

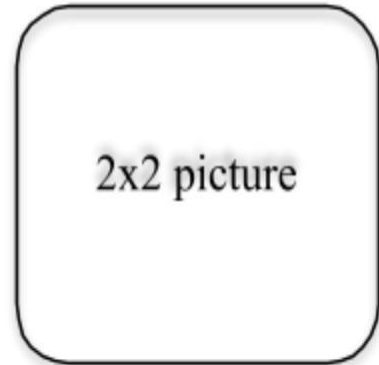


LEADERS INTERNATIONAL

CHRISTIAN SCHOOL OF MANILA

Application No:

Student's Application Form
SCHOOL YEAR 2024-2025



Student Name	
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Last Name	Middle Name	First Name
Date of Birth:	Current Age:	Gender:

(This portion to be filled-out by the Examiner)

Date Applied:	Application No:	Fee Receipt No:

Date and Time of Assessment:	
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***Assesses individuals are NOT automatically accepted for enrollment. Acceptance shall be based on test results. Children with special needs requirements beyond the school's teaching capability shall not be accepted.**

(This portion to be filled-out by the Examiner)

Test Result:	
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English Language:	
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Mathematics:	
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Remarks:

Assessment (Passed/Failed):	Examiner's Signature:

(This portion to be filled-out by the Guidance Counselor/Vice Principal)

INTERVIEW

Interview Date:	
Time of Interview:	

Student Applicant

Remarks:

Parent/Guardian of Applicant

Remarks:

Final Recommendation:

Supervisor Signature:	
Date:	

STUDENTS INFORMATION

Student Name	
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Last Name	Middle Name	First Name
Date of Birth:	Current Age:	Sex:

Place of Birth:	Citizenship:

Complete Address:	
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Telephone No:	Mobile No.	Email Address:

Previous Schools Attended	School Address	Grade Level	School Year

A. PARENT'S/GUARDIAN'S INFORMATION

FATHER/GUARDIAN	MOTHER/GUARDIAN
Full Name:	Full Name:
Occupation:	Occupation:
Company:	Company:
Business Address:	Business Address:
Mobile Number:	Mobile Number:
Email Address:	Email Address:
Educational Attainment:	Educational Attainment:
Schools Attended:	Schools Attended:

Civil Status: Married/Widow/er	
Living Together: Yes/No	
Single Parent: Separate/Divorce	

B. SIBLING'S INFORMATION

Number of Siblings: _____

Name:	Grade:	Age:	School:

C. PERSON TO CONTACT FOR EMERGENCIES

Name:	Relation to Child:	Contact No:

A.PARENTS'/GUARDIANS' SPECIMEN SIGNATURE FOR VERIFICATION PURPOSES

Father's Signature:	Mother's Signature:	Guardian's Signature:

STUDENT'S BEHAVIORAL CHARACTERISTICS

Student Name	
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Last Name	Middle Name	First Name

1. What is your child's birth order (youngest, middle, eldest)?
2. What are your child's study habits at home?
3. Does your child need a tutor (If yes, please state the subjects)?
4. What are your child's strengths and weaknesses?

Strengths	Weaknesses

5. Does your child have any disciplinary records within the past two school years (If yes, please state why)?
6. Why do you wish to transfer school?
7. What forms of discipline do you impose on your child (state to whom is the main disciplinarian)?

8. Has your child ever been diagnosed with special needs? (If yes, please state why and provide the name of the doctor/assessor and contact the contact number. Kindly furnish a photocopy of the evaluation).

I hereby affirm that all information supplied herein is complete and accurate. I am aware that any information furnished in this application may be checked against original documents and that withholding or giving false information will disqualify my child from admission/will be a basis for dismissal if admitted.

Parent's signature over printed name

Date signed

STUDENT'S SPIRITUAL INFORMATION

A. RELIGIOUS BACKGROUND AND PRACTICES

Often	Occasional	Never
1	2	3

***Please answer the questions with the associated corresponding numbers, if not applicable leave blank.**

1. Does your child attend Sunday school? ____

If yes, where?	
How long?	

2. Has your child accepted Jesus Christ as his/her personal Lord and Saviour? ____

If yes, when?	
How?	

3. Do you have family devotions? ____

4. Does your child read the Bible at home? ____

5. Does your child ask you questions relating to the Bible? ____

If yes, what sorts of questions?	
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B. PARENTS'/GUARDIANS' RELIGIOUS BACKGROUND AND PRACTICES

Often	Occasional	Never
1	2	3

***Please answer the questions with the associated corresponding numbers, if not applicable leave blank.**

FATHER/GUARDIAN	MOTHER/GUARDIAN
Religion:	Religion:
Church Attended:	Church Attended:

1. How often does the father attend church? ____

2. How often does the mother attend church? ____

***Check all that apply**

Answer of the Father:

___How do you think a person can go to heaven?

___By doing good

___By giving to charity/needly people

___By reading the Bible/attending Bible studies

___By attending church or mass regularly

___By God's grace through faith in Jesus Christ

___Others, please specify_____

Answer of the Mother:

___How do you think a person can go to heaven?

___By doing good

___By giving to charity/needly people

___By reading the Bible/attending Bible studies

By attending church or mass regularly

By God's grace through faith in Jesus Christ

Others, please specify _____

3. Do you know for sure if you would die today you would go to Heaven?

Answer of the Father:

Answer of the Mother:

Yes, I am sure.

Yes, I am sure.

No, I am not sure.

No, I am not sure.

4. Who do you think Jesus is?

Answer of the Father:

Answer of the Mother:

A very popular Jew

A very popular Jew

The Son of God

The Son of God

An infinite God-man

An infinite God-man

The Messiah, savior of the world

The Messiah, savior of the world

Others, please specify _____

Others, please specify _____

5. Would you like to know more about heaven and Jesus Christ by attending Bible study?

Answer of the Father:

Answer of the Mother:

Yes

Yes

No

No

Not yet, maybe some other time

Not yet, maybe some other time

6. Why did you choose Leaders International Christian School of Manila for your child?

Parent's signature

Date

