

CHRISTIAN LIFE SCHOOL
Application Form
FOR NEW APPLICANTS

School Year Applied For _____

Parent(s) or Guardian(s) name: _____

Home Ph. #: _____ Work Ph. #: _____ Cell #: _____
circle one: Mom's# or Dad's#

Mailing Address _____

_____ City Province Postal Code

Church Affiliation: _____

Pastor's name: _____ Phone _____

Former School: _____ Teacher Name _____

Child's Name _____ Grade entering _____

Child's Name _____ Grade entering _____

Child's Name _____ Grade entering _____

Child's Name _____ Grade entering _____

Please list any other children not yet of school age

Child's Name _____ Age _____

Child's Name _____ Age _____

- ▶ **This form will be presented to an Interview Committee and you will be called to arrange an interview. Admission will be subject to approval.**

Signature of parent(s) or guardian(s)

Registration forms, a non-refundable family registration fee, (\$200 up to April 30 and \$400 beginning May 1), and direct debit authorization for the balance of tuition, and student data must be presented to the office after a successful interview. If financial assistance or special arrangements for payment of tuition is required please contact the school principal or school board treasurer prior to registration.

For Office Use Only

Received by _____ Date _____

Interviewed by _____

Date of Interview _____ Approval Status: Yes Pending No Notified: