

STUDENT INFORMATION

Last Name _____
 First/Middle Name _____
 Birth Date _____
 Home Phone _____ Cell Phone _____
 Email _____
 Address _____
 City _____ State _____ Zip _____
 Gender Male Female Ethnicity _____
 Grade Entering _____ Car make/license plate _____
 Religion _____ Church Attending _____

FINANCIAL COMMITMENT

Please select one of the following regarding charges incurred.
 Father and Mother paying jointly (no further information required)
 Father and Mother will be making separate payments as follows (please explain)

 Someone other than parents will make regular payments on this account.
 Name(s) _____ Email* _____
 Address _____
 Phone _____ Work _____ Cell _____

**A current email address must be provided by the party responsible for financial commitments.*

FAMILY INFORMATION

Last Name _____
 Father _____ Mother _____

Father's Information

Home Phone _____ Cell Phone _____
 Email _____
 Address _____
 City _____ State _____ Zip _____
 Marital Status Single Married Widow Divorced Separated
 Religion _____ Church Attending _____
 Employer _____
 Position _____ Work Phone _____

Mother's Information

Home Phone _____ Cell Phone _____
 Email _____
 Address _____
 City _____ State _____ Zip _____
 Marital Status Single Married Widow Divorced Separated
 Religion _____ Church Attending _____
 Employer _____
 Position _____ Work Phone _____

Parents' cars and license plates _____

School age children in family who are not applying to DCS:

Names _____ Ages _____

Grandparent(s) Names _____

Address _____ Phone _____

Grandparent(s) Names _____

Address _____ Phone _____

MEDICAL INFORMATION

Family Physician _____

Phone _____

Any physical disabilities, allergies, or health concerns? _____

Students entering Preschool, Kindergarten, 6th, or 9th grade must have a physical examination at the beginning of the school year. Also, student entering Preschool, Kindergarten, 2nd, or 6th grade must have a dental examination at the beginning of the school year. Please use the appropriate forms that are available in the school office.

ACADEMIC/BEHAVIOR INFORMATION

Please indicate academic level of student's previous work.

Excellent Good Average Poor

Has your child ever had an IEP (Individualized Education Plan) Testing or does your child currently have an IEP? No Yes If Yes, explain. _____

Has your child ever been retained a grade or failed a course? No Yes
If Yes, explain. _____

Has your child ever been expelled, dismissed, suspended, or refused admission to another school? No Yes If Yes, explain. _____

Has your child ever had any disciplinary difficulties? No Yes
If Yes, explain. _____

Has your child ever been in trouble with the law, arrested, etc.? No Yes
If Yes, explain. _____

Has your child ever been or is currently under juvenile court supervision?
 No Yes If Yes, explain. _____

Has your child ever used tobacco or drugs of any kind? No Yes
If Yes, explain. _____

OFFICE USE ONLY

Date Received _____ Reg. Paid _____ Interviewed _____ By _____

FINANCIAL INFORMATION

Tuition can be divided into ten equal payments unless other arrangements have been made through the finance office. Payments are due the 1st of each month, August through May. A registration fee is required for each student. All fees are due prior to the school term unless arrangements are made through the finance office.

1. All tuition/fees required by the school are expected to be paid on time. This includes fundraising, athletic, academic, lunch, and extended care fees. Report cards will be withheld unless all tuition/fees are paid.
2. A \$15 late fee is assessed for all accounts unpaid after the 10th of each month. A \$25 fee is charged for returned checks and or ACH payments.
3. In the event that any payment has not been received and is late 45 days, the student(s) shall be subject to dismissal. Any exception to the financial agreement must be approved by the administrator with a written agreement in place.
4. No student will be permitted to participate in graduation ceremonies and no transcripts and/or student records will be released until all tuition and fees are paid up-to-date.
5. All past-due accounts for returning students are to be paid in full by May 31 of the current school year.
6. In the event your account is past due, it may be turned over to a collection agency. If your account is turned over to a collection agency and/or attorney, then you are responsible for all costs and fees necessary for the collection of the delinquent account including, but not limited to, collection agency fees.

SIGNATURE OF AGREEMENT

I, the undersigned(s), hereby acknowledge that I have read, understand, and agree to the financial commitment indicated above.

I also agree:

- To read and adhere to all guidelines outlined in the DCS Handbook.
- That my child will submit to academic and disciplinary regulations.
- To all other requirements instituted by the Administration and carried out by the Principals and Faculty of Decatur Christian School.

Father/Guardian Signature _____ Date _____

Mother/Guardian Signature _____ Date _____

DECATUR CHRISTIAN SCHOOL

STUDENT APPLICATION



MISSION STATEMENT

"Equipping Warriors for
Victory in Christ through
Excellence, Relationships,
and Service."