

# FAMILY APPLICATION

# Faith Christian School

## ADMISSIONS OFFICE

122 Dante Street, Roseto, PA 18013  
Admissions Office 610-588-3414; Finance Office 610-588-8815; FAX: 610-588-8103

E-MAIL: [info@fcsions.org](mailto:info@fcsions.org); WEBSITE [www.fcsions.org](http://www.fcsions.org)

School Code 394294

Please use black ink when completing this form

Date of Application: \_\_\_\_\_

\*\*\*\*\*

Student's legal Parent/ Guardian 1 \_\_\_\_\_ Head of household? ☐ YES ☐ NO

Home Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

E Mail \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Church you attend \_\_\_\_\_ Are you a member? ☐ YES ☐ NO

Church Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Church E Mail \_\_\_\_\_

Have you personally received Jesus Christ as your Savior and Lord? \_\_\_\_\_

Employer's Name \_\_\_\_\_ Occupation/Title \_\_\_\_\_

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Student's legal Parent/ Guardian 2 \_\_\_\_\_ Head of household? ☐ YES ☐ NO

Address, if different from Parent/ Guardian 1 \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

E Mail \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Church you attend \_\_\_\_\_ Are you a member? ☐ YES ☐ NO

Church Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Church E Mail address \_\_\_\_\_

Have you personally received Jesus Christ as your Savior and Lord? \_\_\_\_\_

Employer's Name \_\_\_\_\_ Occupation/Title \_\_\_\_\_

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Please check box that describes the relationship of Parent/Guardian 1 to Parent/Guardian 2:

Married to each other	<input type="checkbox"/>	Divorced	<input type="checkbox"/>
Never married	<input type="checkbox"/>	Widowed/ Widowed	<input type="checkbox"/>
Separated	<input type="checkbox"/>		<input type="checkbox"/>

If divorced or widowed/widowed, is there a step-parent? NAME \_\_\_\_\_

If Parent 1 and Parent 2 do not reside together, with whom does the student reside? \_\_\_\_\_

Names of all Child(ren)	Date of Birth	Date to be Entered	Grade Applied For
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

School District in which child(ren) reside (please check one):

Bangor	<input type="checkbox"/>	Pen Argyl	<input type="checkbox"/>
Easton	<input type="checkbox"/>	Pleasant Valley	<input type="checkbox"/>
East Stroudsburg	<input type="checkbox"/>	Pocono Mountain (bussing not available)	<input type="checkbox"/>
Nazareth	<input type="checkbox"/>	Stroudsburg	<input type="checkbox"/>
Pen Argyl	<input type="checkbox"/>	Other (please specify)	<input type="checkbox"/>

## FAMILY APPLICATION

Are you applying for the admission of all of your school-age children? ☐ YES ☐ NO If not, please state reasons: \_\_\_\_\_

Why do you want your children to attend Faith Christian School? \_\_\_\_\_

### Testimony

- **ON A SEPARATE SHEET OF PAPER**, please state in detail how and when you received Jesus Christ as your personal Savior and His meaning in your life. A written testimony is requested from both parents; this testimony will be forwarded to the FCS membership committee and is a requirement for membership in the school's Association. **Your application is not complete without this.**

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### Parents Code

1. I will pray earnestly for Faith Christian School (FCS). I understand that our family is expected to worship weekly, have active fellowship, and be a member of a local evangelical church.
2. I will cooperate fully in the educational functions of FCS doing my best to make Christian education effective in the life of each of my children that he/she may love and serve the Lord Jesus Christ all of his/her life.
3. I will pay all of my financial obligations to FCS on or before the date due. If I am ever unable to pay on time, I will notify the Business Office in advance (a) giving a reasonable explanation for the delay, and (b) stating when the payment can be made.
4. I will support the policies and procedures of FCS as they are stated in the Student Handbook.
5. I will support the school through gifts in addition to my tuition payments and fees, as the Lord enables. (As God has prospered us, may we be faithful to Him.)
6. I will undertake volunteer duties for FCS as opportunities arise.
7. I will recommend FCS to other Christian families as opportunities arise.
8. I will attend meeting and parent functions of the school regularly, even though I may not be able to achieve perfect attendance.
9. If I become dissatisfied with the school in any respect, I will seek to resolve the matter with the person or persons involved rather than begin to spread criticism or hold a negative attitude in my heart.
10. I will seek the advancement of FCS in all areas – spiritually, academically, and physically.

