



Anchorage Christian Schools

Preschool • Elementary • Junior High • Senior High • Learning Center

Student Questionnaire

1. Name _____ Nickname _____

2. Age _____ Date of Birth _____ Grade entering _____

3. What do you like to do in your free time? _____

4. Who are your heroes? _____

5. Where do you see yourself in ten years? _____

6. Have you ever done something you regretted? _____

7. What are you most proud of? _____

8. Tell me about your family. _____

9. What is your favorite subject in school? Why? _____

10. What is your least favorite subject in school an why? _____

11. Who was your best teacher ever and why? _____

12. Do you play a musical instrument? _____

13. Are you interested in playing on an athletic team? If so which ones? _____

14. Why do you want to come to ACS? _____

15. Do you have any questions about this school? _____

16. What do you value most in life? _____

17. Tell me about your relationship with Jesus Christ. _____

18. What do you believe about the Bible? _____

19. What is important to you about your Christian faith and why? _____

20. What church do you attend? _____

21. How often do you attend your church? _____

22. Is it your personal desire to attend ACS? Why or why not? _____

Student Signature _____ Date _____