



Christ the Savior Academy ·  
7515 E. 13<sup>th</sup> Street · Wichita, KS 67206  
www.csawichita.org · email: info@csawichita.org  
(316) 201-4810 ·

### Office Use Only

Name:  
DOB:  
Application Fee Status:

## APPLICATION FOR ADMISSION INFORMATION:

Thank you for your interest in Christ the Savior Academy, Inc. (CSA), where we believe that parents, the Church, and the school must all work together to lay a strong foundation for a child's life. As you contemplate your enrollment at CSA, we believe you should ask this question: What does an *educated* person look like? Just as a builder must always begin with a blueprint, we believe schools should begin with the end in mind. These are our goals at Christ the Savior Academy for the student:

- *We seek to form thorough literacy, self-discipline, academic rigor and insightful thinking in students, thus providing them with the skills necessary to excel in any academic or intellectual endeavor.*
- *We seek to make the student aware of Truth and Virtue as unchanging, sovereign, and spiritual realities.*
- *We seek to establish the student upon a firm foundation in Jesus Christ, who is the beginning and end of all knowledge.*

If you have any questions about the application process, please call us at (316) 201-4810.

### AGE REQUIREMENTS:

Junior Kindergarten: Child must be 4 by August 31 of the school year applied for, and must be potty-trained.

Kindergarten: Child must be 5 by August 31 of the school year applied for.

### CLASS SIZE:

Junior Kindergarten: Minimum of five children, maximum of 12 children

Kindergarten – Fifth Grade: Minimum of six children, maximum of 12 children

(Note: Christ the Savior Academy reserves the right to combine classes when deemed appropriate.)

### TUITION:

Full-day: \$5,500

Half-day Junior Kindergarten/Half-Day Kindergarten: \$4,500

### ADMISSION CHECKLIST:

- Submit completed application form and \$50 application fee.**  
(hand-delivered or mailed to the address above)
- Placement Testing and Conference** - Once your application is received, we will arrange for a placement test and conference. We require all incoming students to undergo a placement test in order to help us better meet their needs. The conference is your opportunity to ask questions and learn more about the school.
- Admittance notification and Enrollment Packet sent.**
- Tuition Agreement due in order to secure spot for forthcoming year.**
- Enrollment in FACTS payment system** – A link to FACTS can be found on website's Admissions' page. Mandatory \$150 enrollment fee will be scheduled for collection at time of FACTS enrollment.

Christ the Savior Academy, Inc., admits students without regard to race, gender, color, ethnic or national origin to all the rights, privileges, programs and activities generally accorded or made available to students of the school. Christ the Savior Academy does not discriminate on the basis of race, gender, color, ethnic or national origin in the administration of its personnel, admission, and education policies or any other school administered program.

# APPLICATION FOR ADMISSION

## APPLICANT:

Date of Application: \_\_\_\_\_ School Year: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_  Boy  Girl

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_

Previous Grade: \_\_\_\_\_ Applying for Grade:  Jr. K 1/2 day  Jr-K full day  Kindergarten 1/2 day  
 Kindergarten full  1st grade  2nd grade  
 3rd grade  4th grade  5th grade

Previous School: \_\_\_\_\_ Church Affiliation: \_\_\_\_\_

## PARENTS/GUARDIANS:

**Parent/Guardian #1 - Relationship to Applicant:** \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Employer: \_\_\_\_\_ Occupation/Title: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Email address: \_\_\_\_\_

Church Affiliation: \_\_\_\_\_

**Parent/Guardian #2 - Relationship to Applicant:** \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Employer: \_\_\_\_\_ Occupation/Title: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Email address: \_\_\_\_\_

Church Affiliation: \_\_\_\_\_

**FAMILY INFORMATION:**

**Residence:**

With whom does the student live?  both parents  mother  father  guardian  
Parents are:  married  separated  divorced

Please list the names and ages of other children in the family:

Name: \_\_\_\_\_ Current Grade: \_\_\_\_\_ School Attending: \_\_\_\_\_

Name: \_\_\_\_\_ Current Grade: \_\_\_\_\_ School Attending: \_\_\_\_\_

Name: \_\_\_\_\_ Current Grade: \_\_\_\_\_ School Attending: \_\_\_\_\_

**PERSONAL INFORMATION:**

What are the strengths and weaknesses of your child? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

What are your educational goals for your child? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Why do you desire a Christian education for your child? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Has your child been referred for psychological or educational assessment?  no  yes If yes, please describe briefly:

\_\_\_\_\_  
\_\_\_\_\_

Please describe any special needs (academic, medical or personal): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Additional Comments: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

How did you first hear about Christ the Savior Academy? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Thank you for submitting your application to Christ the Savior Academy. We will be in contact with you shortly.**