

# FAMILY APPLICATION

2009 - 2010 School Year

Desert Christian High School ~ 7525 E. Speedway ~ Tucson, Arizona 85710

(520) 298-5817 Fax: (520) 298-9312

For Office Use Only: Received \_\_\_\_/\_\_\_\_/\_\_\_\_

Applicants of all races, color, and national or ethnic origin are welcome to apply and are considered for admission without discrimination.

DATE \_\_\_\_\_

APPLICANT NAME \_\_\_\_\_ PREFERS TO BE CALLED \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_ SEX \_\_\_\_\_ APPLYING FOR GRADE 9 10 11 12

**PARENTS OR GUARDIANS RESPONSIBLE FOR APPLICANT:** MUST BE PRIMARY CONTACT(S) AND FINANCIALLY RESPONSIBLE FOR THE APPLICANT'S FEES AND TUITION IF ACCEPTED

**YOUR RELATIONSHIP TO APPLICANT:** (CHECK ALL THAT APPLY)  LIVE WITH APPLICANT  
 FATHER  MOTHER  STEPFATHER  STEPMOTHER  LEGAL GUARDIAN  CUSTODIAL PARENT

Name: \_\_\_\_\_

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

City, State, Zip: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Employer: \_\_\_\_\_ Work Phone: \_\_\_\_\_

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

**YOUR RELATIONSHIP TO APPLICANT:** (CHECK ALL THAT APPLY)  LIVE WITH APPLICANT  
 FATHER  MOTHER  STEPFATHER  STEPMOTHER  LEGAL GUARDIAN  CUSTODIAL PARENT

Name: \_\_\_\_\_

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

City, State, Zip: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Employer: \_\_\_\_\_ Work Phone: \_\_\_\_\_

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

**CHECK ANY THAT APPLY: APPLICANT'S**  
 Father is deceased  Mother is deceased  Parents are divorced  Parents are separated

**PLEASE LIST SIBLINGS LIVING AT HOME, WITH AGES AND CURRENT SCHOOL:**

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

**PLEASE LIST FAMILY MEMBERS WHO HAVE ATTENDED DCS (K-12):**

\_\_\_\_\_ YEAR(S)  
\_\_\_\_\_ YEAR(S)  
\_\_\_\_\_ YEAR(S)

**FAMILY INFORMATION:** Where do you attend church? \_\_\_\_\_

Are you members of this church?  YES  NO NUMBER OF YEARS ATTENDING \_\_\_\_\_

Pastor with whom you are best acquainted: \_\_\_\_\_

PLEASE EXPLAIN IF PARENTS AND STUDENT ATTEND DIFFERENT CHURCHES:

\_\_\_\_\_

**EDUCATIONAL INFORMATION**

**PREVIOUS SCHOOLS ATTENDED:** Information must be complete and account for kindergarten through current year.

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

GRADES \_\_\_\_\_ TO \_\_\_\_\_ FROM \_\_\_\_\_ TO \_\_\_\_\_

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

GRADES \_\_\_\_\_ TO \_\_\_\_\_ FROM \_\_\_\_\_ TO \_\_\_\_\_

Has the applicant (check all that apply):

Ever been retained in a grade? \_\_\_\_\_

Ever been suspended from school? \_\_\_\_\_

Ever been expelled from school? \_\_\_\_\_

Been involved with juvenile authorities? \_\_\_\_\_

Had disciplinary problems at school? \_\_\_\_\_

Used illegal drugs, alcohol, tobacco? \_\_\_\_\_

Attended more than one school

in a year? \_\_\_\_\_

**Explanation of “yes” answer(s) above:**

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**REASONS FOR ATTENDING DESERT CHRISTIAN MIDDLE SCHOOL**

**Completed by applicant in his/her handwriting:**

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**Completed by a parent/guardian:**

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**APPLICANT NAME** \_\_\_\_\_

**STATEMENT OF FAITH: Give a brief statement regarding your personal Christian Faith.**

**Applicant**

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**Parent /Guardian**

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**WE UNDERSTAND AND COMMIT OURSELVES TO FULFILLING THE FOLLOWING UPON ACCEPTANCE OF OUR CHILD AT DESERT CHRISTIAN MIDDLE SCHOOL:**

2. We will strive to maintain a healthy home life and a meaningful and regular church life.
3. We understand our cooperation is expected in (a) submitting to school policies as stated in the parent/student handbook, including the Statement of Faith and Philosophy of Education (see attached); (b) faithful prayer; (c) timely tuition payments according to our tuition contract; (d) volunteered time; (e) special gifts when possible; (f) support school policies.
4. We understand that the school reserves the right to dismiss any student who does not (a) respect and observe spiritual and/or behavioral standards and (b) cooperate in our educational goals.
5. We understand that any false or unreported information is grounds for immediate dismissal.

*We certify that all of the information presented in this application is, to the best of our knowledge, complete and accurate and we are not withholding any information available to us that would be pertinent to the enrollment of this child at DCMS.*

**Applicant's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Father / Stepfather / Other Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Mother / Stepmother / Other Signature** \_\_\_\_\_ **Date** \_\_\_\_\_