

Circle **Live Oak** or **Lake City**



NEW GENERATION CHRISTIAN SCHOOL

608 SW Marvin Burnett Road
Lake City, FL 32025
(386) 758-4710

New Generation Christian School

1528 Canyon Ave. NE
Live Oak, FL 32064
(386) 219-0041

Application for Admissions

Date _____ ***Application Fee: \$75.00 (CIRCLE: Included/Not Included)**

**Please note that your child's application will be reviewed upon receipt of application fee.*

Student Information

Name (as on birth certificate) _____

Prefers to be called: _____

DOB _____

Address: _____

SSN: _____

Gender: _____

School your child is currently attending: _____

Reason for leaving current school:

My child is *currently* enrolled in grade: _____

My child was retained ('held back') in grade(s): _____

Guardian Information

With whom does your child currently live? _____

Responsible Parent Name: _____ Social Security # _____

Guardian/ Parent 1

Guardian/Parent 2

Name: _____

Name: _____

Home # _____

Home # _____

Cell # _____

Cell# _____

Work # _____

Work# _____

E-Mail: _____

Email: _____

Address: _____

Address: _____

City/State/Zip: _____

City/State/Zip: _____

Emergency Contact Information

Name: _____ Relationship: _____

Home Phone: _____ Cell: _____

Background Information

My child and I were referred to New Gen by: _____

List **all schools** your child has attended: _____

Is your child being served as an ESE student: Yes _____ No _____

My child has an IEP: Yes _____ No _____

My child has a 504: Yes _____ No _____

If "Yes," what is your child's learning exceptionality: _____

Have you applied for a scholarship (ex: Mckay, Step Up For Student, Gardiner)_____

Name of staff at your child's school that could best describe child's strengths/weakness:

Why do you think New Generation might be the right choice for your child?

From what physician does your child receive medical attention?

Is your child taking any medications? If so list type of medication *and* for what diagnosis:

In the past, or currently, has the child been given any mental health diagnosis? If yes, please explain:

Describe the classroom setting in which your child currently is (# of students, etc.):

What are your child's interests?

What does your child do for fun?

Describe your child's strengths & weaknesses:

What chores, if any, does your child do around the house?

Disciplinary Record

Has your child ever been suspended from **any** school: Yes: _____ No : _____
If "yes," please explain:

Has your child ever been expelled or placed in an alternative school: Yes: _____ No: _____
If "yes," please explain:

Has your child ever been convicted of a crime?
If so, please explain:

Has your child or any other family member used illegal drugs? Yes: _____ No: _____
If "yes," please explain:

This school believes whenever there is a problem with one of the family members it affects the other family members; as such, this school offers services that encompass the whole family. As a result of this you may be asked to participate in family counseling, parenting classes, complete family questionnaires, in order to ensure that the student, as well as the family, is receiving the services that are most beneficial. Are you willing to participate in school sponsored activities:

YES _____ NO _____



608 SW Marvin Burnett Rd
Lake City, FL 32025
Phone (386)758-4710
Fax (386)758-5597

Guidance:

Your currently/previously enrolled student _____ is seeking enrollment into New Generation Christian School. As part of the enrollment process we ask that the parents supply us with records from the student's prior school to determine if the student is appropriate for our school setting. Therefore, we are requesting that you, as the prior school, forward us the following information: **current or most recent report card, transcripts, results of recent statewide testing, any testing in relationship to ESE status as well as I.E.P.'s and ALL DISCIPLINARY (if no discipline-please note) and attendance records.** You do not need to send the cumulative folder and copies are acceptable.

Please send or fax all pertinent information to:

New Generation School
608 SW Marvin Burnett Rd
Lake City, FL 32025
Phone (386) 758-4710
Fax (386) 758-5597

The parent's signature authorizing the release of records is noted below.

I _____ the parent (legal guardian) of _____, hereby request that you forward the above noted documentation, for the purpose of possible admissions, regarding my child, to the representatives of New Generation School.

Signature of Parent or Legal Guardian

Sincerely,
Paula Gorman
Director of Education