

MOUNT CALVARY CHRISTIAN SCHOOL FAMILY APPLICATION FOR ENROLLMENT

629 Holly St., PO Box 508
Elizabethtown, PA 17022
717/367-1649

OFFICE USE ONLY	
Date Received	_____
Date of App.	_____
Interviewed	_____
Accepted	<input type="checkbox"/>
Rejected	<input type="checkbox"/>
Testing Date	_____
ENROLLMENT FEE PAID	
<input type="checkbox"/> Check	<input type="checkbox"/> Cash \$_____

FAMILY NAME _____ **EMAIL ADDRESS** _____

Address _____ Phone _____

City _____ County _____ State _____ Zip _____

FATHER

Name _____ Initial _____ Occupation _____

Employer _____ Address _____

May we call you at work? Yes No Work Phone _____

Cell Phone _____

MARITAL STATUS

(Check one) Married Widowed Separated Divorced Remarried Never Married

MOTHER

Name _____ Initial _____ Occupation _____

Employer _____ Address _____

May we call you at work? Yes No Work Phone _____

Cell Phone _____

MARITAL STATUS

(Check one) Married Widowed Separated Divorced Remarried Never Married

MCCS GRADUATE? Yes No Year of Graduation: _____

CHILDREN LIVING AT HOME

Name _____ Age _____ School Attending _____

Name _____ Age _____ School Attending _____

Name _____ Age _____ School Attending _____

Name _____ Age _____ School Attending _____

WE DESIRE TO ENROLL THE FOLLOWING CHILDREN

Birth date

LAST NAME	FIRST	INITIAL	Month	Day	Year	Grade to Enter	Sex

Child(ren) lives with: Both Parents Other _____

Child(ren) lives in _____ School District. Child(ren) lives approx. _____ miles from MCCS.

Will your children be riding the public school transportation? Yes No Referred by: _____

Would you like to receive an application for financial aid? ___ yes ___ no

CHURCH INFORMATION

Church _____ Pastor _____
Address _____ City _____ State _____ Zip _____
Phone _____ Church Member: _____ Yes _____ No

- Yes No Would you be a contact person for the school to your church?
 Yes No Do your children attend church with you? If no, please explain. _____

RELIGIOUS INFORMATION

Family Name _____ Date _____

FATHER

Do you know if you have eternal life? _____
On what do you base your answer? _____

- Yes No Member of church?
 Yes No Attends Sunday School regularly?
 Yes No Attends a.m. worship regularly?
 Yes No Attends p.m. worship regularly?
 Yes No Attends midweek service?

What activities of your church are you involved in other than
Sunday Morning Worship? _____

What are your ideas about the purpose and function of Mount Calvary Christian School ? _____

What benefits do you feel that Mount Calvary Christian School will have for your child(ren)? _____

*The Mount Calvary Christian School admits students of any race, color, national and ethnic origin, disability or handicap 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, disability or handicap in administration of its educational policies, admissions policies, scholarship and loan program, and athletic and other school administrated programs.

MOTHER

Do you know if you have eternal life? _____
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