



The Mission of Park Christian School is
to be a Christ-centered academic community
equipping students to think biblically,
live wisely, and serve faithfully.

New Student Application, K-12th Grade
For additional student
from a current family

300 North 17th Street
Moorhead, MN 56560
218-236-0500
FAX 218-236-7301
ParkChristianSchool.org

Date Rec'd _____
Amt _____ Ck# _____

Please Print Clearly

Admission Date Desired _____ Grade Applying For: _____ Male _____ Female _____

*All Kindergartners must be 5 years old on or by July 31.

STUDENT INFORMATION

Student's Full Legal Name _____

Birth Date _____ Nickname, if preferred _____ Public School Residence _____
MM/DD/YYYY (Please specify school)

Parent's Names _____

Home Street Address _____

City _____ State _____ Zip _____

Church Regularly Attending _____

Student's Cell Phone _____ Current Grade _____

Student's E-mail Address _____

Preschool/Schools (with years) Attended _____

Address of Last School Attended _____
Street City State Zip

Has applicant ever had an IEP, 504 or received special services? Yes _____ No _____

If yes, please explain. _____

Known Physical/Academic Needs: _____

Does the student receive medication on a regular basis? _____ Type of Medication _____

Reason for Medication _____

Do you expect to send your child(ren) to PCS until he/she graduates? _____ Have you been satisfied with your
child(ren)'s education until now? _____ If not, in what areas do you desire improvement? _____

How would you characterize your son/daughter's performance in school so far? _____

Has the student repeated any grade? _____ If so, state the grade and reason: _____

Has the student had any disciplinary difficulty in school? _____ If so, please explain: _____

Has the student been expelled from a school? _____ If yes, please explain _____

Why are you interested in enrolling your child(ren) at PCS? _____

Continuous Enrollment Contract

We/I understand that this student will be considered continuously enrolled unless written notification of non-return is received by Admissions by stated February deadline or student graduates.

We/I Understand that the annual Classroom Reservation Fee is non-refundable and as grade level capacities are reached, a wait pool will be implemented.

We/I understand that the penalty to un-enroll after the February deadline and throughout the school year is \$500/student or \$1000 cap/family.

Exceptions to the un-enrollment penalty:

-Moving/relocation 50+ miles from PCS

-Administration has determined the student(s) academic needs cannot be met at PCS

-Special circumstances may be taken into consideration

Park Christian School admits students of any race, color, national and ethnic origin to all the rights, privileges, programs, & activities generally accorded or made available to students at the school. It does not discriminate on the basis of color, national and ethnic origin in administration of its educational policies, admissions policies, scholarship and tuition reduction assistance programs, and athletic and other school-administered programs.

Parent/Guardian Signature _____

Date _____

CHECKLIST FOR APPLICATION PROCESS

Please check to make sure that application is complete.

The application process will begin when the Admissions Office has received ALL of the following information:

_____ The fully completed **APPLICATION (K-12th grades)**

_____ A copy of the student's **BIRTH CERTIFICATE (K-12th grades)**

_____ A copy of the applicant's most recent **IMMUNIZATION RECORD (K-12th grades)**

_____ A copy of the applicant's most recent **REPORT CARD (1st-12th grades)**

_____ A copy of the applicant's most recent **STATE ASSESSMENT/STANDARDIZED TESTING (2nd-12th grades)**

_____ Signed **REFERENCE FORM** (provided if PCS administration requests)

_____ The non-refundable **APPLICATION FEE** of \$100.00 **(K-12th grades)**

_____ Copies of any and all **I.E.P's. (If applicable)**

_____ Copy of any **CUSTODY ARRANGEMENT (If applicable)**