



Applicant Checklist

Please consult the following checklist to be sure that all steps of your application have been completed. **This checklist is for your convenience. Please do not return it.** If you have any questions, feel free to call the school office.

Application for Admission

Date Submitted: _____

These steps must be completed before applications will be considered:

- Complete all questionnaires, reference forms, and required student records.
- Pay the application fee of \$75 per student.

Application for Tuition Assistance (Optional)

Date Submitted: _____

Tuition assistance applications are available online only through links on our website under *Admissions*. Applications for assistance should be in process while the admissions application is under review. Please direct any questions to the business office or consult our website for explanation of available options.

Required Documents

Date Submitted: _____

Students Applying for Kindergarten

- Completed Student Application
- Application Fee (\$75.00 non-refundable)

- Parent Questionnaire
- Family Reference Form
- Preschool Teacher Recommendation Form

Students Applying for 1st-3rd Grade

- Completed Student Application
- Application Fee (\$75.00 non-refundable)
- Previous year's report card

- Parent Questionnaire
- Family Reference Form
- Grammar School Recommendation Form

Students Applying for 4th-6th Grade

- Completed Student Application
- Application Fee (\$75.00 non-refundable)
- Previous two years' report cards

- Parent Questionnaire
- Family Reference Form
- Previous two years' standardized test scores
- Grammar School Recommendation Form

Students Applying for 7th-12th Grade

- Completed Student Application
- Application Fee (\$75.00 non-refundable)
- Previous two years' report cards
- Previous two years' standardized test scores
- Student Questionnaire

- Parent Questionnaire
- Family Reference Form
- Mathematics Teacher Recommendation Form
- English Teacher Recommendation Form
- High School Transcript (if applicable)

Academic Screening

Date Scheduled: _____

Once all documentation has been received and reviewed, academic screening will be scheduled.

Family Interview

Date Scheduled: _____

Once all required documents have been received and academic screening completed, a family interview will be scheduled. Before your interview, please thoroughly familiarize yourself with the SRCS Mission/Vision Statement and Student Core Values. We are excited to discuss this essential definition of who we are, and we look forward to hearing your story and your interest in partnering with us. ***Students in grades 6-12 are required to attend the interview.***

Acceptance and Registration Fee

Payment Date: _____

Families will be notified of the admissions decision by letter following the interview. Upon acceptance, parents have ten days to remit a **\$150.00 per student** registration fee.

Warrior Welcome Event

Date Scheduled: _____

All new families are **required** to attend a meeting to receive orientation information regarding life as an SRCS family.



SEVEN RIVERS CHRISTIAN SCHOOL

4221 W. Gulf to Lake Hwy • Lecanto, Florida 34461 • 352.746.5696
www.sevenriverscs.org • email: srcs@sevenrivers.org

Application for Admission

Application Date: _____

Student Name _____ Preferred Name _____ Male Female
Date of Birth _____ Social Security# _____ - _____ - _____ U.S. Citizen? Yes No
Home Address _____
Street Apt # City State Zip
Student's Cell Phone (if applicable) _____ Student's Email _____
Family Home Phone _____ Applying for Grade Level _____ School Year _____

If applications are being submitted for siblings, it is only necessary to complete the following information once for the entire family. If students have different parents, please complete the parent information relevant to your family's situation.

Father or Male Guardian

Name (Dr./Mr./Rev.) _____ Employer _____
Address _____ Profession/Position _____
City _____ State _____ Zip _____ Address _____
Email _____ City _____ State _____ Zip _____
Cell Phone _____ Home Phone _____ Business Phone _____

Mother or Female Guardian

Name (Dr./Mrs./Ms.) _____ Employer _____
Address _____ Profession/Position _____
City _____ State _____ Zip _____ Address _____
Email _____ City _____ State _____ Zip _____
Cell Phone _____ Home Phone _____ Business Phone _____

