

## STUDENT QUESTIONNAIRE

## FORM G

(To be filled out by the student personally)

Da	ate		
1.	Full Name	Nickname	
Address City		Zip	Phone
2.	Age Date of Birth	Applying for Grac	le
3.	Are you a Christian? If so, when and	how did you become a Christian?	
4.	Where do you attend church?	How often do you	attend?
	What activities are you involved in at church	h?	
5.	. Do you have career plans for your future? If so, please explain		in
6.	. Have you had difficulty with students or teachers in a previous school? If so, please expla		
7.	Have you ever smoked? Do you now	w? Why?	
8.	What do you think about drug usage?		
	Have you ever used illegal drugs? _ If so, w	vhy?	
9.	Please comment on the following:		
	Dancing?		
	Music?		
	Movies?		
	Alcoholic Beverages?		
	Gangs and Gang activity?		

10.	Do you play a musical instrument or enjoy singing? If so, please comment		
11.	Are you interested in playing on an athletic team? If so, what sport?		
12.	Are you interested in creative writing, speech, drama, and art? If so, what?		
13.	Have you ever won special prizes or awards in school? If so, what?		
14.	4. Have you ever held offices in school or church groups? If so, what?		
15.	Is it your personal desire to attend Rock County Christian School?		
	If yes, how did you become interested?		
	If no, please tell why		
16.	6. If you are accepted as a student at Rock County Christian School, do you promise to act in a Christ like manner to your classmates by encouraging them, building them up, defending them against rumor or accusation, and in every way defending them against anyone that would seek to demean or degrade them?		
17.	7. Do you also promise to protect the good name of the school, its buildings, and property by your actions ar behavior?		
18.	Please write a brief statement as to what you believe concerning the Bible and the Christian faith.		
Sig	nature Date		