

First Assembly Christian School

**NEW STUDENT APPLICATION
K5-12TH GRADE**

First Assembly Christian School is dedicated to preparing our children academically, spiritually, and emotionally to be all that God wants them to be.

We strongly believe that parents are the ultimate educators and are responsible to God for the education of their children. It is our goal at FACS to help our parents with that responsibility by offering skilled teachers who lovingly teach the children; Christian based and academically sound curriculum, Bible training, and an emphasis on Christian character.

Please read all the information in this Application Packet, and sign all of the appropriate forms. Notice the medical form must be notarized in order to be acceptable to medical authorities. When all forms are completed you may turn in the application materials, and we will set up an appointment for an interview. Again thank you for considering FACS, and we look forward to ministering to you and your family.

Laborers Together,

First Assembly Christian School

Brad Strother, Principal

Application Steps:

- 1. Read all materials.**
- 2. Fill out all information**
- 3. Sign all forms**
- 4. Turn in materials**
- 5. You will be contacted for an interview**

If a decision is made to enroll you will need:

- 1. Immunization certificate**
- 2. Student SSN**
- 3. Birth Certificate**
- 4. If K-5 or 6th Grade a second dose of measles certificate**

With in the first week of school

Parent to KEEP the first 5 pages for your records

Tuition payments do not include the cost of books or supplies.

Book fee: A book fee is charged to cover the cost of the majority of textbooks, workbooks, and teaching material that a student will need during the school year. The book fee is due at the time of registration. Book fee is subject to change from year to year. This is due in May of each year. 8th grade SAT fee is included in book fee, as well as 9th – 12th grade ACT fee.

Supplies: Some classes or grades will be given a list of supplies that should be brought by the student on the first day of school. (Bible, crayons, pencils, etc.)/ or a supply fee is charged and the teacher will purchase.

Registration fee: \$100.00 – 1 fee per family due in March or (due when student is re-enrolled)

<u>Annual Book fee:</u>	K2	\$ 20.00	copy fee for reproducible
	K-3	\$ 60.00	
	K-4	\$ 95.00	
	K5 – 6 th Grades	\$125.00	
	7 th -12 th Grades	\$200.00	

Effective fall 2011 new tuition rates will apply

Tuition: K2 & K4 \$245 per Child for 12 months (you provide your child's lunch)
(This is a Daycare and does not necessarily follow the school calendar)

K5-12th grade for 12 months OR payment for 10 months

1 st child \$150.00	**	1 st child \$180.00
2 nd child \$140.00	**	2 nd child \$170.00
3 rd child \$130.00	**	3 rd child \$160.00
4 th child FREE	**	4 th child FREE

Before School Care: \$25.00 per month (6:30 a.m. – 7:40 a.m.)

After School Care: \$50.00 per month (3:00 p.m. – 5:15 p.m.)

(Rates are per child – Afternoon Snack is provided by the student for K5-6th grade)

Effective fall 2009

NO Childcare will be provided on days the school is closed for holidays.

Keep this for your records

PHILOSOPHY OF CHRISTIAN EDUCATION

The Christian school recognizes that the God-given responsibility for the education of children rests with the parents (Deuteronomy 6:6-9). The place of the Christian school is being an extension of the Christian family and should assist and complement the parents in that responsibility. Therefore, the purpose of the Christian school is to provide a school for Christian children or children of Christian parents.

