

HARVEST CHRISTIAN SCHOOL
TRIBE OF JUDAH

"Training Up Leaders to Impact Generations"



**STUDENT
 APPLICATION**



Harvest Christian School is...

"A Christ-Centered School" with emphasis on teaching, building, and strengthening skills in...

- | | | |
|----------|---------------|-----------------------|
| Love | Self-control | Discipline |
| Joy | Forgiveness | Faith |
| Peace | Longsuffering | Patience |
| Kindness | Gentleness | Excellence
& Order |

Harvest Christian School
 4300 N. Corrington Ave.-
 West Wing
 Kansas City, MO 64117
 Phone 816-455-2847
 Fax 816-455-8041
www.faihtacademykc.org

Campus Site:
 North Campus
 South Campus

Harvest Christian School is a ministry outreach of Harvest Church



We appreciate your interest in Harvest Christian School. We view ourselves as partners with you in providing a Christ-centered education which integrates faith and learning. To help us toward this end, we ask you to carefully and prayerfully complete this application. Please note that only one packet must be filled out for each family.

APPLICATION FOR ADMISSION

A non-refundable application fee of \$75.00 & a \$20.00 testing fee for all K5 - 6th grade students must accompany each application.

STUDENT INFORMATION

PARENTAL INFORMATION

Check one: New Student Returning Student

Student's Name: _____ Today's Date: _____

Applying for the 20____-20____ School Year SSI# _____ Current Grade: _____

Applying for (circle grade): Nur 2yr 3yr 4yr K5 1 2 3 4 5 6 7 8

Date of Birth: _____ Age: _____ Place of Birth: _____ Gender: M F

Religion: _____ Place of Worship: _____ Pastor: _____

Address: _____

City, State: _____ Zip: _____

Resides With: (check one) Mother/Father Mother Only Father Only
 Father/Stepmother Mother/Stepfather Guardian

Title: (check one) Mr. & Mrs. Mrs. Ms. Mr. Dr. & Mr./Mrs. Rev. & Mr./Mrs.

If separated or divorced, who has legal custody? _____

Ethnic Category: (check one) African-American Asian Caucasian Hispanic
 Native American Bi-racial

Mother's Information:

Father's Information:

Name: _____ Name: _____

Address: _____ Address: _____

City: _____ City: _____

State: _____ Zip: _____ State: _____ Zip: _____

Home Phone: (____) _____ Home Phone: (____) _____

Preferred place of contact: _____ Preferred place of contact: _____

Employment:

Employment:

Business Name: _____ Business Name: _____

Address: _____ Address: _____

City/State/Zip: _____ City/ State/ Zip: _____

Contact Information:

Contact Information:

Work Phone: () _____ Cell : _____ Work Phone: () _____ Cell : _____

Email: _____ Email: _____

OTHER INFORMATION (To be completed by parent. Please use additional paper if needed.)

Are you a Christian? Yes No If yes, please tell how and when you became one:

How would you describe your current relationship with the Lord?

Brothers/Sisters of this student:

Name: _____ Age: _____ Grade: _____ School Attending: _____

Name: _____ Age: _____ Grade: _____ School Attending: _____

Name: _____ Age: _____ Grade: _____ School Attending: _____

Name: _____ Age: _____ Grade: _____ School Attending: _____

Name: _____ Age: _____ Grade: _____ School Attending: _____

PARENT'S AFFIRMATION OF AGREEMENT

By signing below, we the parents or guardians of this student affirm that we have given completely truthful information herein; that we have received, read, understand, and will abide by the policies and agreements in the

Statement of Doctrinal Beliefs and the Parents'/Guardians' Statement of Support.

Parent's Signature: _____ Date: _____

PLEASE NOTE: This application does not insure enrollment. The Admissions Committee evaluates each applicant and decisions are based on the ability of Harvest Christian School to meet the needs of each student.

Knowledge of Entrance Fee Agreement:

I understand that there will be no refund for the application fee. Enclosed is my fee of \$75.00. I also understand that a testing fee of \$20.00 is needed for all students entering 1st through 8th.

Parent's Signature(s): _____

TUITION ASSISTANCE:

A Tuition Assistance Program is available to prospective recipients K5-8th grade who are in the middle and low income status. All applicants must complete the required Scholarship Application, and submit the required non-refundable Registration Fee. Please note that previous awards **do not** imply nor guarantee awards for the current year. Scholarship Applications may be obtained by calling the Administration Office at (816) 455-2847. The application deadline for prospective recipients is **July 1** for those desiring to receive assistance for the up-coming school year.

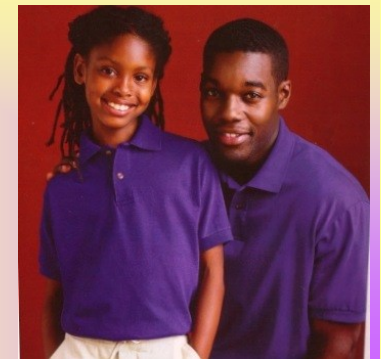


From the Desk of
Dr. Donna L. Houpe
Administrator

Thank you for enrolling your child at Harvest Christian School. We are now in covenant with you and your family to ensure that your child's educational journey be one that will bring complete fulfillment of their purpose for life. A covenant is a binding agreement between two parties. It signifies a solemn oath and sincere pledge of mutual respect and cooperation. Harvest Christian School covenants to provide the best it can for your children in the way of facilities, curriculum, faculty, athletics, social functions, and instruction. We further pledge to do all that is possible to support your home in growing every student in the nurture and admonition of the Lord, through Christ Jesus AMEN.

Dr. Donna L. Houpe, B.A.E, M.Ed. Ph. D

Serving students from Preschool to Middle School



Mission Statement:

The mission of Harvest Christian School is to deliver a superior quality of Christian education that supports the development of the child's total need; that is: academic, spiritual, physical, emotional,



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PLEASE ADDRESS CORRESPONDENCE TO

Director of Admissions
Harvest Christian School
4300 N. Corrington Ave.-West Wing
Kansas City, Missouri 64117
(816) 455-2847 Office
(816) 455-8041 Fax

FOR OFFICE USE ONLY

Date Registration Packet Received _____

Date Application Fee Received _____

Date Child Enrolled _____

Date Child Withdrew _____

Entry Date _____

Accepted () Yes () No

Comments _____

Staff Signature _____