AURORA
CHRISTIAN SCHOOLS

6th -12th Grade

APPLICATION *for*
ADMISSION

CHECKLIST *for* APPLICATION PROCESS

for 6th-12th Grade

- ❏ SCHOOL DAY VISIT (registration required)
- ❏ SUBMIT APPLICATION BUNDLE
  - ❏ Complete application
  - ❏ $125/student non-refundable application fee
  - ❏ Character Reference Form
  - ❏ Grade Reports/Unofficial Transcripts
  - ❏ Standardized Test Results
  - ❏ Special needs documentation: 504, IEP (if applicable)
- ❏ TEST

Email: sarah.woolridge@aurorachristian.org
Phone: 630-264-3871

- ❏ INTERVIEW

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.

for Kindergarten-5th Grade

- ❏ SUBMIT APPLICATION BUNDLE
  - ❏ Completed application
  - ❏ $125/student non-refundable application fee
  - ❏ Grade Reports/Unofficial Transcripts
  - ❏ Standardized Test Results
  - ❏ Special needs documentation: 504, IEP (if applicable)
- ❏ INTERVIEW
- ❏ OPTIONAL SCHOOL DAY VISIT (registration required)
- ❏ TEST

Email: sarah.woolridge@aurorachristian.org
Phone: 630-264-3871

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

APPLICATION for ADMISSION

APPLICATION DATE _____

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

APPLYING FOR GRADE *(Circle one)*

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)

home address

city/state | ZIP/postal code

gender:
- ❏ male
- ❏ female

ethnicity:
- ❏ african-american
- ❏ american indian/alaska native
- ❏ asian/pacific islander
- ❏ caucasian
- ❏ hispanic/latino
- ❏ multi-ethnic

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)

Interests (check all that apply):

- ❏ art
- ❏ band
- ❏ baseball
- ❏ basketball
- ❏ cheerleading/poms
- ❏ choir
- ❏ cross country
- ❏ drama
- ❏ football
- ❏ golf
- ❏ guitar
- ❏ soccer
- ❏ softball
- ❏ track
- ❏ volleyball
- ❏ worship band
- ❏ wrestling
- ❏ yearbook

What is your experience with selected interests?

_____

_____

_____

_____

_____

APPLICATION for ADMISSION

Student Questionnaire *(to be completed by STUDENT in grades 6-12)*

In your own words, explain what you understand the term "Christian" to mean:

_____

_____

_____

_____

_____

_____

Do you consider yourself to be a Christian? YES / NO

The mission of Aurora Christian Schools is "To work with families in bringing their children to a personal relationship with Jesus Christ, educating them from a Christian worldview, and preparing them for a life of service to Christ and their world." What does this mission statement mean to you? What are the benefits of being in this type of school environment? *(you may complete this answer on a separate paper and attach it to the application if necessary)*

_____

_____

_____

_____

_____

_____

_____

_____

How did you hear about Aurora Christian Schools?

_____

_____

Is it your desire to attend Aurora Christian Schools? YES / NO

If NO, please explain: _____

_____

_____

If you are a current 10, 11 or 12th grade student. Please explain why you desire to leave your current school and enroll at Aurora Christian.

_____

_____

_____

APPLICATION for ADMISSION
Student Questionnaire

Sports participation record for students entering grades 10, 11 & 12.
(List all high school sports which the student participated in a try-out, practice and/or contest and at which grade level.)

_____

_____

_____

Have you ever attended an Aurora Christian sports camp or House of Speed camp? If so, please indicate dates and camp.

_____

_____

_____

Have you ever been approached or encouraged by an Aurora Christian coach to attend Aurora Christian School?
If so, please give details below.

_____

_____

_____

Have you or do you now use tobacco products, drink alcoholic beverages, or use a controlled substance (drugs) of any kind? YES / NO

If yes, please explain:_____

_____

_____

STUDENT STANDARDS OF CONDUCT

Students of Aurora Christian School have a reputation of excellence to those in the community. Therefore, as a condition of enrollment, students agree to abide by all the standards set forth in the Parent/Student Handbook. A student's signature on this form binds them to these standards from the point of initial enrollment until graduation or official withdrawal. This includes all summer vacations, holidays, and school breaks.

