



Bethany Christian High School

Application for Admission

Applying for Grade: 9 10 11 12

Beginning Semester: 1 2 Year: 20__ - __

Application Procedure

Please submit the following items:

- Application for Admission.** Answer all applicable questions and sign the commitments on page 4.
- A copy of student's most recent **achievement test results** (ISTEP+ or other).
- A copy of student's most recent **report card**.
- Tuition Payment Preference** form (blue).
- Two **Personal Reference for Admission** forms (salmon) to your chosen references.
- Permission for Treatment** form (white)—must be signed *in the presence* of a notary public.
- Immunization records** from previous school.
- A non-refundable **\$35 application fee**.
- A \$300 down-payment if applying after June 1.

Send the above items to: Director of Admissions, Bethany Christian Schools,
2904 South Main Street, Goshen, IN 46526-5499

You will be notified of your admission status after references have been received and the application has been processed. If you have any questions, call Sarah Yoder, director of admissions, at 574 534-2567.

Bethany Christian Schools admits qualified students of any race, color, and national or ethnic origin.

Student

Name: _____
Last First Middle

Home Address: _____
Street/Box

_____ *City State Postal Code*

Gender: M ___ F ___ Phone (include area code): _____

Birth Date: _____ Social Security No.: _____
Month/Day/Year

Attach
photo
here

Please circle the ethnic group you identify with (*used for state-required reports*):

- | | | |
|---------------------|----------------|------------------------|
| 1. Native American | 4. Hispanic | 7. Other (write below) |
| 2. African-American | 5. Caucasian | |
| 3. Asian | 6. Multiracial | |

School (to be completed by parent/guardian)

School Last Attended: _____ Phone: _____ Current School District: _____

Has your child received assistance for any special learning needs in the past? No ___ Yes ___

If yes, please describe briefly the nature of the assistance: _____

Parents/Guardians

Father: _____ BCHS Alumnus: 19___
Last First Middle

Address: _____ Email: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Job Title: _____ Employer: _____

Mother: _____ BCHS Alumna: 19___
Last First Maiden

Address: _____ Email: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Job Title: _____ Employer: _____

Marital status of parents: Married ___ Divorced ___ Widowed/Single ___

If parents are separated or divorced, please indicate with whom the student lives: _____

If the student lives with a guardian other than either parent, please complete the following:

Guardian: _____ BCHS Alumnus: 19___

Address: _____ Email: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Job Title: _____ Employer: _____

Family

Siblings: Name _____ Grade ____ Name _____ Grade ____
Name _____ Grade ____ Name _____ Grade ____

Maternal grandparents:

Name: _____ Phone: _____

Address: _____

Paternal grandparents:

Name: _____ Phone: _____

Address: _____

Christian and Church Life

Home congregation: _____ Denomination: _____

Address: _____
Street/Box City State Postal Code

Phone: _____

Pastor: _____ Youth Leader: _____

What do Christ and the Christian faith mean to you at this stage in your life?

Why do you wish to study at Bethany Christian High School?

What goals do you hope to reach as a Bethany student, and how do you plan to reach those goals?

