

TEL: 312-842-8546

FAX: 312-842-4304

Elementary School Application Form 小學申請表

CHILD's INFORMATION (學童資料)				
Child's Name (學生姓名)	Gender (性別)			
Birth Date (出生日期)	Birth Place (出生地點)			
Address (地址)				
City, state, zip code (郵區號碼)	Home Phone # (電話號碼)			
Primary Language Spoken at Home (在家裡講的語言 English (英語)				
Please list all schools previously attended by your chil	d (貴子女曾就讀過之學校):			
Name of Co. Land (Dates (就讀日期)			
	Dates (就讀日期)			
	Dates (就讀日期)			
School Year Applying for (申請學年)	Grade (年級)			
Does this child have a sibling (s) enrolled in this school Yes (是) No (否) If yes, please provide the name (s) of the child: (若有Does your child have any special needs? (physical, en需要? (身體、情緒、學習技能、等等))				
□ Yes (是) □ No (否)				
If yes, please explain. 若有, 請說明				
Please check if enrollment of your child is contingent 讀本校的因素?) ☐ Financial Aid (學費補助) ☐ After school Care (課後照顧)	upon availability of the following: (以下會否是你考慮子女就			
PARENT INFO	RMATION (父母資料)			
Father's Name (父親姓名)	Cell Phone # (手提電話號碼)			
Email Address (電郵)	Work Phone # (工作電話號碼)			
Mother's Name (母親姓名)	Cell Phone # (手提電話號碼)			
Email Address (電郵)				



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Parent's Marital Status (父母親的婚	姻狀況): 	·		
□ Single (單身) □ Married (已婚) □ Separated (分居) □ Divorced (離婚) □ Widowed (寡居)				
Are you a baptized/regularly attendin 會會友?)	g member of Chine	ese Christian Union Church? (你是	否芝城華人基督教聯合	
OTHER INFORMATION (其他資料)				
How did you hear about Pui Tak Christian School? 你是怎樣認識培德基督教學校? 「Friends/Family (親友)				
Parent's Signature (父母簽名) OFFICIAL USE ON			Date (日期)	
Date Application Received	Initials	Date Entered in Computer	Initials	