

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 registration fee of \$400 should be submitted with the application; the application will not be processed without submission of the registration fee. If deemed necessary by the school administration, students may be tested before being admitted to HCS. If a student is not accepted for admission by Hebron Christian School for any reason, the registration fee of \$400, less a \$25 processing fee, will be notified.

### STUDENT INFORMATION

Full Name: \_\_\_\_\_  
(Last) (First) (Middle)

Name Used: \_\_\_\_\_ Student SSN: \_\_\_\_\_ DOB: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Email: \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

Will student need HCS bus transportation? \_\_\_\_\_

If, so which route? \_\_\_ West Point \_\_\_ Houston \_\_\_ Starkville/Maben/Mathiston/Eupora

Proposed Entrance Date: \_\_\_\_\_ Grade Applying for \_\_\_\_\_

### FAMILY INFORMATION

Parent(s) or Legal Guardian: \_\_\_\_\_

NOTE: In situation where the parents are divorced, we need the name of the male and female head of household for which child is residing.

Male Guardian's Full Name: \_\_\_\_\_

Home address: \_\_\_\_\_

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

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

Female Guardian's Full Name: \_\_\_\_\_

Home address: \_\_\_\_\_

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

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

Student Resides with: Both Parents \_\_\_\_\_ Mother \_\_\_\_\_ Father \_\_\_\_\_ Guardian \_\_\_\_\_

(If student does not reside with both parents, custody papers must be attached to this application.)

**ACADEMIC HISTORY**

Has student previously been enrolled at Hebron Christian School? \_\_\_Yes \_\_\_No

Grades attended:\_\_\_\_\_ Number of years:\_\_\_\_\_

Please list previous school(s) attended:

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

Address of last school attended:\_\_\_\_\_ Principal/Counselor Name:\_\_\_\_\_

Has student been suspended or expelled from school? \_\_\_\_\_ If yes, why?  
\_\_\_\_\_

Was student re-admitted? \_\_\_\_\_

Has applicant ever 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.)  
\_\_\_\_\_  
\_\_\_\_\_

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

**REFERRAL SECTION**

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: \_\_\_\_\_

**PARENTAL CONSENT FOR FIELD TRIPS AND ATHLETIC TRIP PERMISSION:**

My child has permission to go on all supervised field trips, to class parties, and to athletic competitions sponsored by Hebron Christian School. I understand that I will be notified of all field trips and class projects, which will take my child off campus prior to the event itself. Transportation will be provided on a Hebron Christian School bus or in private cars. I understand that all reasonable precautions will be taken to insure my child's safety per these outings. I will not hold Hebron Christian School or any parent or school employee responsible in case of an accident.

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

**CHURCH AFFILIATION**

Name of Church: \_\_\_\_\_ Members Y( ) No ( )

Address of Church: \_\_\_\_\_ Phone: \_\_\_\_\_

Pastor's Name: \_\_\_\_\_

What church services do you attend? \_\_\_\_\_

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

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

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

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.

**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.

Medication taking: \_\_\_\_\_

Is applicant currently, or has he/she been under psychiatric care or counseling services? Yes \_\_ No\_\_

\*\*\*Racial Non-Discriminatory Statement\*\*

\*\*Hebron Christian School admits students of any race, color, and national origin\*\*

## 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 the school a "Certificate of Compliance Form 121" which states that all immunizations are up-to-date.

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

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Signature of Parent/Guardian

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Date

## 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