

**MASON COUNTY CHRISTIAN SCHOOL**

470 E Eagle Ridge Drive

Shelton, Washington 98584

TEL: (360) 426-7616 FAX: (360) 426-6582

Mr. David Roller

Administrator

**STUDENT APPLICATION**

(Written in his/her own handwriting, this form is to be completed by the student wishing to attend Mason County Christian School.)

Full Name: \_\_\_\_\_ Applying For Grade \_\_\_\_\_

1. Do you want to attend MCCS? \_\_\_\_\_ Why? (or Why not?) \_\_\_\_\_

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2. Are you a Christian? \_\_\_\_\_ If so, please explain what you think being a Christian means. \_\_\_\_\_

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3. Explain how being a Christian affects your daily life. \_\_\_\_\_

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4. Which church do you attend? \_\_\_\_\_

How often do you attend? \_\_\_\_\_

5. What are some of your interests? (Favorite sport, hobbies, recreation, etc.)

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6. In what school, community or church activities do you participate? \_\_\_\_\_

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7. Please comment on the TV programs, videos and music you enjoy. \_\_\_\_\_

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8. Have you ever had difficulty getting along with teachers, or fellow students? \_\_\_\_\_

If yes, please explain: \_\_\_\_\_

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9. Are you familiar with the M CCS school rules and the dress code? \_\_\_\_\_

Are there any rules you wish could be changed? \_\_\_\_\_ Explain \_\_\_\_\_

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10. Are you willing to abide by the rules as they are? \_\_\_\_\_

11. In your opinion, what would be a good response if a student were upset by something the teacher did or said in school? \_\_\_\_\_

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Additional Comments: \_\_\_\_\_

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