



**MIDDLE SCHOOL/HIGH SCHOOL STUDENT LIFE SHEET
RIVER CITY BELIEVERS ACADEMY**

This sheet is to be completed by the student.
Help us get to know you!

Name: _____ Date: _____

Applying for Grade: _____

Do you wish to attend RCBA? _____

I am applying to River City Believers Academy because:

School/Academic Inventory

1. On your last report card, in what subjects did you earn a grade lower than a "B"?

2. What subject most interests you and why?

3. What subject least interests you and why?

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

5. On average, how much time do you spend each night on homework or school-related studies?

___ none ___ 15 minutes ___ 30 minutes ___ 1 hour ___ 1-2 hours ___ 2 or more hours

6. Is there a subject that you find particularly difficult?

7. If so, why do you find this subject difficult?

8. Explain what you liked about your favorite teacher.

9. Explain what you did not like about your favorite teacher.

10. Why are you leaving your current school?

Spiritual Inventory

11. Do you consider yourself to be a Christian? ___ Yes ___ No

12. Are you currently involved in a church? ___ Yes ___ No

13. If so, explain your involvement in detail.

14. What role does the Bible play in your family's life?

15. How has God been working in your life this past year?

16. On a *separate sheet of paper*, please give your personal testimony. Include your explanation of what it means to be a Christian.

Social/Personal Inventory

17. Please indicate your interests:

- | | | | | |
|--|--|--------------------------------------|-------------------------------------|--------------------------------|
| <input type="checkbox"/> Volleyball | <input type="checkbox"/> Cheer | <input type="checkbox"/> Track/Field | <input type="checkbox"/> Art | <input type="checkbox"/> Choir |
| <input type="checkbox"/> Student Govt. | <input type="checkbox"/> Soccer | <input type="checkbox"/> X-Country | <input type="checkbox"/> Golf | <input type="checkbox"/> Drama |
| <input type="checkbox"/> Literature | <input type="checkbox"/> Academic Bowl | <input type="checkbox"/> Softball | <input type="checkbox"/> Basketball | |
| <input type="checkbox"/> Baseball | <input type="checkbox"/> Band | <input type="checkbox"/> Yearbook | <input type="checkbox"/> Missions | |
| <input type="checkbox"/> Other interests | _____ | | | |

18. List any past athletic activities in which you have been involved.

19. List in detail any special recognition or honors you have received (i.e. church leadership position, team captain, class officer, honor roll, attendance award, etc.).

20. List jobs or chores you are responsible for at home.

21. Are you currently employed outside the home? Yes___ No___

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

I certify that the answers I have given on this questionnaire are accurate and I have been truthful in all my responses.

Student Signature

Date