

## APPLICATION FOR ADMISSION RUTH MURDOCH ELEMENTARY SCHOOL

| Student Name:      |                    |                          |                               |                                   |
|--------------------|--------------------|--------------------------|-------------------------------|-----------------------------------|
|                    | First              |                          | Middle                        | Last                              |
| Gender:            | Grade:             | Street Address/          | PO Box:                       |                                   |
| City:              | State:             | ZIP: Co                  | ounty:                        | Township:                         |
| School District: _ |                    | Birthdate: _             | Baptized SDA:                 | : Date of Baptism:                |
| Church Member      | rship:             |                          | Birthplace:                   |                                   |
| Citizenship:       | Eth                | nicity:                  |                               |                                   |
| Has the student    | ever had an IEP? H | as student ever been rec | commended for special edu     | ucation?                          |
| lf yes, please ex  | plain:             | Has the stu              | udent ever been suspende      | d or dismissed from any school?   |
| If so, what schoo  | ol?                | Has the stud             | dent used illegal drugs, alco | ohol or tobacco in the past year? |
| School attended    | d last year:       |                          | Phone Number                  | r (if not RMES):                  |

| Parents are:            | married and livin | g together    | _ separated  | divorced        | mother deceased  | father deceased | other       |
|-------------------------|-------------------|---------------|--------------|-----------------|------------------|-----------------|-------------|
| Student is livi         | ng with:          | both parents  | father       | mother          | step-parent      | legal guardian  | other       |
| Father's Name:          | First             |               | Last         | Street A        | ddress/PO Box:   |                 |             |
| City:                   | State: _          | ZIP:          | Home Pl      | none:           | Occı             | pation:         |             |
| Employer:               |                   | Work Phone    | 2:           | Email:          |                  | Cell:           |             |
| Birthplace:             |                   | Citiz         | enship:      |                 |                  | Ethnicity:      |             |
| Church Denominat        | ion:              |               | Baptize      | ed: Church      | n Membership:    |                 |             |
| Mother's Name:          | First             |               | Last         | Street A        | ddress/PO Box:   |                 |             |
| City:                   | State:            | ZIP:          | _ Home Phoi  | ne:             | Occupa           | tion:           |             |
| Employer:               |                   | Work Phone    | e:           | Email:          |                  | Cell:           |             |
| Birthplace:             |                   | Citiz         | enship:      |                 | Et               | hnicity         |             |
| Church Denominat        | ion:              |               | Baptize      | ed: Church      | n Membership:    |                 |             |
| Other Parent's/Legal Gu | uardian's Name: _ | First         |              | Last            | Street Address/  | PO Box:         |             |
| City:                   | State:            | ZIP:          | _ Home Phoi  | ne:             | Occupa           | tion:           |             |
| Employer:               |                   | Work Phone: _ |              | _ Relationship: |                  | _ Email:        |             |
| Cell:                   | Birthplace        | :             | Citize       | nship:          | Ethni            | city            | <del></del> |
| Church Denominat        | ion:              |               | Baptizo      | ed: Churc       | ch Membership:   |                 |             |
|                         | EMER              | GENCY NAME AN | D CONTACT NU | JMBER IN CASE P | ARENTS CANNOT BE | REACHED         |             |
| Name:                   |                   |               | F            | Relationship:   |                  | Phone No        |             |
| Name:                   |                   |               | F            | Relationship:   |                  | Phone No        |             |
| Doctor's Name:          |                   |               |              |                 |                  | Phone No        |             |

## **ADDITIONAL STUDENTS**

| Student Name:              |                                 |                                |   |
|----------------------------|---------------------------------|--------------------------------|---|
|                            | First                           | Middle                         | Last                                    |
| Gender: Grac               | de: Birthdate                   | e: Baptized SDA                | : Date of Baptism:                      |
| Church Membership:         | Birthp                          | lace:                          | Citizenship:                            |
| Ethnicity:                 | Has the student ever had an IEF | ?? Has student ever bee        | en recommended for special education?   |
| If yes, please explain:    | Has                             | s the student ever been susp   | ended or dismissed from any school?     |
| If so, what school?        | Has 1                           | the student used illegal drugs | s, alcohol or tobacco in the past year? |
| School attended last year: | :                               | Phone Nu                       | mber (if not RMES):                     |
|                            |                                 |                                |   |
| Student Name:              | First                           | Middle                         | Last                                    |
| Gender: Grac               | le: Birthdate                   | e: Baptized SDA                | : Date of Baptism:                      |
| Church Membership:         | Birthp                          | lace:                          | Citizenship:                            |
| Ethnicity:                 | Has the student ever had an IEF | ?? Has student ever bee        | en recommended for special education?   |
| If yes, please explain:    | Has                             | s the student ever been susp   | ended or dismissed from any school?     |
| If so, what school?        | Has t                           | the student used illegal drugs | s, alcohol or tobacco in the past year? |
| School attended last year: | :                               | Phone Nu                       | mber (if not RMES):                     |