

# Elk Valley Christian School

5110 Elk River Road North                      Elkview, WV 25071  
 (304) 965-7063      FAX: (304) 965-7064

A ministry of Mt. Pleasant Baptist Church

## Student Application

### PERSONAL DATA

Date	Legal Name: Last	First	Middle	Usually Called	
Grade to enter	Year/Semester to enter <input type="checkbox"/> 1st <input type="checkbox"/> 2nd	Birth date / /	Birthplace	Social Security Number - -	Gender: Male <input type="checkbox"/> Female <input type="checkbox"/>

### SCHOOLS ATTENDED

School name	City, State	From	To	Grades completed

### SCHOLASTIC BACKGROUND

**Scholastic Average** - Circle the grade in each subject area which corresponds to the last grade period.

English	A	B	C	D	F
Mathematics	A	B	C	D	F
Science	A	B	C	D	F
History	A	B	C	D	F

**Activities of Interest** - List musical involvement, sports, clubs, hobbies, and interests.

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**Impairments** - List any physical impairments, learning disabilities, or psychological disorders.

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Has the applicant ever been suspended or expelled from any school?

No

Yes

If yes, when? \_\_\_\_\_

## Student Questionnaire (for grades 6<sup>th</sup> – 12<sup>th</sup> required)

The following questions are to be answered as completely and accurately as possible by the **student applicant**.

**Salvation Experience** - Relate briefly your salvation experience. You may use Scripture references.

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**Christian Walk** - What in your life indicates that you are walking with the Lord?

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### Behavioral Guidelines

At Elk Valley Christian School we believe that the principles found in the Bible should govern our behavior. The Bible teaches that all that we do should glorify God and positively influence others and ourselves. In addition, it instructs us of our responsibility to maintain a good testimony before unbelievers.

In order to promote an atmosphere which honors the Lord, we have instituted certain rules which govern behavior. Some of these reflect our Biblical convictions. Others reflect our desire to establish standards which *avoid all appearance of evil* and enable us to maintain testimonies which are above reproach. Still others are included in order that we may *do all things decently and in order*.

Specifically, students must incorporate habits in their lives which stimulate spiritual growth, including regular church attendance in a doctrinally sound church, reading of the Bible, and consistent prayer. Students are not permitted to use alcoholic beverages, non-medical drugs, or tobacco. Immorality, including pre-marital sex and homosexuality, are forbidden by the Word of God and grounds for dismissal EVCS. Students must separate from worldly influences, such as rock music, movies containing ungodly philosophy and content, pornographic literature, and behavior and dress associated with the world's philosophy. Bad attitudes are not tolerated, including attitudes of distrust, dishonesty, selfishness, damaging criticism, disrespect, unethical conduct, and irreverence. Students are expected to maintain this kind of behavior both on and off campus.

Those who consistently disregard these guidelines may lose their privilege of re-enrollment or may be dismissed from the school.

Do you agree to abide by the behavioral guidelines described above and in the Student Handbook?

No

Yes

If no, explain your disagreements.

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Why do you want to attend Elk Valley Christian School?

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*I have accurately provided the application information.*

