



BIG HEART CHRISTIAN SCHOOL

#30-2, Bojeong-dong, Giheung-gu, Yongin-si, Gyeonggi do (Seoul 446-913 Korea)

Office: +82-31-263-3033 Fax: +82-31-263-3039 www.bhcs.co.kr

APPLICATION FOR ADMISSION

STUDENT AND FAMILY PERSONAL DATA

Student's Name: _____
 (Last/Family) (First) (Middle)

Nationality: _____ Sex (Circle One): ☐ Male ☐ Female

Date of Birth: ____ / ____ / ____ Entering Grade: ____
 (Month) (Day) (Year)

Place of Birth: _____ , _____
 (City) (State/Country)

Home Phone: _____ Business Phone: _____ Fax Phone: _____

Emergency Phone: _____ E-mail: _____

School (and location) where child is currently enrolled: _____

Primary language spoken by the child: _____

Primary language spoken in the home: _____

Other languages spoken by the child: _____

Will the student live locally: ☐ Yes ☐ No

Does the student have a sibling(s) interested in enrolling at BHCS? ☐ Yes ☐ No

(If yes) Name: _____ Age: _____ ; Name: _____ Age: _____

Full Mailing Address: _____
 _____ (Street)
 _____ (City)
 _____ (Country and Postal Code)

Father's Name: _____

Highest Grade/Degree of Education Completed: _____

Father's Occupation/Position: _____ Name of Company: _____

Mailing Address of Company: _____

Mother's Name: _____

Highest Grade/Degree of Education Completed: _____

Mother's Occupation/Position: _____ Name of Company: _____

Mailing Address of Company: _____

Billing Information

Payment of tuition/fees to be made by: (Check One)

☐ Parent/Guardian ☐ Father's Company ☐ Mother's Company ☐ % by Parents and % by Company

Bills should be sent to: (Check One) ☐ Residence address ☐ Business address:

Dormitory service desired? (Check One) ☐ Yes ☐ No

Attach
Recent Photo

The information below will help us meet the educational needs of your child. Please check the appropriate blanks and include any additional helpful information on a separate sheet of paper.

Has the student had any disciplinary action at a former school? ☐ Yes ☐ No

(If yes, please give details on a separate sheet of paper.)

Has the student ever repeated a grade? ☐ Yes ☐ No *(If yes, which grade: _____)*

Does the student have a history of medical problems? ☐ Yes ☐ No

(If yes, please explain and attach physician's report.)

Does the student have a history of learning problems? ☐ Yes ☐ No

(If yes, please explain and attach any reports.)

Has the student ever had an individual plan (IEP) or received special education services? ☐ Yes ☐ No

(If yes, please explain and attach any reports.)

Does the student have a history of any mental or emotional disturbance? ☐ Yes ☐ No

(If yes, please explain and attach any reports.)

Does either parent have a special skill or interest (i.e. sports, clubs, cultural interest, etc.) that they might like to share with the school, if called upon? Father _____ Mother _____

How did you hear about Big Heart Christian School?

☐ Church ☐ Friends ☐ Advertisement ☐ Word of mouth ☐ Mission ☐ Internet

Has the student ever participated in: ☐ an accelerated program? ☐ gifted program? ☐ National Honor Society?

☐ advanced placement course? ☐ other specialized program?

Additional description: _____

Has the student received any special academic, social, or emotional support (i.e. speech therapy, learning difficulties, counseling, etc.) or had diagnostic testing? ☐ Yes ☐ No

(If any, what type of support has the student received? Please attach relevant reports/test results _____)

Has the student had any alcohol or drug problems? ☐ Yes ☐ No

Has the student ever been suspended from school? ☐ Yes ☐ No

Has the student ever been asked to leave a school? ☐ Yes ☐ No

(If yes to any of the above 3 questions, please attach a note of explanation/description.)

