



SASKATOON
CHRISTIAN SCHOOL

STUDENT QUESTIONNAIRE FORM

To be completed by grades 7-12 students only
One/student

Student's Full Name: _____

Applying for Grade: _____

Please print clearly and complete ALL information.

WHY SCS?

SPIRITUAL INVENTORY

At SCS, we want each student to have a personal relationship with Jesus Christ.

Do you consider yourself to be a Christian? Yes No

If yes, please tell us why.

We believe a weekly, involved relationship with a local body of believers (the church) is essential to personal growth.

Are you actively involved in a church? Yes No If yes, which church? _____

How often do you attend church? _____

Please tell us how you are involved in your church.

Do you attend youth group? Yes No If yes, where? _____

What are you doing to grow spiritually?

Write your personal testimony. Include your explanation of what it means to be a Christian.

SCHOOL & ACADEMIC INVENTORY

On your last report card, in which subjects did you earn lower than a 75%?

What subject(s) interest you most and why?

Is doing well in school important to you? Why or why not?

On the average, how much time do you spend each night in homework or school-related studies?

- none about 15 minutes about 30 minutes
 about an hour about one and a half hours two or more hours

Is there a subject that you find particularly difficult?

What do you think is the reason you find this subject difficult?

How often were you absent from school last year?

Without giving his/her name, tell us what you liked about your favourite teacher.

Did you receive any detentions last year? Yes No If yes, how many? _____

Have you ever been suspended from school? Yes No

If you were ever suspended, please explain the circumstances for each time you were suspended.

Why are you leaving your current school?

SOCIAL & PERSONAL INVENTORY

List any creative activities in which you have been involved (music, literature, drama, art, etc.).

List any hobbies or interests you have outside of school.

List any athletic activities in which you have been involved.

SOCIAL & PERSONAL INVENTORY continued...

List any special recognition or honours you have received (church leadership position, team captain, honour roll, attendance award, etc.).

Tell us about jobs or chores you are responsible for at home.

What was the last movie you saw?

What musician, music group, or band is your favourite?

Without giving a name, tell us why your best friend is your best friend.

Do you have an outside job? Yes No

If yes, how many hours a week do you work during the school year?

What words would you use to describe your personality?

If you become a student at SCS, how would your presence make it a better school?

We are interested to know what you think of yourself. How would you rate yourself on the following? Place a check beside the statement you believe best expresses how you feel about each characteristic. You may expand on your responses on another page.

Characteristic	I'm an excellent student	I'm doing my best most of the time	I'm okay, but could be better	I really don't try
Academic Achievement (what you accomplished so far)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Academic Potential (what you believe you are capable of)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Effort/Determination/Persistence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Management of time/Punctuality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Study habits/Organization	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Responsibility/Homework completion	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Classroom preparation/Attendance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attitude and respect for authority	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Manners, courtesy and appearance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Concern for others/Relationship with peers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

ADDITIONAL COMMENTS (OPTIONAL):

--

By signing below, I agree that this form has been completed accurately and that the information is true and correct to the best of my knowledge.



Student Signature:	Date (YYYY-MM-DD):
--------------------	--------------------