

MARSHALLTOWN CHRISTIAN SCHOOL

BOARD OF EDUCATION CANDIDATE APPLICATION

Name \_\_\_\_\_ Family Size \_\_\_\_\_

Address \_\_\_\_\_ Children's Ages \_\_\_\_\_

Schools They Attend \_\_\_\_\_

Church Affiliation \_\_\_\_\_ How Long \_\_\_\_\_

Does the Nominating Committee have permission to visit with your pastor? \_\_\_\_\_ If so, pastor's name \_\_\_\_\_

Are you currently involved actively in your church? \_\_\_\_\_

How are you involved? \_\_\_\_\_

Are you a born-again Christian? \_\_\_\_\_ If so, how long? \_\_\_\_\_

Why are you sending your child(ren) to MCS? \_\_\_\_\_

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What is your personal philosophy regarding Christian education?

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If you agree with the enclosed MCS Statement of Faith, please sign and return with application.

Do you believe MCS is meeting all your children's needs? \_\_\_\_\_

If not, please comment: \_\_\_\_\_

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Have you been actively involved in the school as a parent? \_\_\_\_\_

How? \_\_\_\_\_

