Followers of Jesus School

STUDENT APPLICATION FOR ADMISSION 2023-2024

Name (Last, First, Middle):			M	ale Fema	lle
Date of Birth (mm/dd/yy):	Place of Bir	rth:			
Current Grade (if in school) or Grade most recently completed:					
Have you ever repeated a grade?	No Yes (wh	nich one?)			
Have you ever been in Special Ed	1? No Yes (wh	nich grades?)			
Have you ever been suspended?	No Yes (wh	ny?)			
Have you ever been expelled?	No Yes (wh	ny?)			
Do you attend church?	No Yes (wh	nere?)			
Medical history (any special need medication):	ls/				
If you are transferring from anoth school, what is your reason for	ner 				
leaving the school? (NOTE: An					
Information Release is required.)					
Why do you want to attend FJS?					
revious schools:					
Name:	Address:	City:	Zip:	Grades:	Years:
				I	1

Parent: Please complete the pick-up authorization on the back of the "Parent Statement of Understanding."