



# **New Student Application: Part 2 Individual Student Application Kindergarten**

*To be completed for each student applying*

## ► **STUDENT INFORMATION**

**For School Year:** \_\_\_\_\_ **\$25 per student fee**

*Please list name and information for the student applicant:*

\_\_\_\_\_ Last Name      \_\_\_\_\_ First Name      \_\_\_\_\_ Middle Name      \_\_\_\_\_ Preferred Name/Nickname

\_\_\_\_\_ Birthdate (MM/DD/YYYY)      \_\_\_\_\_ City & Country of Birth

Applying for Grade: \_\_\_\_\_ Month/Year to start at GPCS: \_\_\_\_\_  Female  Male

## ► **EDUCATION**

\_\_\_\_\_ Preschool/Day Care Name (if applicable)      \_\_\_\_\_ Dates of Attendance

\_\_\_\_\_ School Address      \_\_\_\_\_ City      \_\_\_\_\_ State      \_\_\_\_\_ Zip Code

\_\_\_\_\_ School Phone

## ► **STUDENT PROFILE**

Explain what the teachers ought to know about your child as a learner and as a person: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Has your child ever been evaluated for, been recommended for, and/or received any kind of special educational services in the past?  Yes  No If yes, please explain:

\_\_\_\_\_  
\_\_\_\_\_

Does your child have any learning disabilities or special learning needs of which you are aware?  Yes  No If yes, please explain:

\_\_\_\_\_  
\_\_\_\_\_

Does your child require special classroom seating or accommodations of any kind?  Yes  No If yes, please explain:

\_\_\_\_\_  
\_\_\_\_\_

Please list any physical disabilities, allergies, limitations on activities, and medications that pertain to your child's school life:

\_\_\_\_\_  
\_\_\_\_\_

*(form continues on other side)*

Do you have any concerns about potential emotional or behavioral issues which may impact your child's educational experience?

Yes  No If yes, please explain:

---

---

Have you or others been concerned for or has your child been evaluated for any physical, mental, academic, or emotional needs?

Yes  No If yes, please explain:

---

---

Are you concerned about any speech or language difficulties?

Yes  No If yes, please explain:

---

---

In what areas (academic, athletic, musical, etc.) does your child excel? \_\_\_\_\_

---

---

**► PARENT/GUARDIAN AFFIRMATION**

My signature affirms that the information provided in this Individual Student Application is complete and accurate. If I complete this form electronically and type my name below, I understand and agree that this form of electronic signature has the same legal force and effect as a manual signature.

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

\_\_\_\_\_  
Date

If applicable, please include a copy of all psychological reports including any Individual Education Plan (IEP) and/or similar.

**NONDISCRIMINATION POLICY**

Greater Portland Christian School is a distinctively Christian institution dedicated to biblical principles of fairness and equality (Proverbs 24:23; Acts 17:26; Galatians 3:28). Therefore, GPCS welcomes students of any sex, race, color, and national and ethnic origin, providing them all the rights, privileges, programs and activities generally accorded or made available to students in the school. It does not discriminate on the basis of sex, race, color, or national and ethnic origin in administration of its educational policies, admissions policies, tuition assistance programs, and athletic and other school-administered programs.