Check all that apply. Applying for Tuition Assistance? Yes No

Parental status? Parents Married Parent Deceased Separated Divorced Other _____
Student lives with? Father & Mother Father Mother
 Guardian Stepfather Stepmother Other _____
Who receives mail? Father Mother Guardian Other _____
Has legal custody? Father Mother Guardian Other _____
Is financially responsible? Father Mother Guardian Other _____

Present School _____

Address _____
Street City State Zip

Has student repeated a grade? Yes No What grade? _____

Has the applicant ever been suspended, expelled, denied re-enrollment, counseled not to return to a school, or been the subject of any major school disciplinary action? Yes No If yes, please explain on a separate sheet of paper.

Has the applicant ever been evaluated for academic, speech, behavioral, physical, substance abuse, emotional, or attention difficulties by a school official, psychologist, physician, or other professional? Yes No If yes, please attach a copy of the evaluation report and/or diagnostic results to this application.

Is there any medical or other reason that the applicant cannot participate fully in any normal school activities, including athletics or extracurricular activities? Yes No If yes, please explain. _____

Are there any specific factors or conditions, including any special medications or allergies, affecting your child of which the school should be informed? Yes No If yes, please explain. _____

I acknowledge that, as an independent school, SRCS is not obligated to accommodate state or federal education plans. Yes No

In order to better serve your child, we need to know if there have been any experiences that will influence the community life at Seven Rivers Christian School. Failure to notify us could result in your child's separation from Seven Rivers Christian School.

Does the applicant have any siblings? Yes No If yes, please complete the following.

Name	Birthdate	Grade	School	Name	Birthdate	Grade	School
_____	_____	_____	_____	_____	_____	_____	_____

Key factors influencing your application to Seven Rivers: Spiritual Curriculum Reputation Faculty Facilities Class Size Athletics Other _____

Check the additional offerings at SRCS that are of particular interest to the applicant. Art Drama Band Missions Yearbook Intramurals Robotics Athletics _____ Other _____

Family's church attendance: Whole Family Active One Parent Active Attend Occasionally Children Attend Never
Place of Worship _____ Pastor _____ Member? Yes No

Address _____
Street City State Zip

How did you hear about Seven Rivers Christian School? Please give names where possible.

Alumnus _____ Website _____ Church _____
 Social Media _____ SRCS Staff _____ Advertising _____
 Friend _____ Doctor _____ Other _____

Do you have any relatives currently attending SRCS? Yes No If yes, please list names. _____

Please review the applicant checklist provided to be sure all required information is included. Please sign below.

Parent or Guardian Signature Parent or Guardian Signature Date



Parent Questionnaire

Applicant's Name _____

School Year _____ Requested Grade _____

Please take time to thoroughly answer the following questions. If you need additional space, please continue your answers on another piece of paper.

1. Why are you considering Seven Rivers Christian School? _____

2. What are the applicant's greatest academic strengths? _____

3. What are the applicant's academic weaknesses? _____

4. What are your expectations of Seven Rivers Christian School? _____

5. Describe the applicant's social interactions with peers and adults (please cite specific examples, if appropriate).

6. Are there any family circumstances that might affect the applicant's performance of which we should be aware? If yes, please explain. Yes No

7. Please share information to help us understand the applicant's athletic or extracurricular interests, talents, and team participation.

8. **Grades 9-12 only:** What plans does the applicant have after graduating high school? _____

9. Seven Rivers Christian School does not tolerate the use or possession of drugs (including alcohol) or drug-related paraphernalia and may dismiss a student for violation of this policy. Will you support this policy? Yes No

10. Has the applicant been out of school for an extended period of time for reasons other than vacations or minor illness such as the flu? Yes No

If you answered No to Question 9 or Yes to Question 10, please explain.

