STUDENTS MUST COMPLETE THIS QUESTIONNAIRE WITHOUT ASSISTANCE.

(PLEASE HANDWRITE)

(Please print) Last Name First Middle

In which subjects do you excel? ____________________________________________

In which subjects do you feel you need help? _________________________________

How many hours a week do you spend on required homework? __________________

Please list your current math level: ________________________________

IN THE ACTIVITIES LISTED BELOW, PLEASE NOTE LEVEL OF INTEREST AND INVOLVEMENT IN THE LAST TWO YEARS. BE AS SPECIFIC AS POSSIBLE.

Art _________________________________________________________________________

Drama _______________________________________________________________________

Athletics ____________________________________________________________________

Music ________________________________________________________________________

Computers __________________________________________________________________

Travel ______________________________________________________________________

Other group activities (clubs, scouts, church, etc.) ______________________________

PERSONAL PREFERENCES:

Favorite music groups: (list top three) __________________________________________

TV programs/movies: __________________________________________________________

Athletic teams: ______________________________________________________________

Hobbies: _____________________________________________________________________

Last book you read for pleasure: _______________________________________________

Home church: __________________________________________________________________

Pastor or Youth Group Leader: ________________________________________________

Attendance at your church: _____Regular _____Occasional _____Infrequent _____Never

OTHER:

Responsibilities at home (include volunteer and service work): ______________________

____________________________________________________________________________

____________________________________________________________________________

____________________________________________________________________________

(over)
Positions of leadership or responsibility that you hold in your school, church, or community:
____________________________________________________________________________________
____________________________________________________________________________________

What positive character traits would you list about yourself? _________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

What character traits do you feel need improvement? ______________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

How would your teacher describe you as a student in the classroom? __________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

What gives you a sense of accomplishment? _______________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

What do you think a Christian is? Who do you think Jesus is? ________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

Do you personally desire to attend The King’s Academy? _____Yes _____No
(Please explain) ________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

What are your reservations about attending The King’s Academy?
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________