



Cypress Adventist School

21500 Cypress Way, Lynnwood, WA 98036

Phone: 425-775-3578 Fax: 425-775-3579 Email: cypressadventist@hotmail.com

Admissions Procedures

Thank you for your interest in Cypress Adventist School. Please complete the application and mail or fax it to the above address. All applications (other than from current families) will be considered on a first-come, first-served basis. This procedure allows the school to accurately identify and admit students from families who have clearly expressed convictions consistent with the mission and vision of Cypress Adventist School. Cypress will consider a student's academic achievements in the application process for grade placement, but not as the primary determinant for acceptance.

Cypress Adventist School seeks to foster a community atmosphere that is due in great measure to the similarity of biblical convictions and the principles taught and lived out in the homes of our students. We want to do all we can to build and maintain that atmosphere at Cypress.

Application Procedures

A. Complete the application packet

- Application for Acceptance Form
- Have previous teacher fill out Teacher Reference Form
- Parent Application Form (one per family)
- Student Application Form (one per student)
 - Include Immunization Form
 - Copy of Birth Certificate (Grades K-1)
- Consent for Emergency Medical Treatment (one per student)
- Computer Network Acceptable Use Agreement (one per student)
- Records Release Form

B. Interview and Assessment Test

The completed application packet must be received prior to the family interview. Schedule a day with the principal to meet for the family interview (student and both parents) and take the grade-level assessment test.

C. Notification

The admissions committee will meet and notify parents within two weeks. The registration fee is due at this time.

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TEACHER REFERENCE FORM

Dear _____,

_____ desires to be a _____ grade student at Cypress Adventist School. Please complete and return this form in a sealed envelope at the earliest possible date. The information you provide will be kept confidential. THANK YOU for your assistance.

Please return to: **Cypress Adventist School**
21500 Cypress Way
Lynnwood, WA 98036
(425) 775-3578
Attention: Secretary

PERSONAL INFORMATION

1. How long have you known the applicant _____
2. Has the applicant demonstrated leadership qualities? Yes No D.K.
Comments: _____
3. Have there been frequent absences or tardiness? Yes No D.K.
Examples: _____
4. Has the applicant, to your knowledge, ever been suspended or expelled from school or been in trouble with civil authorities? Yes No D.K.
Comments: _____
5. Does the applicant have difficulty with self-discipline in school? Yes No D.K.
Comments: _____
6. Has the applicant received an award or achieved any special recognition?
Comments: _____
7. Would the applicant be a positive influence to the overall environment of this school? Yes No
How? _____

	Excellent	Good	Poor	Not Known
Is interested in student life activities				
Completes work on time				
Is neat/organized				
Has good study habits				
Follows directions				
Shows self-control				
Is courteous				
Is obedient to authority				
Accepts constructive criticism				
Is honest				
Shows an attitude of respect for others				
Demonstrates a positive attitude toward learning				

Additional comments that you feel are important in the consideration of this applicant:

Signature

Occupation or Position

Address

Telephone No.

Date