

UPTON LAKE CHRISTIAN SCHOOL
PO Box 63
Clinton Corners, NY 12514
Phone 845-266-34897
ulcs@uptonlake.com



APPLICATION FOR ADMISSION

STUDENT INFORMATION

Name _____ Sex _____ Date of Birth _____

Address _____ School District _____

City _____ State _____ Zip Code _____ Grade to enter _____

Name/Address of last school attended _____

Student's Cell # (Grades 7-12 only) _____ Student's Email _____

FAMILY INFORMATION

Fathers Name _____ Email _____

Employer _____ Work # _____

Position _____ Home Phone _____

Cell Phone _____ Marital Status _____

Mother's Name _____ Email _____

Employer _____ Work # _____

Position _____ Home Phone _____

Cell Phone _____ Marital Status _____

List the names and grades of your children who are not applying. Please Explain.

WORSHIP INFORMATION

What church are you currently attending? _____

Pastor's Name _____

Pastor's Phone _____ Email _____

Are you a member? Father _____ Mother _____ Applicant _____

Are you a born-again believer? Father _____ Mother _____ Applicant _____

Has either parent or guardian been convicted of any act against a minor at any time?

Yes _____ No _____ If yes, please explain _____

MEDICAL INFORMATION

Family Physician _____ Phone # _____

Address/City/Zip _____

Does the applicant have any physical disabilities, allergies, asthma? Inhaler or epi-pens?

If yes, please explain. _____

Have there been more than 15 absences from school this year? _____ If yes, what was the primary reason? _____

LEARNING NEEDS

Has the applicant ever been required to repeat a grade? _____ If so, please explain.

Has the applicant received learning assessment testing or evaluation (IEP OR 504)?

Has this ever been recommended by a teacher or school staff? _____

Do you think your student has any special learning needs? _____

BEHAVIORAL INFORMATION

Has the applicant ever been suspended or expelled from school, or refused admission to another school? _____ If yes, please explain. _____

Has the applicant had disciplinary difficulties in school? _____

Has the applicant ever been convicted of a crime? _____ If yes, please explain. _____

(Grades 7-12 Only)

Has the applicant ever used tobacco? _____ Alcohol? _____ Illegal drugs? _____

GENERAL INFORMATION

How did you hear about Upton Lake Christian School? _____

Why do you want a Christian education for your child? _____

Why are you applying to ULCS and not another Christian School? _____

Do you know a family that currently sends their children to ULCS? _____

I testify that the preceding information is true and accurate. I acknowledge that lack of information, misleading answers or falsification of information used in school admissions is subject to consequences of suspension and possible expulsion from ULCS. Both parents or guardians must sign below. Thank you, we look forward to the opportunity to serve you.

Parent Signature _____ Date _____

Parent Signature _____ Date _____

Upton Lake Christian School purpose is to serve students of Christian families, or parents desiring a Christian education for their offspring, or students desiring a Christian education, but does not discriminate on the basis of race, ethnic origin, or nationality.

Please submit this application with the non-refundable \$60 application fee.

TO BE COMPLETED BY THE STUDENT – Grades 3 - 12

What do you enjoy doing in your spare time? _____

How much television do you watch? _____

What shows do you watch? _____

What type of pleasure reading do you do? _____

Who is your favorite singer or group? _____

In what school activities have you participated? _____

How do you think a Christian school would be different from the school you are now attending?

What is meant by the term “born-again” Christian? _____

Do you want to attend Upton Lake Christian School?

Why? _____

Student signature _____ Date _____

Thanks for your honesty and insights!