

FRIENDSHIP CHRISTIAN SCHOOL

3160 Old Atlanta Road
Suwanee, GA 30024
6788450418

International Student Application

Student's Legal Name: _____ Preferred First Name: _____

First Middle Last

Date of Birth: _____ Grade Applying For: _____ Today's Date: _____

Church Denomination: _____ Race: _____ Gender: M F

US Mailing Address: _____

Street City State Zip

Cell Number: _____ Student's Email Address: _____

Housing Information:

Every International student is to apply for the FCS dorm-style student housing. If the student has a blood related family in the area, they may apply for exemption of the provided student housing upon approval by the school. If applying for Family Housing Exemption Approval, fill out the blanks below and the family member will have to go through an interview process.

___ I will be applying for the FCS Dorm-Style Student Housing.

___ I will be applying for the Family Housing Exemption Approval.

Family Member Name: _____

Relation to Student: _____ Phone Number: _____

Email: _____

Agent Information:

Agent's Name: _____

Agent's Phone Number: _____ Agent's Email: _____



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Student's Previous Education Background

List all current and previous schools attended, including Kindergarten:

Name of School	City, State	Grades Attended

Family Information:

Father's Name: _____ Phone Number: _____
Address: _____ Same As Student: _____
Occupation: _____ Employer: _____
Cell Number: _____ Email Address: _____
Church: _____ Pastor's Name: _____
Attend Regularly? Y N Are You A Member? Y N Church Zip code: _____

Mother's Name: _____ Phone Number: _____
Address: _____ Same As Student: _____
Occupation: _____ Employer: _____
Cell Number: _____ Email Address: _____
Church: _____ Pastor's Name: _____
Attend Regularly? Y N Are You A Member? Y N Church Zip code: _____

Student Name Printed

Parent/Guardian Signed

Date

All application and registration fees are non refundable. See website for details.