### Statement of Faith

1. We believe the Bible, Old and New Testaments, to be inspired by the Holy Spirit, the only infallible, authoritative Word of God.
2. We believe in One God, Creator of all things, eternally existent in three persons, Father, Son and Holy Spirit.
3. We believe in both the humanity and deity of our Lord Jesus Christ, in His virgin birth, in His sinless life, in His miracles, in His vicarious and atoning death through His shed blood, in His bodily resurrection, and in His ascension to the right hand of the Father, and in His continued intercession for all believers.
4. We believe that for salvation of lost and sinful man, it is absolutely essential to receive by faith the Lord Jesus Christ, thus regenerated by the Holy Spirit, man becomes a Child of God.
5. We believe in the continuing ministry of the Holy Spirit, who convicts men of sin; and by indwelling the Christian, guides, instructs and empowers him/her for godly living and faithful service.
6. We believe in the spiritual unity of all believers in our Lord Jesus Christ, who is the Head of the body, the church.
7. We believe in the personal and imminent return of the Lord Jesus Christ to receive His bride, the church.
8. We believe in the resurrection of both the saved and the lost, the saved to eternal life with Christ and the lost to eternal damnation.

### Statement of Parent or Guardian

In signing this application, I (we) agree that:

1. I have read and agree with the Statement of Faith of the school and am willing to have my children educated in accordance with it.
2. It is my responsibility to strive diligently toward the observance of the Parents' code as God enables me by the power of the Holy Spirit.
3. The school reserves the right to place my child at the appropriate grade level.
4. The school reserves the right to use a photograph, video recording, and/or sound recording of my child in any present or future FCS promotional materials.
5. The school reserves the right to dismiss any student who does not cooperate with the educational process.
6. I understand that tuition does not cover the cost of operating the school and thus my participation is needed in financial help and prayer support in a mutual effort to train our children.

**Signed:**

Parent/ Guardian 1 \_\_\_\_\_

Parent/ Guardian 2 \_\_\_\_\_

Date \_\_\_\_\_

Date \_\_\_\_\_

# STUDENT APPLICATION

## Faith Christian School

### ADMISSIONS OFFICE

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E-MAIL: [info@fcsilions.org](mailto:info@fcsilions.org); WEBSITE [www.fcsilions.org](http://www.fcsilions.org)

School Code 394294

**Please use black ink when completing this form**  
**To be completed by parents of the applicant**

Date of Application \_\_\_\_\_

Full Legal Name of Student \_\_\_\_\_ Nickname \_\_\_\_\_

Please check one: ☐ MALE ☐ FEMALE Date of Birth \_\_\_\_\_ Grade entering \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

School District in which student resides \_\_\_\_\_

Has student repeated a grade? \_\_\_\_\_ Has student been in gifted or accelerated classes? \_\_\_\_\_

If an above answer is yes, please explain: \_\_\_\_\_

Name and address of church where student attends. \_\_\_\_\_

Pastor's Name \_\_\_\_\_

List all previous schools attended:

Current School \_\_\_\_\_ Grade(s) \_\_\_\_\_ Year \_\_\_\_\_

Address of current school \_\_\_\_\_

Prior School \_\_\_\_\_ Grade(s) \_\_\_\_\_ Year \_\_\_\_\_

Address of Prior School \_\_\_\_\_

**If additional space is required; please list on a separate piece of paper.**

What is student's attitude toward school and teachers? \_\_\_\_\_

How does student respond to discipline? \_\_\_\_\_

Does your child have a history of a chronic physical condition, emotional condition, or a learning disability, which has required professional attention or which may require special attention at Faith Christian School?

