

K-8th Grade Application for Admission

The non-refundable application fee must accompany application when submitted.



MORNING STAR
CHRISTIAN SCHOOL

School Year 20__ - 20__

Grade Applying For: _____

STUDENT INFORMATION:

Student's Name: _____
First Middle Last

Date of Birth: _____ Gender: M ___ F ___ Home Phone: _____

Previous School: _____
School Address Phone Number

Has this student experienced any discipline or conduct problems, school suspension, expulsion, grade retention, double promotion, IEP or special education services? ___ Yes ___ No If Yes, please specify: _____

ETHNICITY/RACE: ___ American Indian ___ Hispanic/Latino ___ Black/African American ___ Asian ___ White Other: _____

CHECK ANY THAT APPLY:

___ Father is deceased ___ Mother is deceased ___ Parents are divorced ___ Parents are separated Other: _____

RESIDENTIAL PARENT/GUARDIAN INFORMATION:

First Last Phone Relationship to Student

Email Employer

First Last Phone Relationship to Student

Email Employer

Address: _____
City State Zip

NON-RESIDENTIAL PARENT INFORMATION:

First Last Phone Relationship to Student
Address: _____
City State Zip

E-mail Address: _____ Email Announcements? ___ Yes ___ No

Parent Commitment

FINANCIAL

Full Payment Plan– Pay in full before the first day of school and receive a 5% discount.

Monthly Payment Plan– Annual tuition will be divided into 10 even monthly payments, invoiced September – June. Payments may be made using cash, check, Visa or MasterCard. For your convenience, payments can be made online through the link provided in the monthly emailed statements. A \$25.00 late fee will be applied to accounts not paid by the 20th of the month unless a previous payment arrangement has been made.

Collection– In the event that a bill is delinquent for three months, the account may be turned over to a collection agency. All collection charges, attorney fees and court costs will be added to the bill.

Records– In the event a student leaves Morning Star Christian School with an outstanding balance, student records may be held until payment is received in full.

MEDICAL TREATMENT

MSCS provides \$5,000 supplemental accident insurance for each enrolled student. This coverage is intended to be excess coverage and pay only after other available coverage, like health insurance, pays. In the event of a student injury during regular school activity, the staff will seek medical care as soon as possible. Medical release forms must be on file for all students.

NON-DISCRIMINATION POLICY

Morning Star Christian School does not discriminate in admission, educational, financial or hiring practices on the basis of sex, race, color, ethnicity, creed or physical disability. Please be aware that our school is not equipped to serve children having needs that would best be met in a special education setting.

PARENT VOLUNTEER PROGRAM

I understand Morning Star Christian School families with children in preschool through eighth grade need to volunteer 20 hours of time during the school year or be charged \$25.00/hour for the remaining hours.

FAMILY HANDBOOK ACCEPTANCE

I have received a Morning Star Christian School Family Handbook and willfully accept the contents therein. I understand that non-compliance may result in charges to my account and/or disciplinary measures as described in the handbook.

Parent or Guardian Signature

Date

Parent or Guardian Signature

Date

For Office Use Only:

Application Received Date: _____ Application Fee: _____ Immunization Record: _____ Birth Certificate: _____

Medical Release Form: _____ Family Release Form: _____ Bus 1: _____ Bus 2: _____ Teacher: _____

Before Care: _____ After Care: _____