

# OGCS New Student Application Form

This form is to be filled out by the parent or legal guardian of any **NEW ELEMENTARY STUDENT** requesting admission to Oak Grove Christian School.

Student's Name \_\_\_\_\_ Birth Date \_\_\_\_\_ Grade Entering \_\_\_\_\_

Name of last school attended \_\_\_\_\_

Address of last school attended \_\_\_\_\_

Reason for leaving last school \_\_\_\_\_

Has your child ever been retained? \_\_\_\_\_ Yes \_\_\_\_\_ No If yes, what grade(s) \_\_\_\_\_

Has your child ever been dismissed or withdrawn from a school or had a documented history of discipline problems? \_\_\_\_\_ Yes \_\_\_\_\_ No If yes, please explain on a separate sheet of paper.

Has your child had any special needs services or educational testing we should be aware of (speech, hearing, IEP, 504 plan, remedial reading or math)?

If so, please state which services he or she has received. \_\_\_\_\_

Name(s) of person/s child lives with \_\_\_\_\_

Mother's Name \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_ Phone # \_\_\_\_\_

Father's Name \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_ Phone # \_\_\_\_\_

## Enrollment Questionnaire

1. What attracted your family to Oak Grove Christian School?

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2. What can you tell us about your child that would be helpful for his/her teachers to know?

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3. What are your child's special interests, talents, gifts, hobbies and/or extracurricular activities?

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