

Grades 5-12 APPLICANT QUESTIONNAIRE

This form is to be completed by the student in his or her own handwriting with blue or black ink.

Applicant's Name - Last	First	Middle	Cur	Current Grade	
Address	c	ïity	State	Zip	

Using paragraph form of three or more complete sentences, please complete each of the following:

- 1. My favorite class in school is ______ because...
- 2. My greatest academic challenge is...
- 3. My friends might describe me as...
- 4. My teachers might describe me as...
- 5. Why do you want to attend Charlotte Christian School?

Please list programs in which you participate.

- Athletic programs, level of involvement and achievements:
- Spiritual and/or church related activities, level of involvement:
- Community/volunteer activities, level of involvement and achievements:
- Describe your relationship with Jesus Christ.

- Charlotte Christian School has a commitment to help its students grow academically, spiritually and experientially, and to establish policies which will assist students in lifestyle choices. If accepted as a member of the Charlotte Christian community, I understand I need to abide by these policies and honor Christ at all times.
- I understand that my academic progress and citizenship will be reviewed at the end of each semester.
- I have completed this questionnaire in my own words and handwriting.

Applicant's Name

Date

This form may be emailed to admissions@charchrist.com or mailed directly to: Charlotte Christian School • Admissions Office 7301 Sardis Road • Charlotte, North Carolina 28270