☐ YES ☐ NO If yes, please explain and include copies of all reports: \_\_\_\_\_

OVER

## STUDENT APPLICATION

Has student ever been enrolled in a special class or received tutoring?

If yes, please explain: \_\_\_\_\_

Has student been tested for learning differences and/or received modified instruction (Copies of ER and IEP's are required)? If yes, please explain: \_\_\_\_\_

Does student wear corrective lenses? **YES NO** (circle one)

Has student had a history of ear infections or hearing difficulty? **YES NO** (circle one)

If yes, please explain \_\_\_\_\_

Check if school personnel have reported any of the following about student, or if you have observed these characteristics at home:

CHARACTERISTIC	PAST PERSONNEL	PRESENT PERSONNEL	AT HOME
Distractible			
Inattentive			
Disturbs other children			
Is often late in completing assignments			
Exhibits aggressive behavior			
Has difficulty following oral instructions			
Has difficulty following written instructions			
Has difficulty with oral expression			
Has difficulty with written expression			

Did a Faith Christian School family specifically recommend and encourage your family to register at Faith Christian School? **YES NO** (circle one)

If yes, please indicate the name of this family so we can express our appreciation to that family.

Name of family \_\_\_\_\_

### Non-discrimination policy:

Faith Christian School admits students of any race, color, national and ethnic origin to all the rights, privileges, programs and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, national, or ethnic origin administration of its educational policies, athletic and other school administered programs.

**REGISTRATION FEE  
\$150.00 PER FAMILY AND  
\$50.00 FOR EACH STUDENT IN YOUR FAMILY  
NOT REFUNDABLE UNLESS STUDENT IS NOT ACCEPTED BY FCS  
NOT APPLICABLE TOWARD TUITION**

For Office Use Only

Test Fee \_\_\_\_\_ Family # \_\_\_\_\_ Student # \_\_\_\_\_



**FAITH CHRISTIAN SCHOOL**  
122 Dante Street Roseto, PA 18013-1259  
(610) 588-3414 FAX: (610) 588-8103

## **SIXTH THROUGH TWELFTH GRADE STUDENT QUESTIONNAIRE**

*To be completed by student applicant in your own handwriting. If more space is needed, please use another sheet of paper, giving your name and the number of the question being answered.*

Name \_\_\_\_\_ Date \_\_\_\_\_

Please check one: ☐ MALE ☐ FEMALE Grade entering \_\_\_\_\_

1. How did you learn about Faith Christian School? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Do you yourself want to attend Faith Christian School? ☐ Yes ☐ No Why or why not? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Do you get your homework done at school or do you take it home with you every day? \_\_\_\_\_  
What math classes are you taking or have taken for the grades 9-12? \_\_\_\_\_  
What subject is hardest for you? \_\_\_\_\_ What subject is the easiest for you? \_\_\_\_\_  
What was your average grade in school last year? \_\_\_\_\_  
Have you ever been on the honor roll? ☐ Yes ☐ No  
Have you ever failed a subject? ☐ Yes ☐ No What subject? \_\_\_\_\_  
Have you ever been suspended or expelled from school? ☐ Yes ☐ No Why? \_\_\_\_\_  
\_\_\_\_\_ Do you plan to go to college? ☐ Yes ☐ No  
What occupation would you like to pursue as an adult? \_\_\_\_\_

4. If you are a Christian, how do you know? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ How long have you been one? \_\_\_\_\_

5. Do you go to church every Sunday? ☐ Yes ☐ No Where? \_\_\_\_\_  
Do you go to Sunday School regularly? ☐ Yes ☐ No ☐ My church does not have Sunday School  
Do you regularly attend a youth group? ☐ Yes ☐ No Where? \_\_\_\_\_  
Do you sing in a choir/worship team at your church? ☐ Yes ☐ No  
Do you play a musical instrument? ☐ Yes ☐ No What? \_\_\_\_\_  
Have you ever helped plan or put on a program in your church? ☐ Yes ☐ No What? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. What things do you like to do most in your free time? \_\_\_\_\_

\_\_\_\_\_

7. Do you like sports? ☐ Yes ☐ No What games do you like best? \_\_\_\_\_

8. How often do you read a book? \_\_\_\_\_

What is the title of a book you have read recently? \_\_\_\_\_

9. What's your favorite music genre you listen to? \_\_\_\_\_

\_\_\_\_\_

10. How much time do you spend on social media? \_\_\_\_\_ Video games? \_\_\_\_\_

Phone? \_\_\_\_\_ Computer/tablet \_\_\_\_\_?

