

General Information

To better understand your child and meet their needs, we ask you to provide us with the information requested below:

Has/does your child currently use: _____ alcohol _____ illegal drugs _____ tobacco

(remember that possession of any of the previous items is illegal and authorities will be called if found on premises or person.)

Has child ever been arrested? ___ No ___ Yes On probation? ___ No ___ Yes

If yes was an answer to either question, please explain. _____

Has child taken a drug test within the last 12 months? ___ No ___ Yes. If yes, state substance abused and give date of discontinuance:

_____ date _____

Remember...failure to disclose appropriate information may be grounds for expulsion, probationary measures, or suspension from Liberty.

How would you rate your child's: (5)excellent (4)Good (3)Fair (2)Poor (1) Not known

Moral character (lies, steals, etc	5	4	3	2	1
Personal Appearance	5	4	3	2	1
Emotional stability	5	4	3	2	1
Initiative	5	4	3	2	1
Acceptance by others	5	4	3	2	1
Concern for Others	5	4	3	2	1
Attitude toward authority	5	4	3	2	1
Attitude toward parents	5	4	3	2	1
Attitude toward education	5	4	3	2	1

If your child does not bring a lunch we will feed them and charge your account. Please do not ask us to punish your child for not making their own lunches

What is the approximate time applicant goes to bed on school nights? _____

Does Child eat breakfast? ___ No ___ Yes

About how many hours a day does child watch TV? _____

Will child be buying lunch or bringing lunch? _____ may they charge? _____

Health Information

The students of Liberty are monitored by the capable hands of the Torrance County Health Department, which will review our shot records for compliance. **Your child must have proof of current shots in their file with us in order to attend Liberty.** At time of enrollment, we will send for their previous school records. When we receive these records you will have 30 days to comply for shot updates by the County Nurse or your private physician.

If you sign a Conscientious Objection Waiver paper, you must have it notarized and placed in our files within 10 days of enrollment or re-enrollment each year.

Does child wear glasses? No Yes Wear contacts? No Yes Last test _____

Circle if child has had any of the following:

Asthma	Epilepsy	Frequent Headaches	Blurred Vision
Chickenpox	Malaria	Rheumatic Fever	Tuberculosis
Diabetes	Measles	Scarlet Fever	Typhoid Fever
Diphtheria	Mumps	Smallpox	Whooping Cough

Allergies to? _____

Other illnesses? _____

List any current major health problems: _____

Does child have a physical handicap? Explain _____

Is there any reason why child cannot participate in a PE program? _____

Do you consider your child's health to be? Good or _____

Has child ever been diagnosed with a learning disability? Yes or No

If yes, do they take medication? Yes No If yes, what? _____ All medication must be in doctor's label contain and kept in office.

Liberty Ranch Christian School
Hwy 55, Bluegrass Road
Estancia, New Mexico 87016
1-505-384-2530



Our symbol is the American Flag, our mascot is the American Eagle, our colors are red, white, and blue, and our desire is to educate the children in truth and understanding whereby expanding their knowledge for success while building character.

Members of the ASECJ: # 0022121 and our NM State Nonpublic School #: 80573002

Date _____

Name of Previous School

Address

City State Zip

Dear Registrar:

Please send transcripts, test scores, health records, and any other helpful information on the students behavioral/ emotional patterns for the previous student to the address above.

Student's Name

Last Grade Attending

Date of Birth

Current Age

Parent or Guardian Signature

Under the provisions of the Privacy Rights and Students Act, it is not necessary to have the written consent of the parents to release records " to officials of schools in which the student seeks or intends to enroll."