

For Office Use Only
<input type="checkbox"/> Date Rec'd _____
<input type="checkbox"/> Birth Certificate _____
<input type="checkbox"/> Physical Exam _____
<input type="checkbox"/> Immunizations _____
<input type="checkbox"/> Dental (K) _____
<input type="checkbox"/> Family Interview _____



COMMUNITY CHRISTIAN SCHOOL
2406 9½ Avenue South
Fort Dodge, IA 50501
Phone: (515) 573-3011
Fax: (515) 573-5425
ccsofficefd@gmail.com
www.ccsfd.org

NEW STUDENT INFORMATION
(NEW K-8th Students ONLY)

STARTING INFORMATION

Student Name _____
Last First Middle Goes By

Start Date _____ Entering Grade _____

STUDENT RECORD INFORMATION

Name of School to obtain student's records _____

Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____

STUDENT ACADEMIC INFORMATION

Does the student have an I.E.P.? ____ yes ____ no If yes, what is / was the need? _____

Has the student been involved in any special supplemental program (speech, Title 1, other)? ____ yes ____ no If yes, Please explain: _____

Are there any other areas of concern about learning? _____

Has the student ever been retained in a grade? ____ yes ____ no If yes, explain: _____

STUDENT BEHAVIOR INFORMATION

Has the student ever had discipline problems in school? ____ yes ____ no If yes, explain _____

Has the student ever been suspended or expelled from school? ____ yes ____ no If yes, explain: _____

What methods of discipline have you found to be effective? _____

We are interested in teaching and training children academically, emotionally, physically, and spiritually here at CCS. We are looking forward to the possibility of serving your student and family.

TO BE COMPLETED BY PARENT/GUARDIAN

Please explain why you wish to enroll your student in CCS? _____

Parent/Guardian Signature _____ **Date** _____

TO BE COMPLETED BY STUDENT (7th & 8th only)

Please explain why you wish to attend CCS? _____

Student Signature _____ **Date** _____

ITEMS FOR SCHOOL OFFICE

Required items to be turned in to the school office prior to the start of classes:

- _____ ALL completed CCS application forms
- _____ Birth Certificate
- _____ Physical Exam (signature of health provider require)
- _____ Certificate of Immunizations (signature of health provider require)
- _____ Certificate of Dental Screening (Kindergarten ONLY)

Once we have received the completed CCS application forms and the new family information forms, a family interview will be scheduled with the Dean of Students. Within two weeks of your interview you will be notified of the status of your student's enrollment at CCS.