Total number of technology hours daily? \_\_\_\_\_ Total number of hours weekly? \_\_\_\_\_

11. Do you have a job after school or on weekends? ☐ Yes ☐ No

What is it? \_\_\_\_\_ How many hours a week do you work? \_\_\_\_\_

12. What streaming service do you use the most? \_\_\_\_\_

Name the last three movies/shows/videos you saw:

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

13. Are most of your friends and acquaintances Christians? ☐ Yes ☐ No

Are most of your friends your age? ☐ Yes ☐ No

Do you know any current students here at FCS? ☐ Yes ☐ No

Who? \_\_\_\_\_

\_\_\_\_\_

14. Have you received any honors in school or outside of school?

\_\_\_\_\_

\_\_\_\_\_

15. Select three adjectives that friends might use to describe you

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

16. Have you ever used tobacco? ☐ Yes ☐ No Drugs? ☐ Yes ☐ No Alcoholic Beverages? ☐ Yes ☐ No

If there is a "Yes" answer, please explain:

\_\_\_\_\_

\_\_\_\_\_

With my signature below, I certify that I have answered the above questions honestly and completely and have not held back information Faith Christian School should know about me.

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*

# Faith Christian School Teacher Reference forms

Please give the attached forms to two former teachers. Please have the former teachers return the completed forms to **Faith Christian School, 122 Dante Street, Roseto, PA 18013** as soon as possible. **Your application is not complete without these forms.**

FAITH CHRISTIAN SCHOOL  
122 Dante St., Roseto, PA 18013-1259  
PH: 610-588-3414 – FAX: 610-588-8103

TEACHER REFERENCE

\_\_\_\_\_  
STUDENT NAME

\_\_\_\_\_  
DATE

\_\_\_\_\_  
ENTERING GRADE

The above named student is making application to attend Faith Christian School. Please give us your confidential perspective on this student.

Relationship with student: \_\_\_\_\_

1. How has this student performed academically, compared with:

Student's potential?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Previous classmates?

\_\_\_\_\_  
\_\_\_\_\_

2. What is your perception of the student's respect for authority?

\_\_\_\_\_  
\_\_\_\_\_

3. Do you recommend that we accept this student at FCS?

\_\_\_\_ YES      \_\_\_\_ NO      \_\_\_\_ With reservation. Please explain. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Any additional comments? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Thank you for your time in completing this form. Please mail it directly to FCS in the enclosed envelope.

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signature



FAITH CHRISTIAN SCHOOL  
122 Dante St., Roseto, PA 18013-1259  
PH: 610-588-3414 – FAX: 610-588-8103

TEACHER REFERENCE

\_\_\_\_\_  
STUDENT NAME

\_\_\_\_\_  
DATE

\_\_\_\_\_  
ENTERING GRADE

The above named student is making application to attend Faith Christian School. Please give us your confidential perspective on this student.

Relationship with student: \_\_\_\_\_

1. How has this student performed academically, compared with:

Student's potential?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Previous classmates?

\_\_\_\_\_  
\_\_\_\_\_

2. What is your perception of the student's respect for authority?

\_\_\_\_\_  
\_\_\_\_\_

3. Do you recommend that we accept this student at FCS?

\_\_\_\_ YES      \_\_\_\_ NO      \_\_\_\_ With reservation. Please explain. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Any additional comments? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Thank you for your time in completing this form. Please mail it directly to FCS in the enclosed envelope.

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signature