothy 3:16);
2. There is one God, eternally existing in three persons: Father, Son and Holy Spirit (Matthew 28:19, Deuteronomy 6:4, Luke 3:21-22);
3. Salvation is a gift of God's grace, and is received by personal faith in the Lord Jesus Christ, totally apart from human merit or works. Salvation is evidenced by Christ-like character, righteous living, and good works as the believer submits to the indwelling Holy Spirit in obedience to the word of God (Galatians 5:22-23, Ephesians 2:8-9, 1 Timothy 1:5, 2 Timothy 1:9, James 1:21-27);
4. The church is the body of Christ, composed irrespective of denominational or organizational affiliation (Matthew 28:18-20, 1 Corinthians 12:13, Ephesians 2:11-22, Colossians 1:28; Hebrews 10:23-25);
5. Satan exists today and is the enemy of God and the accuser of God's people. He persistently seeks to counterfeit the works and truth of God (Isaiah 14:12-14, Acts 26:18, Ephesians 6:11-13, Revelation 12:10, 19:19-20);
6. In the personal return of the Lord Jesus Christ, and in the bodily resurrection of all the dead--the saved to eternal life, dwelling forever with Christ, and the unsaved to everlasting judgment and condemnation (Matthew 24:29-30, Acts 1:11, Revelation 20:15).

## Admissions Agreement:

**Before signing the agreement below, please be certain you have read and are in agreement with the beliefs and policies of St. Cloud Christian School as stated in the Mission Statement and Statement of Faith.**

- I/We understand that the St. Cloud Christian School Parent/Student Handbook is available to read online at [www.stcloudchristian.org](http://www.stcloudchristian.org) and agree to the policies stated within.
- I/We will make every effort to work in harmony with the school personnel to ensure the best possible learning experience for my child. I/We understand the principle laid out in Matthew 18 that requires disputes to be taken to the involved parties first, before going to others.
- I/We understand that St. Cloud Christian School is an extension of me, the parent/legal guardian, and I promise my prayerful support to the school.
- I/We understand that to contribute to the success of my student and the school, each family is asked to provide 25 service hours to SCCS.
- I/We have carefully read the above-mentioned information and are in agreement with beliefs and policies stated therein. I/We have read and understand the information in this application. I request that my child be accepted to attend St. Cloud Christian School.
- I/We authorize St. Cloud Christian School to receive school related academic, health, psychological, and standardized testing information from:

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[Name of previous school]

For:

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[Student Name]

[Date of Birth]

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[Father's Signature]

[Date]

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[Mother's Signature]

[Date]



# APPLICATION PROCESS & PROCEDURES

2018-19 School Year

## Admissions Process:

- 1. **Application Fee** - **\$100** application fee must be submitted with this application. Add \$50 for each additional child up to \$200 per family. This one-time fee is non-refundable.  
APPLICATION FEE PAID \_\_\_\_\_ CASH or CHECK#
- 2. **Academic Records** – The following will be requested upon receipt of this application:
  - A copy of** each student’s most recent and previous **report card** and **standardized test scores**
  - IEP/504 or ISP** reports (if any, past or present)
  - All Transcripts**
  - Any **Discipline or Behavior Documentation** (if any)
- 3. **Placement Testing** - After application materials are received in the office we will contact you to **schedule a testing** time for your child. You can plan for 30 -60 minutes for this testing. All new students, regardless of age, will be required to complete an academic placement testing evaluation.  
**Note:** If you have not had the opportunity to tour the school, we would be happy to schedule one during your child’s testing.
- 4. **Family Interview** - **After the placement testing**, a personal interview will be scheduled with administration. Students in grades 7-12 are required to attend the interview.
- 5. **Health Records** - A **copy** of the following items are necessary to complete the admissions process and to hold classroom placement:
  - Birth Certificate** (a copy is sufficient)
  - Health Records** (immunizations/physicals)
- 6. **Tuition Assistance** - Financial aid is applied for through FACTS at [www.https://online.factsmgmt.com](https://online.factsmgmt.com).  
Please apply early. Processing may take up to 2 weeks.
- 7. **SCCS Tuition Agreement** (with \$200 non-refundable deposit)

## Admissions

### Policies:

**\*\*Christian Partnership Policy:** St. Cloud Christian School seeks to educate the children of Christian parents. Therefore, it is required that at least one of the parents/guardians is able to give a clear testimony of a personal faith in Jesus Christ. Parents/guardians are also required to read and sign the Statement of Faith (printed on page 6 of this application) to indicate their knowledge and support of the doctrinal position taught at this school.

**\*Nondiscrimination Policy:** St. Cloud Christian School admits students of any race, color, national and ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at

the school. SCCS does not discriminate on the basis of race, color, national or ethnic origin, gender, status in regard to public assistance in administration of its educational policies, admissions policies, tuition assistance programs, athletic and other school-administered programs.

***Family Lifestyle Policy:*** St. Cloud Christian School's biblical role is to partner with Christian parents to mold students to be Christ-like servant-leaders. On occasion, the atmosphere or conduct within a particular home may be counter or in opposition to clear biblical standards. This includes, but is not necessarily limited to, sexual immorality, homosexual sexual orientation, or inability to support the moral principles of the school. In such cases, the school reserves the right, within its sole discretion, to refuse admission of an applicant or to discontinue enrollment of a student.