



Cypress Christian Schools

Rec'd:	_____
By:	_____
Pd:	_____

### 2019/20 Application for Admission

*\$100 Application Fee (non-refundable) and Birth Certificate required at the time of application*

**STUDENT INFORMATION:**

Student Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ Gender: M F

Current Grade: \_\_\_\_\_ Grade Entering 19/20: \_\_\_\_\_ (K Full/Half)

Local Public School District: \_\_\_\_\_

Last School/Preschool: \_\_\_\_\_ Grade: \_\_\_\_\_

Has the student ever experienced disciplinary problems in school? Yes No

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

\_\_\_\_\_

Are there any academic concerns in regards to this student? Yes No

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

\_\_\_\_\_

Has the applicant ever been recommended for special education or been diagnosed with a reading, learning disability, ADD, ADHD or other condition? Yes No

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

\_\_\_\_\_

Is there currently or has there been an IEP in place for this student? Yes No

Are you planning to apply for the Ohio EdChoice Scholarship? Yes No

**FAMILY INFORMATION:**

Please indicate adult(s) student lives with: \_\_\_\_\_

Please list school-aged siblings under 18 years of age: name, grade, and school attending: \_\_\_\_\_

\_\_\_\_\_

Name of church currently attending: \_\_\_\_\_

Is there a court order in place for this student that dictates a parenting schedule, custody, residential parent, or other situation?                      Yes                      No

Please list any languages spoken in the home other than English: \_\_\_\_\_

Does the student speak another language other than English?                      Yes                      No

Has either parent/guardian ever been convicted of a felony?                      Yes                      No

**HOUSEHOLD 1 INFORMATION:**

Address: \_\_\_\_\_  
\_\_\_\_\_

Guardian Name: \_\_\_\_\_ Relationship to Student: \_\_\_\_\_

Contact Number: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Guardian Name: \_\_\_\_\_ Relationship to Student: \_\_\_\_\_

Contact Number: \_\_\_\_\_ E-Mail: \_\_\_\_\_

**HOUSEHOLD 2 INFORMATION (IF APPLICABLE):**

Address: \_\_\_\_\_  
\_\_\_\_\_

Guardian Name: \_\_\_\_\_ Relationship to Student: \_\_\_\_\_

Contact Number: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Guardian Name: \_\_\_\_\_

Relationship to Student: \_\_\_\_\_

Contact Number: \_\_\_\_\_ E-Mail: \_\_\_\_\_

*I certify that the information provided in this application is true and complete to the best of my knowledge. I understand that falsified statements on this application may be grounds for dismissal of my student from CCS. I also confirm that I have reviewed and accept the CCS Admissions Policies that can be found at [cypressschools.tv](http://cypressschools.tv).*

**Print Name:** \_\_\_\_\_

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

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