



Northfield Baptist Christian School



Student Application

Student's Full Name _____
Last First Middle Sex

Address _____ Home Phone _____
Street City Zip

Age _____ Birth date _____ Birthplace _____
City State Country

Current Daycare/School _____

Race/ethnic group - Check appropriate Category: (Required by State of Ohio)

- African American
- Asian
- Caucasian
- Hispanic
- Multiracial
- Other

Social Security # _____ Grade Entering _____

If student is entering Pre-K or Kindergarten, will they attend: Full day _____ Half Day _____
(Cut off date is August 1st)

Will you use our Before School Program? Yes or No After School Program? Yes or No

Father/Legal Guardian
Name _____
Marital Status _____
Home Address _____
City _____ State _____ Zip _____
Employer _____
Employer's Address _____

Work Phone # _____

Mother/Legal Guardian
Name _____
Marital Status _____
Home Address _____
City _____ State _____ Zip _____
Employer _____
Employer's Address _____

Work Phone # _____

Where should school correspondence be sent? _____

Brothers or Sisters in Family	Age	Grade	School Attending
Name _____	_____	_____	_____
Name _____	_____	_____	_____
Name _____	_____	_____	_____