

For Office Use Only  
Application Received \_\_\_\_\_  
Application Fee \_\_\_\_\_  
Application Approved \_\_\_\_\_

**Hebron Christian School**  
**5100 Henryville Rd, Pheba, MS 39755**  
**PH: 662-494-7513    FAX: 662-494-1002**

**APPLICATION FOR ADMISSION**

Please note: An application for admission must be completed for each student seeking enrollment. A nonrefundable registration fee of \$600 should be submitted with the application. If deemed necessary by the school administration, students may be tested before being admitted. If a student is not accepted for admission for any reason, the registration fee will be refunded.

**Student Information**

**Student's Full Name:** \_\_\_\_\_  
(Last) (First) (Middle)

Student's Preferred Name: \_\_\_\_\_ Student SS#: \_\_\_\_\_ DOB: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ (City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip) \_\_\_\_\_

County of residence: \_\_\_\_\_ Grade for which applying: \_\_\_\_\_ School Year: \_\_\_\_\_

Male \_\_\_ Female \_\_\_ Student's Phone: \_\_\_\_\_ Student's Email: \_\_\_\_\_

Check  the appropriate mode of transportation:

- Private Vehicle (see handbook for student drivers)     Houston Bus  
 Starkville/Maben/Mathiston Bus     West Point Bus

\*If using partial bus transportation, select  A.M. or  P.M. route only.

**Parent Information**

NOTE: In situations where the parents are divorced, provide the name of the male and the female head of household with whom the child is residing. **(If student does not reside with both parents, custody papers must be attached to this application.)**

Student resides with (check one):    Both Parents (\_\_\_)    Mother(\_\_\_)  
Father(\_\_\_)    Guardian(\_\_\_)

**Male Parent or Legal Guardian's Full Name:** \_\_\_\_\_

Home address (if different from student): \_\_\_\_\_

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell #: \_\_\_\_\_ Work #: \_\_\_\_\_

Father's Email: \_\_\_\_\_

**Female Parent or Legal Guardian's Full Name:** \_\_\_\_\_

Home address (if different from student): \_\_\_\_\_

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

Home phone: \_\_\_\_\_ Cell #: \_\_\_\_\_ Work #: \_\_\_\_\_

Email: \_\_\_\_\_

## **Emergency & Medical Information**

Emergency Contact (Other than Parent): \_\_\_\_\_ Phone : \_\_\_\_\_

Physician Name: \_\_\_\_\_ Phone : \_\_\_\_\_

If emergency treatment is required and the parents cannot be reached immediately, may school authorities use their own judgement in calling the doctor indicated above, or if we cannot get in touch with him/her, may we call another doctor?

Yes(  ) No (  ) If no, please specify actions to be taken by school officials. \_\_\_\_\_

Please list any medical problems which your child may have, i.e. allergies, heart abnormalities, asthma, diabetes, hearing, vision, etc. \_\_\_\_\_

## **Academic History**

Was student previously enrolled at Hebron Christian School? Yes (  ) No (  ) If yes, grades attended: \_\_\_\_\_

Please list ALL previous school(s) attended:

School Name	City	Grade	Year(s)
_____	_____	_____	_____
_____	_____	_____	_____

Has student been suspended or expelled from school? Yes(  ) No (  ) If yes, why? \_\_\_\_\_

Was student re-admitted? Yes(  ) No (  ) Has applicant been convicted of a felony? Yes(  ) No (  )

Explain, if yes: \_\_\_\_\_

Has student ever had any disciplinary difficulty in school? If yes, explain. \_\_\_\_\_

Indicate any mental, emotional, or special physical disabilities, which may affect his/her activities or progress. (Reply will be held in strict confidence.) \_\_\_\_\_ **Provide appropriate documentation.**

What forms of discipline have you found effective with your child? \_\_\_\_\_

Why do you want your child to attend Hebron Christian School?

What are your priorities regarding the total education of your child?

Please provide other information about your child, which would enable us to better serve him/her.

## **Family's Church Affiliation**

Name of Church: \_\_\_\_\_

Please give a statement of your personal experience and faith in Jesus Christ.

Mother: \_\_\_\_\_

Father: \_\_\_\_\_

## **Referral**

Please list the name of any currently enrolled HCS family, if any, who has aided in the recruitment of you and your family to Hebron Christian School: \_\_\_\_\_

## **Statement of Understanding**

I understand that:

- A. Prior to my child's admission, I must have returned the completed application to the HCS office.
- B. I must attach a copy of my child's most recent report card unless he/she is entering kindergarten or 1<sup>st</sup> grade and a recent standardized achievement test score(s) if available (new students only).
- C. My child's standardized achievement test scores may be used as one factor in determining acceptance to HCS and he/she may be required to take other tests to determine admission and/or placement.
- D. My child's admission depends upon vacancies in the grade to which he/she is applying and a determination by HCS that my child has met all other admission requirements set forth by the school's administrative staff and Board of Directors.
- E. All new applications for admission are subject to approval by the Board of Directors of HCS.
- F. Hebron Christian School reserves the right to dismiss any student whose conduct or academic progress is not in compliance with the school's regulations, policies, and/or standards.
- G. Regular and punctual attendance is required for satisfactory completion of the school programs, and every student is expected to be in regular attendance unless health or some other urgent reason prohibits him/her from doing so.
- H. Students enrolling in kindergarten or first grade at HCS or those students in grades 2-12 who are new enrollees at HCS during the current year must provide a "Certificate of Compliance Form 121" which states that all immunizations are up-to-date, a copy of the child's birth certificate and social security card.

I understand the terms of this application and certify that to the best of my knowledge the information provided herein is true and correct.

## **Statement of Cooperation**

It is my understanding that is the policy of Hebron Christian School to make no refunds on registration fees, tuition, or other fees paid.

I understand that I am obligated to Hebron Christian School for the entire cost of tuition, bus, and fees for the whole school year once school begins, and that these fees are due and payable at the beginning of the school year. However, I may opt to pay the entire amount due over 10 months. Should we transfer our student(s) out of HCS for reasons other than listed below, we are still obligated to pay the entire cost of tuition and fees.

### **A. Job transfer out of the local area    B. Catastrophic illness of that student**

I give Hebron Christian School permission for my child to take part in all school activities and school sponsored trips away from the school premises. I also believe that corrective discipline is sometimes necessary for the welfare of each student, as well as for the entire school. I give permission for my child's teacher and/or other agent of the school to make and enforce school and classroom, regulations in a manner consistent with Christian principles and discipline as set forth in the Scriptures. Should legal action, for any reason, be taken against Hebron Christian School or any employee or agent thereof, on my child's behalf and the school or its agent not be found at fault, I agree to pay any attorney fees, court fees, damages, or other cost that Hebron Christian School or its agent should incur to defend itself against such action.

This Statement of Cooperation will be in effect for as long as my child, children, or others to be enrolled, attend HCS, and it will be made a part of the child/children's permanent record.

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**Signature of Parent/Guardian**

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**Date**