West Covina Hills Adventist School

3528 East Temple Way
West Covina, CA 91791
(626) 859-5005
www.westcovinahills.org

RETURNING STUDENT APPLICATION FORM

This simplified form and **$50** must be submitted for each returning student. This "good faith" deposit will be credited toward your registration fee and is not refundable. Students not in attendance at the end of the previous school term must submit a New Student Application Form.

Student's Legal Name_____ _____ Grade Entering_____
First Last

Parents' Names_____ Home Phone___ _____

Address_____

For Admissions Committee Use

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