ZERO-TOLERANCE POLICY

Use of alcohol will result in a minimum suspension of 10 school days (with no extra-curricular involvement) including mandatory completion of a restoration plan and issuance of a behavior contract upon return. Second offense will result in expulsion. Aurora Christian School will immediately expel a student for the following violations:

1. Any gang affiliations
2. Sale or distribution of alcohol on or off school grounds; possession, use, sale or distribution of drugs or any other substance that causes impairment on or off school grounds
3. Possession or use of explosives, firearms, or any other item used as a weapon at school
4. Any acts or threats which directly or indirectly jeopardize the health, safety, and welfare of school personnel or other students

SEARCH AND SEIZURE

The administration is authorized to conduct searches based upon reasonable suspicion that a student has violated the law or school policy. School authorities may also inspect and search places such as lockers, desks, personal belongings, vehicles, parking lots, and other school property and equipment without notice to or consent of the student. Furthermore, within reason, the administration or designated school authorities may search places such as vehicles, lodging/accommodations, and personal belongings of students participating in or attending school sponsored events (i.e. athletic trips, Senior retreat, ACSI festivals, Mission Impossible, etc.). Any evidence found during a search will be confiscated. Parental contact or consent is not warranted prior to interviewing or questioning of students by school authorities.

I hereby certify that the facts in this application are true and complete to the best of my knowledge. I have read, understand, and will abide by the above policies (Zero-Tolerance and Tobacco Products policies) as set forth by the Board of Directors of Aurora Christian School. I understand that my signature on this form binds me to these standards from the point of initial enrollment until graduation or official withdrawal. This includes summer vacations, holidays, and school breaks.

Print Student name _____ Student signature_____

Date_____

APPLICATION for ADMISSION

PARENT/GUARDIAN INFORMATION

first & last name

home address

city state ZIP

email

cell phone home phone

place of employment

title/position work phone

❏ I would like to receive school communication.
❏ I am financially responsible.

PARENT/GUARDIAN INFORMATION

first & last name

home address

city state ZIP

email

cell phone home phone

place of employment

title/position work phone

❏ I would like to receive school communication.
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❏ I would like to receive school communication.
❏ I am financially responsible.

If your child does not live with both parents, he/she lives with:

❏ natural mother only ❏ natural father only ❏ natural mother and stepfather ❏ natural father and stepmother

❏ guardian ❏ adoptive parents

Who has legal custody of the student? _____

(Written documentation may be required prior to enrollment.)

APPLICATION for ADMISSION

Parent/Guardian Questionnaire

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

_____

_____

_____

Has the applicant 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 the applicant ever been retained in any grade? YES / NO Grade:_____
If yes, please explain:

_____

_____

_____

Has the applicant ever been suspended, expelled or withdrawn from any 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 the applicant ever had difficulty with civil authorities? YES / NO

If yes, please explain: _____

_____

_____

Has the applicant 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: _____

_____

_____

What concerns, if any, do you have regarding your child's current progress (academic, self-esteem, physical health)?

_____

_____

_____

_____

How did you hear about Aurora Christian Schools?

- ❏ website
- ❏ radio
- ❏ online search
- ❏ church
- ❏ advertisements
- ❏ media/news outlet
- ❏ event at ACS
- ❏ other_____
- ❏ friends/family _____
  name of referring family

NONDISCRIMINATION POLICY

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, tuition assistance 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 disability, or whose personal life-style is not in harmony with the stated philosophy and purpose of Aurora Christian School.

