



UNITY CHRISTIAN SCHOOL

STUDENT APPLICATION

711 10th Street (815) 589-3912
(815) 589-4430 Fax

For Office Use Only

Date Received _____ Appointment _____ Action Taken _____

For School Year _____ - _____

Student Information

Student's Name _____ Nickname (if any) _____ Male _____ Female _____
Last First Middle

Ethnicity (requested for state statistics): _____

Student's Age _____ Date of birth _____ Place of birth (city, state) _____

Current Grade in School: _____ Applying for Grade _____

Full- or Part-Time? _____

Student lives with (if other than parents) _____

Previous School Experience

Please list schools your child has previously attended including Preschool and Kindergarten.

School Name	Address	Phone Number	Dates Attended	Grade Completed	Homeschool? Yes / No
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

The child's entire school file must be copied and sent as part of the application

Church Experience

Church where child attends (if different than parents): _____

How often does the child attend? _____

Does the child attend: Sunday School Youth Group worship services

Describe your child's relationship with God: _____

Unity Christian School does not discriminate because of race, sex, color, age, or national and ethnic origin regarding student admission.

Unity Christian School

711 10th Street Fulton, IL 61252

(815)-589-3912

www.unitychristian.com