

Parkview Christian School

"Moving students to their God-given potential" 4400 North First Street * Lincoln, NE 68521 * 402-474-5820 Please print, complete and turn into school office along with enrollment fee.

Enrollment Application Form

School Year_

Parkview 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 race, color, national & ethnic origin in administration of its educational policies, admissions policies, scholarship program, athletic & other school-administered programs.

	document ar	nd notarized).		
Student's Last Name	First	Middle		Date
AddressCity	State	Zip	Primary C	Contact #
Social Security Number	Student's Age	Date of	of Birth	
Gender: Male Female Ethnicity	: Hispanic Non-His	panic		
Race: Caucasian African American	American Indian	Asian	Mutli	Other (Please specify)
Grade Applying For Previous School				
Allergies				
Church You Attend		_ Are you a me	ember? Yes	No
	Parent or Primary	Care Giver Inf	ormation	
Last Name		Last Name_		
First Name		First Name_		
Social Security #		Social Secur	rity #	
Address		Address		
CityStateZ	ip	City	S	State Zip
Phone		Phone		
Employer		Employer_		
Occupation		Occupation_		
Telephone		Telephone_		
Email Address				
Relationship to child:		Relationship		Mother Father
Contact Allowed Has Custody	fy)	Contact All		Other (Please specify)
Lives With Ed. Rights Mailings Allowed		Contact Allowed Has Custody Lives With Ed. Rights Mailings Allowed		
		L		
Parent or Care Giver Signature	Date	Parent or Ca	are Giver Signat	ture Dat

I understand that any agreement with Parkview Christian School is confidential and is the property of Parkview Christian School. If my agreement is discussed with anyone other than Parkview Christian Administration, the agreement may be terminated.

Questions for Parents or Guardians

(Please answer each of the following questions, If you need additional space for your responses, please attach a separate sheet of paper.)

1. Why do you want your child/children to be educated in a Christian School?

2. If you died today and stood before God and He said, "Why should I let you into Heaven?" What would you say?

3. Do you go to church? _____Yes ____No

Name of	of Church		

Are you a member? _____Yes____No

- 4. Which of the following would you be interested in helping with at Parkview? (Please check all that apply) □ Concessions Helper □ Gate at Athletic Events □ Volleyball Line Judges
 - □ Lunch Assistant □ Library Assistance □ Maintenance & Grounds Keeping

 - □ Event Set Up/Clean Up □ Event Hospitality □ Early Bird/ Late Bird Assistant
- 5. When do you want your child/children to begin attending Parkview Christian School?

Date:_____

6. Do you agree to have your child/children educated according to the Statement of Faith of Parkview Christian School?

Signature of Parent/Guardian

Signature of Parent/Guardian

Date

Additional Contacts Permission Sheet

Anyone not listed on this document will <u>NOT</u> have any permissions concerning your student.

Last Name	Last Name
First Name	First Name
Telephone	Telephone
Email Address	Email Address
Relationship to child	Relationship to child
Contact Allowed Has Custody	Contact Allowed Has Custody
Lives With Ed. Rights Mailings Allowed	Lives With Ed. Rights Mailings Allowed
Emergency Contact Dismissal Approval	Emergency Contact Dismissal Approval
Last Name	Last Name
First Name	First Name
Telephone	Telephone
Email Address	Email Address
Relationship to child	Relationship to child
Contact Allowed Has Custody	Contact Allowed Has Custody
Lives With Ed. Rights Mailings Allowed	Lives With Ed. Rights Mailings Allowed
Emergency Contact Dismissal Approval	Emergency Contact Dismissal Approval
Last Name	Last Name
First Name Telephone	First Name
Email Address	Email Address
Relationship to child	Relationship to child
Contact Allowed Has Custody	Contact Allowed Has Custody
Lives With Ed. Rights Mailings Allowed	Lives With Ed. Rights Mailings Allowed
Emergency Contact 🗌 Dismissal Approval 🗌	Emergency Contact 🗌 Dismissal Approval 🔲