

1. Parent/Guardian Information

We at Yorkville Christian High School understand that the education of a student is a process undertaken in partnership between the home and the school, with the home being the chief stakeholder. We understand your responsibility before God for your student, as parent or guardian, and are honored that you have chosen us to help you fulfill that obligation of love. Please help us by providing the information below.

Parent/Guardian: _____
First Name Last Name

Parent/Guardian: _____
First Name Last Name

Contact information: _____
Phone Email

Phone Email

Address: _____
Street

City, State Zip Code

What attracted you to Yorkville Christian High School?

What do you hope to see in your student's life as a result of their education at Yorkville Christian High School?

Church Affiliations: Please list any church(es), if any, you have attended in the previous five years.

Church/city _____

Church/city _____

2. Student Information

Name: _____

First

Middle

Last

Current Grade: _____ Age: _____ DOB (MM/DD/YY): _____

School(s) last attended by student: (School Name/Years Attended)

Describe any physical or learning limitations or medical needs of which you are aware:

Has your student ever been suspended or placed on probation? If yes, please explain:

Academic Performance: Please circle Yes or No for the following questions:

Has the student ever had a professional evaluation to assess the need for academic accommodations?
Yes/No

*If yes, please provide copies of the evaluations (ex/ 504 Plan, I.E.P.)

Has the student ever received special educational accommodations or services?
Yes/No

Do you feel your student currently needs evaluation of special educational accommodations?
Yes/No

Has your student been in an accelerated or gifted program?
Yes/No

Do you feel your student may need accelerated placement?
Yes/No

Social/Emotional

Are there any past concerns in the following areas that may negatively influence your student's learning ability? (Circle any that may apply)

Social Emotional Behavioral Other

Comments: _____

Speech and Language

Are there any speech/language concerns present that may affect educational performance? Yes/No

Comments: _____

Health

Do past or present illnesses or health-related conditions present a challenge to your student's ability to learn? Yes/No

Comments: _____

Vision and Hearing

Do vision or hearing issues present a challenge to your student's ability to learn? Yes/No

Comments: _____

Motor Abilities

Do any current motor ability issues or need for special access to accommodations apply to your student?
Yes/No

Comments: _____

3. Information Release

***Attach transcripts from the prior school attended

4. Financial

FACTS tuition application completed? Yes/No

Date completed (MM/DD/YY): _____

5. YCHS Distinctive Agreement

YCHS recognizes the importance of providing students an environment that supports the fundamental truth that God has given all of us the ability to learn, as well as unique talents and abilities. The purpose of formal education is to not only provide students with the tools to become informed and productive citizens in society, but also to nurture and strengthen the individual's God-given talents and guide them in the development of their own personal relationship with their Creator.

The Bible emphasizes the necessity of living a disciplined life. To that end, YCHS will partner with the parents to provide the walls of support that students need to understand that boundaries are a necessary protection in their formative years, while providing students the freedom to enjoy their learning experiences.

In view of these values, I, the parent/guardian of the student named in this application, agree to support the practical expression of the Yorkville Christian High School educational philosophy, which includes:

- A Christian worldview through which all subjects of study will be interpreted
- The Bible as the source of authority in all mediations
- Enrollment in Bible class
- Participation in our monthly school-wide service learning projects held in the local community
- Practical hands-on skill assignments in addition to the traditional academic core studies

Parent/Guardian Signature: _____

Date: _____