



TRINITY CHRISTIAN SCHOOL

STUDENT QUESTIONNAIRE

APPLICANT'S NAME _____ DATE _____

In order for us to get to know you better, please answer the following questions if you are entering Grades 3-12; optional for younger students.

I would like to attend Trinity Christian School because _____

My friends would say that I am _____

My teachers would describe me as _____

In my free time I _____

My greatest academic strengths are _____

My weakest subject in school is _____ because I _____

My hobbies and non-academic interests are _____

I'm interested in participating in the following extracurricular activities while attending Trinity Christian School: (Please check all that apply. Underline any activity in which you've previously participated. Students in grades 6-12 may participate in interscholastic competition.)

- | | | | |
|--------------------------------------|--|--|--|
| <input type="checkbox"/> Band | <input type="checkbox"/> Student Council | <input type="checkbox"/> Cross Country | <input type="checkbox"/> Swimming |
| <input type="checkbox"/> Beta Club | <input type="checkbox"/> Yearbook Staff | <input type="checkbox"/> Football | <input type="checkbox"/> Tennis |
| <input type="checkbox"/> Chorus | <input type="checkbox"/> Baseball | <input type="checkbox"/> Golf | <input type="checkbox"/> Track & Field |
| <input type="checkbox"/> Drama | <input type="checkbox"/> Basketball | <input type="checkbox"/> Soccer | <input type="checkbox"/> Volleyball |
| <input type="checkbox"/> Praise Band | <input type="checkbox"/> Cheerleading | <input type="checkbox"/> Softball | <input type="checkbox"/> Wrestling |

Student's Signature

"TEACHING THE TRUTH"

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