



International Student Admissions Application



VINEYARD CHRISTIAN SCHOOL
5340 E LA PALMA AVE
ANAHEIM, CA 92807
714-777-5462
WWW.VINEYARDSCHOOL.COM



**2011-2012 SCHOOL YEAR
INTERNATIONAL STUDENT APPLICATION**



STUDENT INFORMATION

Name _____ Entering Grade _____
Last First Middle

Male ___ Female ___ Birthplace _____ Date of Birth _____ Age _____

Home Country Address _____

City _____ Province or State _____ Postal Code _____

Country _____ Country of Citizenship _____

Student Resides with: Both Parents ___ Mom ___ Dad ___ Other (please explain) _____

PARENT INFORMATION

Mother's Name _____
Last First

Father's Name _____
Last First

Address _____

Address _____

City, State, Zip _____

City, State, Zip _____

Language Fluent in _____

Language Fluent in _____

Work/Cell Phone _____

Work/Cell Phone _____

E-mail Address _____

E-mail Address _____

Marital Status of Parents: Single: ___ Married: ___ Divorced: ___ Widowed: ___ Separated: ___

I hereby give my permission for my child to have their picture taken for use in the media and/or website for the purpose of positive public relations within the community.

Yes ___ No ___ Parent Signature _____ Date _____

GUARDIAN INFORMATION (for U.S. Guardian)

Mother's Name _____
Last First

Father's Name _____
Last First

Address _____

Address _____

City, State, Zip _____

City, State, Zip _____

Home Phone _____

Home Phone _____

Work/Cell Phone _____

Work/Cell Phone _____

E-mail Address _____

E-mail Address _____

I would like my information (address/home phone/email) to be included in the School Directory ___ Yes ___ No

FAMILY INFORMATION

What Church do you attend? _____ How Long? _____

City _____ Pastor _____ Do you regularly attend? Yes ___ No ___

How did you hear about VCS?

Friend/Relative Advertisement Website Church Other _____

Were you referred by a current VCS family? If so, who? _____

Have you ever applied to VCS? _____ If so, when? _____

STUDENT INFORMATION

Please list previous schools attended:

Name of School	City & State	Gr	Years Attended
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____

Is English your first language? ___ Yes ___ No If no, what is your native language? _____

In what language are you being taught math, science and history courses this year? _____

A TOEFL score is required to attend VCS. On what date did you take, or when do you plan to take the TOEFL? _____

Has your student skipped any grades? ___ If yes, which grade and why: _____

Has your student been retained? ___ If yes, which grade and why? _____

Has your student been suspended or expelled? ___ If yes, please explain _____

Has your student been tested for or enrolled in a program for Speech, Language, Physical, Emotional or Learning Disabilities?

Yes ___ If yes, please explain _____

Has your student been diagnosed with a medical condition? ___ If yes, please briefly explain _____

What school subject do you like the best?

What is your strength as a student? What do you feel is a weakness or area of improvement? _____

How do you spend your free time? _____

Given the choice, put in order 1-5 (1 being the highest) what classes you would prefer to take.

___ Art ___ Drama ___ Newspaper/Yearbook ___ Spanish ___ Worship Band (playing instrument and/or singing)

FINANCIAL INFORMATION

Please list person financially responsible if different than parent listed above.

Name _____ Phone _____

Address _____ City, State, Zip _____

Alternate Phone _____ E-mail Address _____

I agree to pay the required tuition according to the current tuition rate schedule. It is understood that this is an application and my child's classroom placement will not be guaranteed until the admissions process and all financial arrangements are complete. In the event I withdraw my child, I understand that I am required to give a two week written notice and there will be no refund of any portion of the Registration and International Processing Fee and I will be charged a \$50 per student withdrawal fee. If we withdraw after July 1, 2011 until September 30, 2011, we will be required to pay for two months of tuition. After October 1, 2011, we will be required to pay tuition to the nearest concluding month.

Parent Signature: _____ Date: _____

I, the parent/guardian of _____ do hereby state that the information contained in this application is true and accurate to the best of my knowledge. I have disclosed any relevant information relating to my child's background, educational issues, physical or mental health issues, behavioral or learning issues which in any way may affect my child's ability to perform at Vineyard Christian School or may affect his/her acceptance at VCS.

Parent/Guardian Signature _____ Date _____

OFFICE USE ONLY

Application received by _____

Date Received _____

Registration Fee paid

Birth Certificate

Immunizations

Copy of Passport

Copy of Visa

Report Cards

TOEFL Scores Received

Administrative Recommendation Received

Admissions Interview Scheduled

DVD received (if interview not possible)

Accepted by _____ Date _____

Acceptance Letter Mail Date _____

Enrollment Forms Received

Finances Completed