



Student Questionnaire for Resident Admissions

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Please answer the following questions in your own handwriting.

Describe your family. What is your relationship like with your parents and brothers or sisters? What activities do you do as a family?

Describe yourself. How would a friend describe you? How would an adult describe you? What kinds of things do you like and dislike?

Describe your friendships. Are you a leader or a follower?

How well do you relate to those in authority over you?

What single event has had the greatest impact on your life? How has it affected you?

Tell us about your family's religious beliefs and practices.

What is your understanding of the Christian faith? What do you think it means to live in a Christian community?

Please read Ben Lippen School's **Statement of Faith** and answer the following questions:

I understand and agree that as Ben Lippen is a Christian school, I will regularly be required to attend the following: Y N

- Sunday morning church at an evangelical church
- Weekly small groups and Bible study
- Bible classes during school (required every semester)
- Weekly chapel service during school

It is also expected that if you currently use nicotine, alcohol, or other substances, you will discontinue use before enrolling at Ben Lippen School.

Based on the above, do you have any concerns about living in a Christian community?

Student Signature

Date

Printed Name