



<b>Office Use Only</b>	
Date Received	_____
Application Fee	_____
Check#/Cash	_____

School Year: \_\_\_\_\_ Grade Applying For: \_\_\_\_\_ Kinder:  AM  ALL DAY

Student's Legal Name: \_\_\_\_\_  
Last First Middle

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ Soc. Sec. #: \_\_\_\_\_

Mailing Address where student resides: \_\_\_\_\_

\_\_\_\_\_ City State Zip Code

Physical Address (if different) \_\_\_\_\_

Phone where student resides: \_\_\_\_\_

Is student a citizen of the United States? \_\_\_\_\_ If not, please provide a copy of the visa and passport.

**PLEASE FILL OUT THE FOLLOWING FOR PERSON(S) WITH WHOM THE STUDENT RESIDES:**

Father (Male Guardian) Name: \_\_\_\_\_  
Title First Name Last Name

Occupation: \_\_\_\_\_  
Company Position Phone Number

Mother (Female Guardian) Name: \_\_\_\_\_  
Title First Name Last Name

Occupation: \_\_\_\_\_  
Company Position Phone Number

With whom does student live?  Both Parents  Mother Only  Father Only  Grandparent(s)  
 Father & Step Mother  Mother & Step Father  Other: \_\_\_\_\_

Parents/Guardians are:  Married  Separated\*  Divorced\*  One Parent Deceased

\*If parents/guardians are separated or divorced, who has legal custody of the student? \_\_\_\_\_

**Please include in this admission form, a copy of that portion of the custody papers that assigns who has legal custody or guardianship.**

What specific church does your family attend? \_\_\_\_\_  
 Regular Attendance  Occasional Attendance  Seldom Attend

**If the student DOES NOT reside with both parents, please fill out the following:**

Father's Name \_\_\_\_\_  
Address \_\_\_\_\_  
Mother's Name \_\_\_\_\_  
Address \_\_\_\_\_

**Names and ages of brothers and sisters:**

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

**Names and addresses of living grandparents:**

Name (Father's /Guardians Family)	Address	City-State-Zip
Name (Mother's/Guardians Family)	Address	City-State-Zip

**Please list all schools previously attended beginning with the most recent:**

(Please use another sheet paper to list school, if there is not enough room below)

Name of School	Current Address	City-State-Zip

Reason for leaving the most recent school: \_\_\_\_\_

Has the student ever been suspended? \_\_\_\_\_ Expelled? \_\_\_\_\_ Asked to withdraw? \_\_\_\_\_

**If so, please give details on a separate piece of paper, including the principal's name and address of the school.**

Has the student ever failed a grade or been held back? \_\_\_\_\_ If so, please state grade and date.

Grade: \_\_\_\_\_ Date: \_\_\_\_\_

If you have further information which may assist in the guidance of your student at Mesilla Valley Christian Schools, such as medical, psychological or other information, please indicate below:

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**As a Christian school, the parents perspective on spiritual training is very important to us. Please share with us your testimony of salvation or of what the benefits of a Christian school environment would be to your child(ren) and family.**

Father (Male Guardian):

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Mother (Female Guardian):

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**Please provide us with 2 goals that you would have as a family if your child(ren) attend MVCS.**

1. \_\_\_\_\_

2. \_\_\_\_\_

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

From what source or from whom did you first receive information about Mesilla Valley Christian Schools?

Newspaper     Media (Radio-T.V.)     Internet     Word of Mouth     Other \_\_\_\_\_  
(Please specify)

If your child is accepted at Mesilla Valley Christian Schools, please indicate your preferred payment plan:

Monthly     Semi-Annual     Annual

## **PARENTS/GUARDIAN PLEDGE**

If my student is accepted at Mesilla Valley Christian Schools, I agree to support, to the best of my ability:

- A. My student's education by supervising assigned homework and by keeping in regular contact with my student's teachers as needed;
- B. The various extra-curricular activities of the schools.
- C. The school's entire program through prayer, time and financial gifts;
- D. The doctrinal statement and the spiritual and moral standards of the school;
- E. The disciplinary standards of the school.

### **I agree:**

- A. That my student is to receive training in the Bible and will support the school in its endeavors to encourage and guide my student in applying these teachings;
- B. Not to send my student to the school when he/she is ill so as to help prevent illness from spreading to other students;
- C. To pay the tuition and all fees in the agreed timely manner and to abide by all policies in this regard;
- D. That I do not have any outstanding fees, tuitions, accounts or other obligations to any school previously attended;
- E. That I will follow the biblical principle found in Matthew 18 to resolve any conflicts that might arise.

### **I understand:**

- A. That the school has full discretion for the grade placement of my child;
- B. That all policies of the school as well as directives of the teachers and administration are to be complied with fully and at all times.
- C. That falsifying any information on this form would disallow enrollment and/or require withdrawal proceedings.

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Father's or Guardian's Signature

Date

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Mother's or Guardian's Signature

Date