Our signatures below confirm that all information given in this application and its related forms is correct to the best of our knowledge. We understand that any omission, misrepresentation of the facts, falsifying, or withholding of information in completing this application and all required documents constitutes grounds for immediate withdrawal of the application, cancellation of admission, and/or termination of enrollment at Seven Rivers Christian School. Further, we understand that upon enrollment we are expected to become familiar with and abide by the rules and regulations as set forth in the SRCS Student Handbook.

Custodial Parent's Signature

Date

Custodial Parent's Signature

Date

Legal Guardian's Signature

Date



SEVEN RIVERS CHRISTIAN SCHOOL

4221 W. Gulf to Lake Hwy • Lecanto, Florida 34461 • 352.746.5696
www.sevenriverscs.org • email: srcs@sevenrivers.org

Family Reference Form

(One per family)

Please have someone outside of your immediate family who can represent your family to SRCS (such as a pastor, community leader, employer, or teacher) fill out the Family Reference Form.

To Be Completed by Applicant

<i>Name of Applicant(s)</i>	<i>Requested Grade(s)</i>	<i>Phone Number</i>	<i>Email Address</i>	
<i>Street Address</i>	<i>City</i>	<i>State</i>	<i>Zip</i>	

To Be Completed by Pastor or Reference

The student is an applicant for admission to Seven Rivers Christian School. Please be frank in your responses; the information you provide is confidential. Thank you for your time and effort.

AREAS	RESPONSE	COMMENT
Home Background	<input type="checkbox"/> Two-parent home: stable <input type="checkbox"/> Two-parent home: unstable <input type="checkbox"/> One-parent home: stable <input type="checkbox"/> One-parent home: unstable	
Home Discipline	<input type="checkbox"/> Balanced <input type="checkbox"/> Too little <input type="checkbox"/> Too much <input type="checkbox"/> Inconsistent	
Parental Involvement	<input type="checkbox"/> Eagerly seek to involve themselves in student life <input type="checkbox"/> Must be encouraged to involve themselves, but supportive <input type="checkbox"/> Often defensive and unsupportive <input type="checkbox"/> Have remained uninvolved	
Student Cooperation	<input type="checkbox"/> Responds well to authority <input type="checkbox"/> Usually obedient <input type="checkbox"/> Resents authority <input type="checkbox"/> Unpredictable	
Student Emotional Stability	<input type="checkbox"/> Stable <input type="checkbox"/> Usually well-controlled <input type="checkbox"/> Excitable, moody, upsets others <input type="checkbox"/> Apathetic, irresponsible	
Student Industry	<input type="checkbox"/> Hard worker <input type="checkbox"/> Good, dependable worker <input type="checkbox"/> Works just enough to get by <input type="checkbox"/> Lazy, needs constant supervision	
Student Judgment	<input type="checkbox"/> Unusual maturity <input type="checkbox"/> Average common sense <input type="checkbox"/> Immature, erratic <input type="checkbox"/> Poor	
Student Responsibility	<input type="checkbox"/> Excellent: volunteers for tasks, accepts responsibility for actions <input type="checkbox"/> Usually accepts when asked <input type="checkbox"/> Avoids when possible <input type="checkbox"/> Often irresponsible	
Student Leadership	<input type="checkbox"/> Leads classroom peers easily in a positive manner and direction <input type="checkbox"/> Prefers to follow, but will stand against poor group behavior <input type="checkbox"/> Follows others of questionable judgment <input type="checkbox"/> Leads others in poor group behavior	

Name of Student _____

1. How long have you known the applicant/family? Less than 1 year 1-2 years 3-5 years 5+ years

In what relationship? _____

2. How well do you know the applicant? Intimately Pretty Well Fairly Well Only Casually

3. What do you consider to be the major strong points of the applicant? _____

4. What do you consider to be the major weaknesses of the applicant? _____

5. What kind of partner do you think the family will be with SRCS? _____

Evaluator's Name

Email

Evaluator's Organization, if any

Phone

Evaluator's Address

Evaluator's Signature

Date

Please return this form to Seven Rivers Christian School, attn: Admissions, via mail or fax (352-746-5520).

