

ELEMENTARY ENROLLMENT APPLICATION

Shadow Mountain Baptist School



STUDENT INFORMATION

Student Name: _____ Preferred Name: _____
First Middle Last

Primary Address: _____ City: _____ Zip: _____

Home Phone: _____ Date of Birth: _____ Gender: Male Female

I am applying for the 20____/20____ school year. I am applying for the following grade:

K4 K5 1st 2nd 3rd 4th 5th 6th

I will need to use extended care for my K4 or K5 child. Yes No

FAMILY INFORMATION

Father

Name: _____

Occupation: _____

Employer: _____

Email Address: _____

Marital Status: _____

Address if different than that of the applicant:

Mother

Name: _____

Occupation: _____

Employer: _____

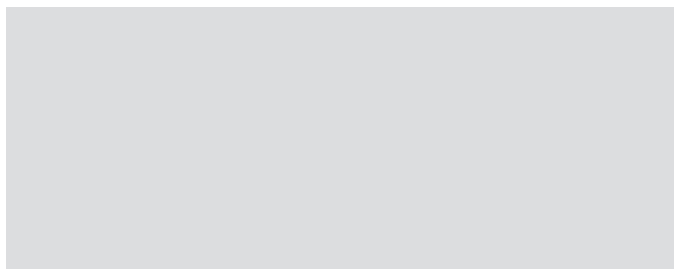
Email Address: _____

Marital Status: _____

Address if different than that of the applicant:

Names and grades of applicant's siblings

Name and address to whom grades and financial statements should be sent, if different than above.



OFFICE USE ONLY

App. Fee: _____ Date _____
Paid

Reg. Fee: _____ Date _____
Paid

Book Fee: _____ Date _____
Paid

NEW STUDENT INFORMATION ONLY

How did you hear about Shadow Mountain Baptist School? (check all that apply)

Relative Friend Billboard Website Postcard in the mail Advertisement Other: _____

Name of school presently attending: _____ Grade: _____

Name and address of the church you currently attend, if applicable:

Pastor's name: _____

Please write a short summary explaining your choice of Shadow Mountain Baptist School.

HEALTH STATEMENT

Please rate the applicant's health. If he has any physical handicap which could limit, in any way, participation in the full range of normal activities, or if the applicant has had any recent serious physical or emotional illness, please explain.

Signature of Parent or Guardian: _____ Date: _____

SMBS admits students of any race, color, ethnicity, or geographic location, to all rights, privileges, programs and activities generally accorded or made available for students at the school. SMBS does not discriminate on the basis of race, color, racial or ethnic origin in the administration of its educational policies, scholarship or loan programs, or in other school administered programs.

Thank you for your interest in Shadow Mountain Baptist School!