

# Immanuel Center for Christian Education

## Application for Admission

School year 20\_\_-20\_\_

Grade to enter \_\_\_\_\_

Name of Applicant \_\_\_\_\_  
Last First Middle

Name the student goes by \_\_\_\_\_ Date of application \_\_\_\_\_

Extended Care Program (please circle) Yes No

K4 & K5 students only: (please circle) Half day Full day

Please check to insure that all information requested is provided. Only fully completed applications can be approved. An application will not be considered complete unless it includes all the information requested.

- Cover Sheet
- Part A Parent/Guardian's Information
- Part B Student Information
- Part C Statement of Cooperation
- Part D (New students only) Copy of recent report card, achievement test, high school transcript
- Part E (New students only) Mississippi Certificate of Immunization Compliance Form 121
- Part F (New students only) Copy of Student's birth certificate
- Part G (New students only) Letter from pastor confirming active church involvement of at least one parent. (See Mission Statement in the ICCE Handbook)

**This pastor letter must be on file in the school office before a conference will be scheduled to discuss student enrollment.**

### Notice of Nondiscriminatory Policy as to Student

The Immanuel Center for Christian Education 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 and ethnic origin in administration of its educational policies, admission policies, athletic programs, and other school-administered programs.

**PART A: PARENT/GUARDIAN INFORMATION**

Student Name \_\_\_\_\_ Date of Birth \_\_\_\_\_  
Last Goes by

**Parent #1**

Last Name \_\_\_\_\_ First \_\_\_\_\_ MI \_\_\_\_\_

Street \_\_\_\_\_ Home Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_ Zip Code \_\_\_\_\_

Work Phone \_\_\_\_\_ ext. \_\_\_\_ Position \_\_\_\_\_ Employer \_\_\_\_\_

Relation to Student \_\_\_\_\_ Lives with student? \_\_\_\_\_

E-mail address \_\_\_\_\_

Cell Phone or Other information \_\_\_\_\_

**Parent #2**

Last Name \_\_\_\_\_ First \_\_\_\_\_ MI \_\_\_\_\_

Street \_\_\_\_\_ Home Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_ Zip Code \_\_\_\_\_

Work Phone \_\_\_\_\_ ext. \_\_\_\_ Position \_\_\_\_\_ Employer \_\_\_\_\_

Relation to Student \_\_\_\_\_ Lives with student? \_\_\_\_\_

E-mail address \_\_\_\_\_

Cell Phone or Other information \_\_\_\_\_

**In case of an emergency and we are not able to reach parents, please list someone in town we may call:**

Name \_\_\_\_\_ Home # \_\_\_\_\_

Relationship to Student \_\_\_\_\_ Work # \_\_\_\_\_

Cell # \_\_\_\_\_

Name \_\_\_\_\_ Home # \_\_\_\_\_

Relationship to Student \_\_\_\_\_ Work # \_\_\_\_\_

Cell # \_\_\_\_\_

**PART B: STUDENT INFORMATION**

Name: \_\_\_\_\_  
Last First Middle Goes By

Grade to Enter: \_\_\_\_ Student Cell Phone # \_\_\_\_\_ Social Security # \_\_\_\_\_

Gender (circle one) M F Birth date \_\_\_\_\_ Age \_\_\_\_ Race \_\_\_\_ Child # \_\_\_\_ of \_\_\_\_

Name of School Now/Last Attending \_\_\_\_\_

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

School Telephone \_\_\_\_\_ Name of Principal \_\_\_\_\_

Student's Testimony: Are you a Christian? \_\_\_\_ If so, on what do you base your answer? \_\_\_\_\_

Church Affiliation \_\_\_\_\_ Pastor \_\_\_\_\_

Church Phone # \_\_\_\_\_ Ministries in which applicant is involved: \_\_\_\_\_

Describe your family's attendance (Please circle)  
Every Service Almost Every Service Sunday Only Occasionally Seldom

Ministries in which parents are involved: \_\_\_\_\_

List any prescribed medications this student takes: \_\_\_\_\_

Describe any special learning differences, medical needs and other situations concerning this student that the school should know: \_\_\_\_\_

Siblings \_\_\_\_\_ Date Of Births \_\_\_\_\_ School Now Attending \_\_\_\_\_

**Part C**  
**Statement of Cooperation**

In making application for my child, it is my desire to have him/her complete the school year 20\_\_-20\_\_. In signing this application, we understand that:

1. The discipline procedures of the school require our cooperation.
2. The teacher has full discretion, subject to the approval of the principal, for the grade placement of our child based on his/her performance and tested skill level.
3. We give our child permission to take part in all school activities, including sports and field trips. We will not hold the school liable for any injury to us or our child at school or during any school activity.
4. Our participation is needed in lending practical help and prayer support in a mutual effort to train our child. Because of this, we will endeavor to attend Parent-Teacher meetings, and called Parent-Teacher conferences unless providentially hindered.
5. We understand that the school has the policy of not refunding registration fees.
6. We as parents hereby agree to abide by the rules and regulations as adopted by I.C.C.E. and those printed in the Student Handbook. Should we have questions concerning the enforcement of these rules we will communicate with school personnel according to the proper chain of authority which is: teacher, then administrator, then school board.

\_\_\_\_\_  
Father's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Mother's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Guardian's Signature

\_\_\_\_\_  
Date