



Omak Christian School

102A Tower St.

Riverside, WA 98841

1st-6th Enrollment

## Enrollment Application: Grades 1st-6th

Please complete this form in its entirety. Please use black or blue ink. All forms can be submitted to our office, Monday - Thursday, mailed to the same address, or emailed to **admissions@omakchristian.org**. Please submit your applications promptly, as they will be reviewed and accepted on a first-come, first-served basis.

Student Name (last, first middle) \_\_\_\_\_

Preferred name: \_\_\_\_\_ DOB: \_\_\_\_\_ Age: \_\_\_\_\_

Gender: ☐ Male ☐ Female

Grade for the '26/27 School Year: (please circle)

**1 2 3 4 5**

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

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

### Parental Information

**Mother/Guardian:** \_\_\_\_\_ Phone #: \_\_\_\_\_

Email: \_\_\_\_\_

Employer \_\_\_\_\_

Work#: \_\_\_\_\_ Best contact: ☐ Cell ☐ Work ☐ Texting ☐ Call

**Father/Guardian:** \_\_\_\_\_ Phone #: \_\_\_\_\_

Email: \_\_\_\_\_

Employer \_\_\_\_\_

Work#: \_\_\_\_\_ Best contact: ☐ Cell ☐ Work ☐ Texting ☐ Call

## PREVIOUS SCHOOLS ATTENDED

School Name: \_\_\_\_\_ Grades Attended: \_\_\_\_\_

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

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_ Phone#: \_\_\_\_\_

School Name: \_\_\_\_\_ Grades Attended: \_\_\_\_\_

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

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_ Phone#: \_\_\_\_\_

Is your child enrolled in any special classes? ☐ Music ☐ Dance ☐ Art ☐ Other

Other: \_\_\_\_\_

## HOME CHURCH INFORMATION

Church Name: \_\_\_\_\_ ☐ We do not attend church

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

Pastor's Name: \_\_\_\_\_ Church Phone#: \_\_\_\_\_

How long have you attended? \_\_\_\_\_ May we contact your church?: ☐ Yes  
☐ No

How frequently do you attend? ☐ Weekly ☐ Monthly ☐ Yearly/Occasionally

## STUDENT BEHAVIOR/PERSONALITY TRAITS

Has your student ever been expelled or suspended from school? ☐ Yes ☐ No

If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_

Has your student ever received special disciplinary actions? ☐ Yes ☐ No

If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_

Listed below are several character traits attributed to students. Please select **at least 4** traits that best describe your child.

Reluctant	Extroverted	Competitive
Excitable	Shy	Quick Study
Curious	Friendly	Forgetful
Fearful	Self-Reliant	Distractible
Compliant	Unmotivated	Attentive
Strong-willed	Achiever	Disorganized
Introverted	Slow Learner	Goal Focused

*Please answer the following questions with as much detail/clarification as needed.*

When my child has free time, he/she will:

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

Please describe how your child interacts with others:

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

Briefly describe your child's overall personality:

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## ACADEMIC GOALS AND PREFERENCES

*Please indicate on a scale of 1-5 (1 being least interested and 5 being most interested), your child's interest/enjoyment of the following classroom subjects*

Bible: 1    2    3    4    5

Spelling/Phonics:    1    2    3    4    5

Reading/Literature: 1    2    3    4    5

Grammar: 1    2    3    4    5

Writing: 1    2    3    4    5

Math:    1    2    3    4    5

Science: 1    2    3    4    5

History: 1    2    3    4    5

*Strengths: Please describe your child's academic strengths.*

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*Weaknesses: Please describe your child's academic needs.*

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*Goals: Please describe your child's academic goals for the year.*

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## CONFIDENTIAL INFORMATION

Are there custody issues we should be aware of? ☐ Yes ☐ No

Are there custody papers on file? ☐ Yes ☐ No

Is there a restraining order or any additional court/law orders in place? ☐ Yes ☐ No

*If yes, please attach a copy of the order to the application, or be prepared to bring a copy of the order **upon approved enrollment**.*

Is there a second parent's mailing address? ☐ Yes ☐ No

Secondary mailing Address: \_\_\_\_\_

(If applicable, please include the name of the resident.)

