



Harvest Christian School

P. O. Box 646, Sandstone, MN 55072 (320) 245-5330

PRE-SCHOOL APPLICATION FOR ADMISSION

Date_____

Child's Name_____

First

Middle

Last

Child's Age as of Sept. 1st, 2021_____ Child's Birth Date _____

Child's Birthplace_____ Sex_____

Mother's Name_____ Work Number_____

Father's Name_____ Work Number_____

Email_____

Home Address_____

_____ Home Phone Number_____

Tell about your personal faith in Christ:_____

How do you promote Christian living in your home:_____

Has your child attended preschool before?_____ If so, where?_____

Names and ages of other children:_____

Parent's Signature:_____ Date:_____

Parent's Signature:_____ Date:_____

FOR OFFICE ONLY:

Interview date_____

Admission date_____