

OZARK ADVENTIST SCHOOL

211.50 Dawn Hill E. Rd. * Gentry, Arkansas * 72734 * T: 479-736-8592 * F: 479-736-3280 * E: Registrar.oas@gmail.com

Student Application

Date _____

STUDENT/PARENT (GUARDIAN) INFORMATION

Student Last Name		Student First Name		Student Middle Name		Birthdate	Gender	Grade Entering
Student Address				City	State	Zip	Main Contact Phone	
Student Mobile Phone Number	Student Email Address		Student Birthdate	Student Social Security Number		Student Recommended for Special Education? Explain.		
Previous School Attended if NOT OAS	Previous School Street Address			Previous School City, State, Zip		Previous School Telephone		
Prominent Ethnic Background: (For Statistical Purposes) <input type="checkbox"/> American Indian/Alaskan Native <input type="checkbox"/> Asian <input type="checkbox"/> Black/African American <input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> Native Hawaiian/Other Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> Other _____								
Student Living With: <input type="checkbox"/> Both Parents <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Stepfather <input type="checkbox"/> Stepmother <input type="checkbox"/> Guardian <input type="checkbox"/> Grandfather <input type="checkbox"/> Grandmother Other, Explain _____								
Father Married? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Divorced <input type="checkbox"/> Separated						Father Email		
Other/Explain _____								
Father's Last Name		Father's First Name		Address Check here if same as above <input type="checkbox"/>		City	State	Zip
Father Home Phone Number	Father Mobile Phone Number	Father Place of Employment		Father Occupation		Father Work Phone Number		
Mother Married? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Divorced <input type="checkbox"/> Separated						Mother Email		
Other/Explain _____								
Mother's Last Name		Mother's First Name		Address Check here if same as above <input type="checkbox"/>		City	State	Zip
Mother Home Phone Number	Mother Mobile Phone Number	Mother Place of Employment		Mother Occupation		Mother Work Phone Number		
Guardian Relationship to Student _____						Guardian Email		
Guardian's Last Name		Guardian's First Name		Address Check here if same as above <input type="checkbox"/>		City	State	Zip
Guardian Home Phone Number	Guardian Mobile Phone Number	Guardian Place of Employment		Guardian Occupation		Guardian Work Phone Number		

CHURCH AFFILIATION

Church Denomination (Student)	Baptized? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, Date of Baptism _____	Church Where Membership Is Held
Church Denomination (Father)	Baptized? <input type="checkbox"/> Yes <input type="checkbox"/> No	Church Where Membership Is Held
Church Denomination (Mother)	Baptized? <input type="checkbox"/> Yes <input type="checkbox"/> No	Church Where Membership Is Held

GENERAL & FINANCIAL INFORMATION

1	Name Of Other Children Attending OAS	Grade	3	Name Of Other Children Attending OAS	Grade
2	Name Of Other Children Attending OAS	Grade	4	Name Of Other Children Attending OAS	Grade
Do You Have An Unpaid Account At Another SDA School? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, Give Name And Address Of School _____					
Who Is Financially Responsible For This Student's Account? <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Both <input type="checkbox"/> Other, Please Explain _____					

We, the undersigned, pledge to uphold the policies and principles as outlined in the current Ozark Adventist School student handbook and to accept financial responsibility according to the published financial policies and contract. To the best of our knowledge the questions on this application are answered completely and truthfully.

Father/Guardian Signature

Mother/Guardian Signature

Financial Payer Other Than Parent Signature

Father/Guardian **Print** Name

Mother/Guardian **Print** Name

Financial Payer Other Than Parent **Print** Name