



Parent Response

(Please complete and return with your Application for Admission)

How did you hear about Fresno Christian Schools?

What are your goals for your son/daughter over the next three or four years?

What do you expect Fresno Christian Schools to do for your child?

Should you decide to have your child enroll at FCS, are there any special physical or academic accommodations that your child would need? *(i.e. administer prescribed medications, modified workload, etc.)*

Please describe your son or daughter.

Has your son or daughter had any disciplinary difficulty at school or at home? If yes, please explain.

Student Name _____

Parent Signature _____ Date _____



Student Response

(Please complete and return with your Application for Admission)

Student's Name _____

What school activities have you taken part in during the past two years?

Do you have any hobbies or special interests? If yes, please tell us a little bit about them.

Which athletic and/or extracurricular activities are you interested in participating in?

Have you ever been suspended or expelled from school? If yes, please explain.

Have you ever used or experimented with drugs, cigarettes, or alcohol? If yes, please explain.

Have you been found guilty of an unlawful act? If yes, please explain.

Are you a Christian? If so, when did you become a Christian? Explain how it has made a difference in your life.

Why do you want to come to Fresno Christian Schools?

I have answered all the questions honestly. Yes No

Student Signature _____ Date _____