In making this application, the undersigned certifies their understanding that:

1. Before considering an application, BHCS must receive all of following;

- 1) Completed BHCS Application for Admission (in English).
- 2) Academic records from present school.
- 3) Completed BHCS Health History Form.
- 4) Pastor and/or Teacher BHCS Recommendation Form (school preference is both forms)
- 5) The parents' signed agreement with the school's educational (philosophy and purposes).
- 6) BHCS Admission Test Results
- 7) Personal interview with the child, parents, and School Administration

2. Fees and tuition are payable in advance.

3. Inaccurate, incomplete, or misleading information may be grounds for denial of admission, or dismissal *(if the child is already enrolled).*

To the Best of my knowledge, the information I have provided in this application is correct.

(Signature of Parent)

Date of Application: _____
(Month / Day / Year)

(Signature of Parent)

Date of Application: _____
(Month / Day / Year)

BHCS STATEMENT OF FAITH

- 1) The inerrancy of the Holy Scriptures as originally given, their plenary inspiration by God and their supreme authority as the only rule of faith and practice.
- 2) The Trinity of the Godhead-Father, Son, and Holy Spirit, who are the same in substance, equal in power and glory.
- 3) The essential, absolute and eternal deity of the Lord Jesus Christ, His real but sinless humanity, His substitutionary and atoning death as the all-sufficient sacrifice for sin, His resurrection from the dead on the third day in that very body that was laid in the tomb, His ascension into heaven as the only mediator between God and man, and His visible personal return in power and glory.
- 4) The personality and deity of the Holy Spirit by whom the believer is regenerated and sanctified through the Word of Truth.
- 5) The lost estate of man through the Fall and his salvation solely by grace through faith in Jesus Christ, whose righteousness imputed to him is the only ground of acceptance before God.
- 6) The resurrection of the body, the judgment of the world by our Lord Jesus Christ, the everlasting blessedness of the saved and the everlasting and conscious punishment of the lost.

Please indicate your agreement or non-agreement with the above statement by circling one option in front of your signature

1. Agree = I personally agree with the above Statement.
2. Don't agree = While I do not personally agree with the above Statement, I agree that our child shall be taught in accordance with the purpose of the school as outlined. I will not interfere in any way with the school's Christian

Agree / Don't agree _____ ***Date.*** _____
Father/guardian signature *Month/ Day/ Year*

Agree / Don't agree _____ ***Date.*** _____
mother/guardian signature *Month/ Day/ Year*

(If you have questions or concerns about the Doctrinal Statement and Purpose, please note them below)

WAIVER OF LIABILITY

I give my permission for _____ (Student's Full Name) to participate in official Big Heart Christian School (BHCS) activities while enrolled at BHCS. Realizing that BHCS does not have personal accident insurance for students, **I waive or will not hold BHCS liable** if my child is injured at school, at a school sponsored activity or while being transported to and from the following.

- (a) BHCS campus by public transportation.
- (b) Athletic or co-curricular event(s) by BHCS-related or BHCS-contracted vehicle.
- (c) Bus or train terminals by BHCS-related or BHCS-contracted vehicle.

In the event of an emergency medical situation where I am not able to be immediately contacted I give my permission to have my child treated (possibly including local or general anesthesia) at the best facility determined by the attending BHCS school sponsor

Every effort will be made to contact parents before any procedures are carried out..

_____ ***Date.*** _____
Father/guardian signature *Month/ Day/ Year*

_____ ***Date.*** _____
mother/guardian signature *Month/ Day/ Year*

BHCS TRANSPORTATION CONDUCT and LIABILITY

BHCS students use public and private transportation to and from school. For reasons of safety, courtesy, and the school's good reputation, students must display good conduct while traveling to and from school. BHCS is not liable for injuries or loss of property that may result from a traffic accident or related damage. BHCS does expect our students to follow the school's rules as referenced in the Parent-Student Handbook governing student conduct on all BHCS buses.

All documents that were submitted during the admission process and test will not returned.

Parents and the student must sign this form acknowledging that they understand and will abide by the Public Transportation Conduct and Liability statement.

Signature of Student

Date. _____
Month/ Day/ Year

Signature of Parent

Date. _____
Month/ Day/ Year

Signature of Parent

Date. _____
Month/ Day/ Year