

CROSSROADS CHRISTIAN SCHOOLS
10062 WOLF ROAD GRASS VALLEY, CA 95949
(530) 268-2599
PRESCHOOL APPLICATION

1. In order for us to fairly consider this application, please be as thorough as possible. Incomplete applications will not be given serious consideration. Please write clearly.
2. Return completed application to the CCS preschool office.

Child's Name _____ Date _____

Address _____
Number and Street City State Zip

Home Phone No. _____ Cell #'s (F) _____ (M) _____

Birth Date _____ Male Female Age of child upon entrance _____

Marital Status of Parents: () Married () Divorced () Widowed () Single () Separated

Father's Name _____ Occupation _____

Employer _____ Work Phone No. _____

Father Driver license # _____ Mother Driver License # _____

Mother's Name _____ Occupation _____

Employer _____ Work Phone No. _____

- Has your child had a group experience before? Yes ___ No ___

If yes, where? _____

- Specify child's native language if other than English _____

- Is your child used to being separated from you? Yes ___ No ___

- Briefly describe the form of discipline used in your home for unacceptable behavior.

- Do you have other children currently attending CCS Elementary/Jr. High? Yes ___ No ___

- Name of Student in CCS _____ Entering grade _____

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How did you hear about our preschool? _____

- What interests you about our preschool? _____

- What do you see as your part in your child's education? _____

- Are you financially able to meet the monthly tuition requirements? Yes ___ No ___

- Please note days and times that your child will be attending preschool.

	Monday	Tuesday	Wednesday	Thursday	Friday
Arrive	_____	_____	_____	_____	_____
Depart	_____	_____	_____	_____	_____

CHURCH AFFILIATION:

- Do you attend Crossroads Church? Yes ___ No ___
- Which services do you attend? _____ How often? _____
- Do you participate in any ministries at Crossroads Church? _____ if so, how?

- Do you attend another church? _____ if so, what church? _____
- List a pastor or elder who could give you a reference (if possible).

Name _____ Phone _____

- If you attend a church other than Crossroads Church, please list the ways in which you participate in the ministry of your church. _____

- Please describe, briefly, your walk with the Lord at the present time.

I certify that the above information is complete and accurate. I understand that any information found to be inaccurate may be considered grounds for dismissal from this school.

Parent's Signature (signature required) _____