

# Student Application



Advent School  
Frans Halsstraat 21  
7021 DL Zelhem

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PASSPORT PHOTO STUDENT

A large, empty rectangular box with a thin black border, intended for a passport photo of the student.

Date: .....

### Student Information

Name: ..... Telephone: .....  
Address: ..... Age: .....  
ZIP code: ..... Gender: .....  
City: ..... Birth date: .....  
School last attended: ..... Birth place: .....  
Last Grade Completed? .....

### Family Information

Father's Name: ..... Position: .....  
Employment: ..... Telephone: .....

Mother's Name: ..... Position: .....  
Employment: ..... Telephone: .....

Marital status:

Married       Divorced       Unmarried       Separated       Widowed

How many children are in the family? ..... children. Ages: .....

Are these children also attending the Advent School?     Yes     Not yet       Maybe       No

If not, the reason why they are not applying:

.....

Emergency Contact 1:

Name: ..... Telephone: .....

Emergency Contact 2:

Name: ..... Telephone: .....

### Religious Information

Do you attend a church or meeting with your children weekly?       Yes       No

Father's religion: .....

Mother's religion: .....

Prayer and Bible study is a ....     daily       regular       weekly       occasional       no  
part of the family programme.

Has applicant ever made a profession of faith in Christ?       Yes       No

### Medical Information

Family Physician? .....  
Telephone of family physician: .....  
Does the student have any physical or mental defects or allergies which are important for the school to know? .....  
.....

### Scholastic Information

Has the student ever been expelled, dismissed, suspended, or refused admission to another school?  
 Yes       No  
If yes, explain: .....  
Has the student ever had disciplinary difficulty at school?       Yes       No  
If yes, explain: .....  
Does the student have a juvenile or arrest record?       Yes       No  
If yes, explain: .....  
Has the student ever used tobacco or non-prescription drugs of any kind?       Yes       No  
If yes, explain: .....  
Please indicate academic level of the student's previous work:  
 Excellent       Good       Average       Poor  
Has the student ever failed an academic subject in school?       Yes       No  
If yes, explain: .....

### General Information

Do you have any other additions or remarks that would be significant for the school?  
.....  
.....  
How did you hear about the International Advent School?  
.....  
Reason for selecting this school:  
.....  
.....  
.....

If your child is accepted for admission by the school board of the Advent School, you as the parents will be expected to participate in a Parent's Orientation Day in which you will work through a set of PACE's to orientate yourselves to the learning process that your child will be embarking upon through the Accelerated Christian Education system in use at the Advent School. Could you please mark the day of the week that you would most likely be able to attend such a daylong session?  
 Monday       Tuesday       Wednesday       Thursday

Father's signature: ..... Date: .....  
Mother's signature ..... Date: .....