

Student's Name _____

CHURCH REQUEST

(Top half of form to be filled out by parent. Bottom half of form to be filled out by church.)

Church Name _____

Church Mailing Address _____

Church Phone _____

Church Fax _____

Church Email _____

I (we) give permission for this church to provide requested information directly to BCS. I (we) understand that my student may be enrolled on a conditional basis at BCS until this information is received. I (we) further understand that my student may be found ineligible for enrollment at BCS based upon information obtained.

Signature of Custodial Parent/Legal Guardian Date

Signature of Custodial Parent/Legal Guardian Date

The following family has applied for admission to BCS:

(Top half of form to be filled out by parent.)

(Bottom half of form to be filled out by church.)

They indicated on the admission application that they attend your church. We would like for you to verify their attendance at your church by filling out this form and returning it to us. The admission process is not complete until we receive your response.

Pattern of Attendance: Weekly Monthly Irregularly Rarely Never

Name of church staff filling out form _____

Position in church _____

Thanks so much for your help and attention to this matter.

In His Service,
BCS Registrar