\_\_\_\_\_  
Student's signature

\_\_\_\_\_  
Date

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## Family Information

### FAMILY DATA (family with whom the applicant lives)

Date	<input type="checkbox"/> Natural father <input type="checkbox"/> Father <input type="checkbox"/> Other _____	Marital Status	<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Remarried	<input type="checkbox"/> Widowed <input type="checkbox"/> Divorced <input type="checkbox"/> Separated
<input type="checkbox"/> Send me the SMART bill <input type="checkbox"/> Send me mail	<input type="checkbox"/> Mr. <input type="checkbox"/> Dr. <input type="checkbox"/> Other _____	Name		Social Security Number
Home address		City		State      Zip
County		Home phone		<input type="checkbox"/> You <u>MAY</u> publish my phone number in the School Directory <input type="checkbox"/> You may <u>NOT</u> publish my phone number
Occupation		Employer		Employment address
Work phone		Other work number <input type="checkbox"/> Cellular <input type="checkbox"/> Pager <input type="checkbox"/> Other _____		
Date	<input type="checkbox"/> Natural mother <input type="checkbox"/> Mother <input type="checkbox"/> Other _____	Marital Status	<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Remarried	<input type="checkbox"/> Widowed <input type="checkbox"/> Divorced <input type="checkbox"/> Separated
<input type="checkbox"/> Send me the SMART bill <input type="checkbox"/> Send me mail	<input type="checkbox"/> Mrs. <input type="checkbox"/> Miss <input type="checkbox"/> Dr. <input type="checkbox"/> Other _____	Name		Social Security Number
Home address		City		State      Zip
County		Home phone		<input type="checkbox"/> You <u>MAY</u> publish my phone number in the School Directory <input type="checkbox"/> You may <u>NOT</u> publish my phone number
Occupation		Employer		Employment address
Work phone		Other work number <input type="checkbox"/> Cellular <input type="checkbox"/> Pager <input type="checkbox"/> Other _____		

### GRAND PARENTS of applicant

<b>Paternal Grandparents</b>	Names		
Home address	City, State, Zip		Phone
<b>Maternal Grandparents</b>	Names		
Home address	City, State, Zip		Phone

## Children Living at Home

Name	Age	Grade	School attending
Name	Age	Grade	School attending
Name	Age	Grade	School attending
Name	Age	Grade	School attending
Name	Age	Grade	School attending

## Other Information

<input type="checkbox"/> Church attending Name:	<input type="checkbox"/> Church Member	Address	Pastor	Phone
Describe your church attendance				
<input type="checkbox"/> All service regularly church <input type="checkbox"/> Some service regularly (1 - 2 per week) <input type="checkbox"/> Attend services occasionally (1 - 3 per month) <input type="checkbox"/> Rarely attend church <input type="checkbox"/> Do not attend				
Emergency contact	Address	Relationship	Daytime Phone	
Emergency contact (alternate)	Address	Relationship	Daytime Phone	
Family doctor	Address	Phone		

## Tuition Payment

Indicate your preferred payment plan				
<input type="checkbox"/> Payment in full by 1st day of school (Discount applied)	<b>OR</b>	SMART Payment Plan:	<input type="checkbox"/> Automatic bank draft	<input type="checkbox"/> Coupon book (Additional form required after acceptance)

**Personal Testimony** - Please briefly describe your salvation and personal relationship/s with the Lord.

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Why do you wish to enroll your child/children in Elk Valley Christian School?

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*I have read the Elk Valley Christian School Statement of Faith, Parent's Pledge of Cooperation, and Special Fund-raiser, and Tuition Acknowledgment on the informational cover, and, by voluntarily signing below, I express my agreement with their content and spirit.*

_____	_____
Father's signature	Date
_____	_____
Mother's signature	Date

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## Pastor Recommendation

*Note to the applicant:* Please request your pastor to complete the following evaluation and send it to Elk Valley Christian School. This evaluation form is vital for our application review process. Thank you.

Applicant's name \_\_\_\_\_ Grade \_\_\_\_\_ Date \_\_\_\_\_

### Dear Pastor,

The student whose name appears above has applied for enrollment at Elk Valley Christian School. We desire to make a wise enrollment decision which is in the best interest of both Elk Valley Christian School and the applicant. Therefore, we request an evaluation from the applicant's pastor in order to aid us in this decision. Would you, please, take a few minutes and candidly answer the following questions?

### Applicant Information

How long have you known the applicant? \_\_\_\_\_

How well do you know the applicant?

- Close relationship       Fairly well       Casually

Please describe the church attendance of the applicant.

- All services regularly       Some service regularly  
(1 -2 per week)       Attends occasionally  
(1 -3 per month)       Rarely

Does the applicant profess to be saved/born again?       Yes       No       I don't know

Do you observe evidence to support this profession?       Yes       No

How would you describe the applicant's attitude toward authority?

- Consistent with Biblical teacher       Have not observed

Questionable - Please explain \_\_\_\_\_

Definite problem - Please explain \_\_\_\_\_

