



**NEW STUDENT APPLICATION FORM
2021-2022 School Year**

This form and \$50.00 must be submitted for each new student applying for admission. Important: This “good faith” deposit will be subtracted from your registration fee when completing registration. It is not refundable.

Student’s Legal Name			Grade	DOB	Age
First	Middle	Last		mm/dd/yyyy	
Parent’s Names		Email Addresses			
Address		Phone Numbers			
Family Church Affiliation <small>(denomination and specific home church)</small>		Membership: [] Active Member [] Attend Periodically [] Affiliation Only			
Reason for applying to West Covina Hills Adventist School					
Last School Attended			Name & Address		
References: (List 3 non-family individuals who know the student well. Last teacher must be included, if possible.)					
Name	Address	Phone Number	Relationship		
1.					
2.					
3.					

For Admissions Committee Use