



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 Full Name - Last

First

Middle

Applying for Grade

Address

City

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 e-mailed to admissions@charchrist.com, faxed to (704) 366-5678 or mailed directly to:

Charlotte Christian School • Admissions Office
7301 Sardis Road • Charlotte, North Carolina 28270