

Prairie Christian School Student Application



Student Name _____

DOB _____ Current Grade Level _____

Parent/Guardian _____

Address _____

Telephone (_____) _____ Work Phone (_____) _____

Cell Phone _____ E-mail _____

Student Info: Please remit a separate application for each child you wish to enroll.

Most recent school attended _____

Address of School _____ Phone _____

Administrator _____ Teacher _____

Grade level completed _____ Year last attended _____

Did your child have any difficulties socially and his/her last school? Y N If yes please explain _____

Does your child have any learning disabilities or special needs? Y N If yes, what are they? _____

Has your child experienced any discipline problems in school, church or home? Y N If yes, please explain _____

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Family Information:

Please list the student's brothers and sisters.

_____	Birth Date _____
_____	Birth Date _____
_____	Birth Date _____
_____	Birth Date _____

Parents Work Information:

Father's Workplace _____	Phone _____
Mother's Workplace _____	Phone _____

Do you attend church as a family? Y N Where _____

Church Minister _____

Please provide two references other than family members.

Name _____	Name _____
Phone _____	Phone _____
Address _____	Address _____
_____	_____

Agreement:

I have read the handbook and agree to support the guidelines therein.

_____	(Mother's Signature)
_____	(Father's Signature)
_____	(Student Signature)

Waiver of Liability

I, _____, the undersigned am a legal parent/guardian of _____
_____. This minor is a pupil of Prairie School, PO Box 33, El Paso, IL 61738. I hereby release Prairie School from any liability associated with injury while on school grounds or at a school activity. This includes, but is not limited to, medical expenses, personal property losses, or other damages. I also acknowledge that we have medical insurance to cover expenses incurred while at Prairie School or while attending a school activity.

(Name of Parent/Relationship/Date)

(Name of Insurance Carrier)