



# Application for Admission to Michigan Conference Seventh-day Adventist Church Schools

*Please fill out a separate application for each child applying for admission.*



Student's full legal name: (Last - First - Middle) \_\_\_\_\_ Grade Entering \_\_\_\_\_ Gender \_\_\_\_\_ Student's Social Security # \_\_\_\_\_

Place of birth: Country \_\_\_\_\_ Date of Birth: Mo./Day/Yr. \_\_\_\_\_ Age \_\_\_\_\_ Baptized Yes \_\_\_\_\_ No \_\_\_\_\_ If Yes, Date Baptized in SDA Church \_\_\_\_\_

Father (Full Legal Name)		Mother (Full Legal Name)	
Home Street Address, City, State, Zip		Home Street Address, City, State, Zip	
County	E-mail Address	County	E-mail Address
Home Phone	Work	Home Phone	Work
Cell	Occupation	Cell	Occupation
SDA Church Member? Yes / No Where?		SDA Church Member? Yes / No Where?	

\_\_\_\_\_ Do you owe a bill at a previous school? Yes \_\_\_\_\_ No \_\_\_\_\_  
Initial \_\_\_\_\_

If yes, the following information is needed.  
Name of School \_\_\_\_\_

\_\_\_\_\_ I agree to see that this student's tuition and fees are cared for monthly.  
Initial \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_ I have read the school handbook and agree to support each regulation of the school.  
Initial \_\_\_\_\_

Phone \_\_\_\_\_

\_\_\_\_\_ I agree to cooperate with the school board and teachers by avoiding criticism of any teacher or school policy in the presence of students.  
Initial \_\_\_\_\_

\_\_\_\_\_ Name of Parent or Legal Guardian (Printed) \_\_\_\_\_ Signature of Parent or Legal Guardian \_\_\_\_\_ Date \_\_\_\_\_



# Michigan Conference Student Behavior Contract

*I* consider it a privilege to attend a Christian school and understand that I will be expected to be obedient and treat others with kindness and respect.

*I* agree to follow all of the school rules as listed in the school handbook and as announced by school personnel.

*I* understand that disobeying or treating others with unkindness or disrespect cannot be tolerated at this school.

*I* understand that if I choose to not follow the school rules, discipline may result and my parents may be notified. Discipline may include suspension or dismissal.

\_\_\_\_\_  
Student

\_\_\_\_\_  
Date

***We agree to support each other and work together.***

\_\_\_\_\_  
Parent or Legal Guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Teacher

\_\_\_\_\_  
Date

