

# GENERAL ADMISSION FORM

It will be helpful to us at Trinity Christian School to know about your child's background, social and emotional growth. Please complete this form in detail and use the reverse side of the paper whenever necessary.

Child's Full Name \_\_\_\_\_ Birthdate \_\_\_\_\_

Nickname \_\_\_\_\_ (if other than actual name)

Parents **(Father)** \_\_\_\_\_ home phone \_\_\_\_\_

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

Place of Employment: \_\_\_\_\_ work phone: \_\_\_\_\_

**(Mother)** \_\_\_\_\_ home phone \_\_\_\_\_

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

Place of Employment: \_\_\_\_\_ work phone: \_\_\_\_\_

Place of Worship \_\_\_\_\_

Other Children in the Family - List names and ages:

\_\_\_\_\_

\_\_\_\_\_

List any other persons living with child & relationship to child: \_\_\_\_\_

How do you feel your child gets along with other children? \_\_\_\_\_

What are your child's favorite activities and interests? \_\_\_\_\_

Does your child have any allergies or medical needs? \_\_\_\_\_

Does your child have any dietary needs? \_\_\_\_\_

Does your child have any specific fears? \_\_\_\_\_

Does your family have any pets? \_\_\_\_\_

Are there any areas you feel your child needs help? \_\_\_\_\_

What are your expectations for Trinity Christian School to provide for your child? \_\_\_\_\_

\_\_\_\_\_

Are you concerned with any of the following:

Temper tantrums       Fears       Aggressiveness       Right or left handed

Reaction to authority       Timidity       Nervous Habits       Toilet problems

Describe your child briefly: (physical appearance, personality and abilities) \_\_\_\_\_

Thanks for taking time to acquaint us with your child. It is our hope to provide as much individual care for your child as possible. With your help we can do that!

Please provide any other information regarding your child that you may feel is pertinent:

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**Field Trip Permission Form**

\_\_\_\_\_ has my permission to participate in scheduled field trips for the 2007-2008 school year. Information will be made available two weeks prior to each event. This form will be placed in your child's file for future use.

\_\_\_\_\_  
Parent's Signature

**Family Directory**

I give permission to have my family's name and address included in a class directory. This would be shared with the other families in your child's class. The purpose is to better acquaint you with the other children and their families.

\_\_\_\_\_ Yes, include my child

\_\_\_\_\_ No, do not include my child

\_\_\_\_\_  
Parent's Signature