PARENT STATEMENT OF COOPERATION

The following statement is printed on each enrollment application. Parents will be asked to affirm the statement with their signature on the application form. 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 manner consistent with biblical principles of discipline as set forth in Scripture. We also understand that all students, regardless of age, must live with a parent or legal guardian to maintain enrollment. We will continue to uphold the authority of the teachers and staff of Aurora Christian School by recognizing their right to use necessary disciplinary measures. We will acquaint ourselves with the grounds for dismissal in both academic and disciplinary circumstances outlined in the handbook, and we will cooperate fully in this regard. If we ever find that we cannot accept the disciplinary standards of ACS or if our student fails to meet the minimum academic requirements, we may withdraw our student or face possible dismissal. In the event of academic failure where no alternatives are available, or if, for disciplinary reasons, the school must expel our child, we will forfeit all fees and tuition monies paid. All tuition paid is nonrefundable, including the Tuition Deposit. We understand that the only exception to this policy is for a family who must move out of the school area. In that event alone, a prorated tuition refund will be made. We understand that we have entered into a contractual relationship with ACS for the payment of all tuition and related fees for the entire school year, and that we agree to abide by the tuition policies of ACS as stated above and in the Parent/Student Handbook

I have read and understand 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
2255 Sullivan Road Aurora, Illinois 60506
p. 630.892.1551 **f.** 630.892.1692
www.aurorachristian.org

CONFIDENTIAL CHARACTER REFERENCE FORM

6TH-12TH GRADE **(page 1 of 2)**

Please deliver this form to a pastor, counselor, teacher or other evaluator. The evaluator will mail these forms directly to the Admissions Office. By submitting this evaluation form and in consideration of having this evaluation and your application considered by Aurora Christian Schools, you hereby release said member, its employees and representatives, the evaluator and the evaluator's employer from any and all claims and liability that may arise from the providing, obtaining or using the form and the substance of the information provided by the evaluator. All information provided on the attached evaluation form will be held in the strictest confidence and will not be shared with students, parents or guardians. This evaluation form will remain confidential.

TO BE FILLED OUT BY APPLICANT

Applicant's Name _____
last (family) name first (given) name middle name jr.,etc.

Applying for Grade _____ Age level _____ ❏ male ❏ female

Applicant's current school_____

Address of current school _____

Telephone_____

Applicant's signature:_____ Date:_____

TO BE FILLED OUT BY EVALUATOR

Information will be kept confidential. Please be as thorough as possible.

Name: _____

Position: _____ School/Church/Organization: _____

Email: _____ Phone: _____

How long have you known the applicant? In what role?

_____

_____

What is the greatest strength of this applicant?

_____

_____

_____

What is this applicant's greatest weakness?

_____

_____

_____

What factors in the applicant's home life would help or hinder his/her success at Aurora Christian?

_____

_____

_____

CONFIDENTIAL CHARACTER REFERENCE FORM

6TH-12TH GRADE **(page 2 of 2)**

What is the applicant's attitude toward authority and rules?

_____

_____

_____

Do you have any additional information that would help us to meet the needs of this student?

_____

_____

_____

From what you know, would you recommend this student for Aurora Christian?

_____

_____

Please evaluate the applicant in the following categories, in relation to other students you have worked with

	EXCELLENT	GOOD	FAIR	POOR
Academic achievement	❑	❑	❑	❑
Academic potential	❑	❑	❑	❑
Creativity	❑	❑	❑	❑
Leadership ability	❑	❑	❑	❑
Personal integrity	❑	❑	❑	❑
Study habits	❑	❑	❑	❑
Initiative	❑	❑	❑	❑
Intellectual curiosity	❑	❑	❑	❑
Writing ability	❑	❑	❑	❑
Oral expression	❑	❑	❑	❑
Sense of humor	❑	❑	❑	❑
Emotional maturity	❑	❑	❑	❑
Conduct	❑	❑	❑	❑
Concern for others	❑	❑	❑	❑
Spiritual fervor	❑	❑	❑	❑
Relationship with peers	❑	❑	❑	❑
Relationship with adults	❑	❑	❑	❑

Additional Comments: (please feel free to attach additional materials if needed)

_____

Evaluator's Signature Date

Please submit evaluation form to:
Aurora Christian Schools Attn: Admissions Office
2255 Sullivan Road Aurora, Illinois 60506
p. 630.892.1551 **f.** 630.892.1692
www.aurorachristian.org

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CHRISTIAN SCHOOLS

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