Do you want to be listed in our Parent Directory? ☐ Yes ☐ No

Should both names and addresses be listed in our Parent Directory? ☐ Yes ☐ No

(If No, please indicate which parent/guardian you would like to be listed in the Parent Directory: \_\_\_\_\_)

Anything not stated above that we should know about your child that will allow us to guard his/her heart? \_\_\_\_\_

\_\_\_\_\_

## HEALTH INFORMATION

Health of Student: ☐ Good ☐ Fair ☐ Poor

If less than fair Please explain: \_\_\_\_\_

Is your child on special medications? ☐ Yes ☐ No

Does your child have any special health needs? ☐ Yes ☐ No

Please explain: \_\_\_\_\_

## FRIENDS AND FAMILY

Other than the parent/guardian, who can pick up your child? Please list below:

Friend/Family Name: \_\_\_\_\_ Phone \_\_\_\_\_

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

Relationship to your child: \_\_\_\_\_

Friend/Family Name: \_\_\_\_\_ Phone \_\_\_\_\_

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

Relationship to your child: \_\_\_\_\_

## References

Please list two non-related references who know your child and your family well. Please ensure your references have given you permission for Omak Christian School to contact them on your family's behalf.

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: (\_\_\_\_) \_\_\_\_\_

Email Address: \_\_\_\_\_ Years Known: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: (\_\_\_\_) \_\_\_\_\_

Email Address: \_\_\_\_\_ Years Known: \_\_\_\_\_

## ENROLLMENT AGREEMENT

I, the undersigned parent or guardian of \_\_\_\_\_, understand that completion of the Omak Christian School Elementary Enrollment Form does not guarantee my child's enrollment in the **2026/2027 school year**. I have reviewed the Omak Christian School Handbook and Application Process and fully comprehend the terms and processes.

I understand that for my child to be considered for enrollment, I have agreed to the terms as follows:

- A. The family must agree to OCS's statement of faith.
- B. The student must desire to attend Omak Christian School.
- C. The student must strive to learn with a grateful heart and attitude, honoring Jesus Christ.
- D. The student must aim to be an image-bearer of Christ daily, including the following:
  - a. Being honest
  - b. Being kind
  - c. Treating others with respect
  - d. Working to bring glory to God
- E. Students understand that they are to demonstrate an attitude of submission and support to OCS's mission and to be a positive influence on other students in pursuing it.
- F. Students must understand that their annual enrollment is based on their satisfactory academic standing and compliance with the rules and regulations of OCS.
- G. The family must support OCS's position on the biblical definition of marriage as defined by God, between one man and one woman.

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Parent/Guardian Signature

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Date

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Parent/Guardian Signature

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Date

## Grades 1st-6th Enrollment Next Steps

1. Turn in your completed application and completed tuition forms, along with the new student fee\* (\$50) via in-person, email [admissions@omakchristian.org](mailto:admissions@omakchristian.org), or mail:

**102A Tower St. Suite A, Riverside, WA 98849.**

2. The administration will contact you directly to schedule an interview and academic placement testing.
3. After completion of both your child's interview and testing, OCS Administration will contact you within 15 business days regarding the status of your enrollment application.
4. Upon approval, your enrollment fee\* (\$250) must be paid in full **within 5 business days**. *All Enrollment Fees must be made via check, written out to Omak Christian School.* \*\*
5. Upon approval, your family will also receive a welcome packet via email, including all additional paperwork needed to complete your enrollment.
6. Complete and turn in your child's immunization record, the opt-out form, the medical form, and any additional paperwork included in your welcome packet. ***This must occur before they can officially enter their classroom.***

## We look forward to meeting you!

\*\*New Student Fee will be deducted from the enrollment fee.

\*\*\* If all enrollment fees are received before May 28th, a \$500 discount will be applied.