

**GREENWOOD MENNONITE SCHOOL
12802 MENNONITE SCHOOL ROAD
GREENWOOD, DE 19950**

APPLICATION FOR ADMISSION

Thank you for your interest in Greenwood Mennonite School. Our goal is to provide a quality education in an environment that promotes growth in Christian faith and life.

Principal _____

Date of Application

FAMILY INFORMATION

Name of Parents _____

Last First Middle Phone Number

Address _____

Church Affiliation _____

Pastor _____

Name Address Phone Number

Father's Employment _____ Mother's Employment _____

Grandparent's Names:

Paternal _____ Maternal _____

Address _____ Address _____

Phone _____

STUDENTS DESIRING ENROLLMENT

NAME	BIRTHDATE	GRADE

OTHER CHILDREN IN THE FAMILY

Name _____ Birth date _____

Name _____ Birth date _____

1. Please complete this entire application for admission and return it to: Greenwood Mennonite School, 12802 Mennonite School Road, Greenwood, DE 19950.
2. An interview with the Admissions Committee is required before the admission process can be completed. After the school receives your application and the Pastors Recommendation Form you will be contacted to schedule the interview.
(Please give the Pastor's form to your pastor to complete).

I approve _____ School to give information to the Greenwood
Mennonite School for my child(ren):

Regarding his/her:

	Person to contact	Phone #	Fax #
Academic records	_____	_____	_____
Behavior records	_____	_____	_____

Parent's name printed _____ Date _____

Parent's Signature _____

We believe that the main purpose of the Christian school is to assist the Christian home in educating and equipping youth to live in obedience to the Lord Jesus. Because of this, we are very interested in the spiritual testimony of the parents. Please share your beliefs and testimony by answering the following questions:

1. Who is Jesus Christ?
2. What is a Christian?
3. Are you a Christian? _____ Is your spouse a Christian? _____
If the answer is yes, please give a short testimony as to how you became a Christian.
4. How often do you attend church as a family?
5. In what ways are you participating in the life and activities of the church?
Father:

Mother:
6. What spiritual values are you currently teaching your child (children) and how?
7. Will you accept using corporal punishment, if necessary, to discipline your child (children)?
8. Please give your reasons for wanting to enroll your child (children) in our school.
9. Do any of the applying children have a known physical or mental handicap or a learning disability? If so, please describe.

Signature of parent completing this form _____

Spouse's Signature _____

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GREENWOOD. DE 19950**

PASTOR'S RECOMMENDATION FORM

Instructions to student: Write your name in the blank and give it with a stamped envelope to your pastor to complete and mail to the school. (If you are a pastor's child, please ask another minister, deacon, or church leader to complete the form.)

Instructions to Person completing this form:

_____ is applying for admission to Greenwood Mennonite School. He /she has named you as pastor. We are seeking information about his /her personal characteristics to help in determining his/her adaptability to a Christian school and how to guide him/her intelligently as a student. Please give a frank and honest evaluation. If the prospective student is a pastor's son/daughter, please ask another minister, deacon, or church leader to complete the form. Thank you.

1. Is the applicant a Christian? If so, describe his /her commitment and spiritual growth. If not, what is his /her attitude toward Christianity?
2. What are the applicant's attitudes toward the church?
3. What are your observations concerning home relationships?
4. Are there personality, physical, or emotional problems the school should be aware of? If so, describe.
5. Why do you recommend this student for enrollment at GMS?
6. Does the student have practices or habits, which are in conflict with the standards or values of GMS? If so, describe.
7. Write additional information we should know that could be helpful to understanding this applicant.

Name _____ Phone _____

Date _____ Congregation _____

Please return this form promptly to the address at the top of the page