



APPLICANT QUESTIONNAIRE

Middle & Upper School

This form is to be completed by the student in his or her own handwriting with blue or black ink.
Please write complete sentences to complete each answer and return the completed form to:

Charlotte Christian School • Admissions Office
7301 Sardis Road • Charlotte, NC 28270

Applicant's Full Name - Last

First

Middle

Applying for Grade

Address

City

State

Zip

Using paragraph form of three or more sentences, please complete each of the following:

1. My favorite class in school is _____
because...
2. My greatest academic challenge is...
3. My friends might describe me as...
4. My teachers might describe me as...
5. Why do you want to attend Charlotte Christian School?

