



Kindergarten - 5th Grade



APPLICATION *for*
ADMISSION

2255 Sullivan Road
Aurora, Illinois 60506
p. 630.892.1551
f. 630.892.1692
www.aurorachristian.org



CHECKLIST *for* APPLICATION PROCESS

for Kindergarten-5th Grade

- SUBMIT APPLICATION
 - Completed application
 - Application fee of \$100/student
 - Grade Reports/Unofficial Transcripts
 - Standardized Test Results (if applicable)
 - Special needs documentation (if applicable)
- INTERVIEW
- TEST (if applicable)

for 6th-12th Grade

- SUBMIT APPLICATION
 - Completed application
 - Application fee of \$100/student
 - Character Reference Form
 - Grade Reports/Unofficial Transcripts
 - Standardized Test Results (if applicable)
 - Special needs documentation (if applicable)
- INTERVIEW
- SHADOW
- TEST (if applicable)

After all steps are complete, final acceptance will be determined and results will be shared with the family. Students may be required to interview with an additional review panel to determine acceptance to Aurora Christian.

A full description of our application process can be found online at www.aurorachristian.org/admissions



APPLICATION for ADMISSION

(please include \$100 non-refundable application fee made payable to Aurora Christian Schools)

APPLICATION DATE _____

START DATE (*Circle one*) Semester 1 Semester 2 Immediately

APPLYING FOR GRADE (*Circle one*)

1/2-Day K K 1 2 3 4 5 6 7 8 9 10 11 12

STUDENT INFORMATION (*Please print or type clearly*)

last (family) name		first (given) name	middle name	jr., etc.
preferred name, if not first name		birth date (month/day/year)	gender: <input type="checkbox"/> male <input type="checkbox"/> female	
home address		ethnicity: <input type="checkbox"/> african-american <input type="checkbox"/> american indian/alaska native <input type="checkbox"/> asian/pacific islander <input type="checkbox"/> caucasian <input type="checkbox"/> hispanic/latino <input type="checkbox"/> multi-ethnic		
city/state	ZIP/postal code			
public school (where student would attend)			district #	
last school attended			district #	
student's home phone	student's cell phone	student's email address		
home church (church name, city, pastor)				

FATHER/GUARDIAN INFORMATION

father's name (first & last) _____

address _____

city/state/ZIP _____

email _____

cell phone _____

work phone _____

father's employer/position _____

MOTHER/GUARDIAN INFORMATION

mother's name (first & last) _____

address _____

city/state/ZIP _____

email _____

cell phone _____

work phone _____

mother's employer/position _____

EMERGENCY CONTACT INFORMATION

emergency contact _____ relationship _____

cell phone _____ home phone _____ work phone _____

SIBLINGS CURRENTLY ATTENDING ACS

APPLICATION for ADMISSION

Parent/Guardian Questionnaire



Why do you, as parents, wish to enroll your student in a Christian School?

Has your child ever attended a school or program designed for students who have academic or other needs (such as programs for the gifted, special needs, etc.)? YES / NO

If yes, please explain:

Has your child ever been retained in any grade? YES / NO Grade: _____

If yes, please explain:

Has your child ever been suspended, expelled or withdrawn from any school school for any reason or is your student currently under any type of suspension? YES / NO

If yes, please attach full details, including name of school, year, and contact person for further details.

Has your child ever had difficulty with civil authorities? YES / NO

If yes, please explain:

Has your child undergone educational evaluation or received professional, psychological, or personal counseling? YES / NO

If yes, please explain:

Please indicate any ongoing medical conditions and describe their usual treatment. This may include special diets, prescriptions or limitations on normal activities.

APPLICATION for ADMISSION

Parent/Guardian Questionnaire

Does your son/daughter take medication on a regular basis? If yes, please specify medicine and dosage.

Is your child under the supervision of the Department of Children & Family Services? YES / NO
If yes, please explain:

Please share any additional information about your child and/or family that you would like submitted to the Admissions Office.

How did you hear about Aurora Christian Schools?

<input type="checkbox"/> website	<input type="checkbox"/> church	<input type="checkbox"/> friends
<input type="checkbox"/> family	<input type="checkbox"/> advertisements	<input type="checkbox"/> event at ACS
<input type="checkbox"/> online search	<input type="checkbox"/> media/news outlet	<input type="checkbox"/> other _____

STATEMENT OF NONDISCRIMINATION

Aurora Christian School admits students of any race, color, nationality, and ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to ACS students. We do not discriminate on the basis of sex, race, color, national or ethnic origin in the administration of our educational policies, admissions procedures, scholarship awards, athletic, and other school administered programs. We do, however, reserve the right to deny admission to any individual who cannot benefit from enrollment based on past academic achievement, disqualifying handicap, or whose personal lifestyle is not in harmony with the stated philosophy and purpose of Aurora Christian School.

PARENT STATEMENT OF COOPERATION

We understand that enrollment in Aurora Christian School is not a right, but a privilege, and do affirm that there are standards that must be maintained for the welfare of each student as well as for the entire school. Therefore, if this application is accepted, we hereby give permission for our student's teachers and/or other agents of the school to make and enforce classroom regulations in a matter consistent with Christian principles of discipline as set forth in Scripture. We will continue to uphold the authority of the teachers and staff of Aurora Christian School by recognizing their right to use the disciplinary measures they deem necessary. We will acquaint ourselves with the grounds for dismissal under both academic and disciplinary circumstances outlined in the Parent/Student Handbook, and we will cooperate fully in this regard.

If I withdraw my child, or if my child is expelled, I will forfeit all fees and monies paid.

I have read and understood this application, and I further certify that the information and attached documents are complete and accurate to the best of my knowledge. I agree to communicate in writing any changes contained herein even if said changes occur after enrollment. I understand that upon discovery of substantial inaccuracy or omission of information requested therein, the school reserves the right to reconsider the admission of this applicant.

Signature of Parent/Guardian _____

Date _____

Please submit this application to:
Aurora Christian Schools Attn: Admissions Office
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