The Bible is the foundation for the education of our children. From the Scriptures we understand that God desires certain principles, beliefs and values to be developed in our children. These include:

1. The view that all knowledge is to be interpreted from a Biblical perspective. All academic subjects are to be taught with an understanding of the absolute standards of truth that God has established.
2. Respect for authority (Romans 13:1; Hebrews 13:17). One's view of authority directly influences his concept of God.
3. The meaning of true success and how it is achieved (Joshua 1:8); Proverbs 22. The key is for each person to discover what God's will is for himself, and then to do it through developing the traits that are good and correcting those that are not.
4. The personal acceptance of Jesus Christ as Lord and Savior (John 3:3). Salvation is essential for success in any area of Christian education.
5. Respect for the rights of others (Luke 6:31). Following the Golden Rule helps improve relationships.
6. Personal integrity (Psalms 1:1-2; Ephesians 4:29). Honesty and truth are to be upheld at all times.
7. Productivity and the desire to always do one's best (Ecclesiastes 9:10; II Timothy 2:15). A healthy work ethic has application in so many areas of life.
8. Personal conviction and Christian witness (James 4: 17; Matthew 5:16; 28:19-20). Being willing to take a stand for the cause of right and declare the Gospel of Jesus Christ in word and deed is much needed in today's world.
9. Holding to the traditional family structure (Genesis 2:24). God's plan for the family is still one man and one woman for one lifetime.
10. Moral purity (I Corinthians 3:16-17; 6:19-20). Since our bodies belong to God, we must refrain from any act that would defile or degrade them, and maintain personal health and hygiene in order to strengthen them.
11. Patriotism (Romans 13:6-8). Love and respect for America and those who have sacrificed to preserve our freedom is the duty of each one who lives in a nation so blessed of God. This attitude coupled with prayer for our country (II Chronicles 7:14) is vital to keeping our nation strong.

It is, therefore, the goal of the Christian school to teach and support these principles, beliefs and values in our role as an extension of the Christian family in the process of educating our children.

Statement of Faith

We believe and teach that the Bible, both the Old and New Testaments, is the inspired, the only infallible, authoritative, inerrant Word of God (II Timothy 3:15; II Peter 1:21).

We believe and teach that there is one God, eternally existent in three persons (Father, Son, and Holy Spirit) who created man by a direct immediate act (Genesis 1:1; 26-27; Matthew 28:19; John 10:30).

We believe and teach the deity of the Lord Jesus Christ (John 10:33); His virgin birth (Isaiah 7:14; Matthew 1:23; Luke 1:35); His sinless life (Hebrews 4:15; 7:26); His miracles (John 2:11); His vicarious and atoning death (I Corinthians 15:3; Ephesians 1:7; Hebrews 2:9); His bodily resurrection (John 11:25; I Corinthians 15:4); His ascension to the right hand of the Father (Mark 16:19); His personal return in power and glory (Acts 1:11; Revelation 19:11).

We believe and teach in the absolute necessity of regeneration by the Holy Spirit for salvation because of the exceeding sinfulness of human nature; and that men are justified on the single ground of faith in the shed blood of Christ and that only by God's grace through faith alone are we saved "John 3:16-19; 5:24; Romans 3:23; 5:8-9; Ephesians 2:8-10; Titus 3:5).

We believe and teach the resurrection of both the saved and the lost; that they that are saved unto the resurrection of life, and they that are lost unto the resurrection of damnation (John 5:28-29).

We believe and teach the spiritual unity of believers in our Lord Jesus Christ (Romans 8:9; I Corinthians 12:12-13; Galatians 3:26-28).

We believe and teach the present ministry of the Holy Spirit by whose indwelling and infilling the Christian is enabled to live a godly life and witness to the saving grace of Christ (Acts 1:8; Romans 8:13-14; I Corinthians 3:16; 6:19-20; Ephesians 4:30; 5:18; Titus 2:11-14).

Immunization Requirements

IMPORTANT NOTICE

Parents must submit all immunization forms and birth certificates to the office within 7 days of receiving you notification of acceptance. A student is not officially enrolled without receipt of these documents.

All students must have **BLUE IMMUNIZATION FORMS**. In addition, all students entering K-5, 6th Grade or 12th Grade must obtain a **PINK IMMUNIZATION FORM** (for measles vaccination). We must also have copies of birth certificates and social security numbers on file before students can attend class. **PLEASE DO NOT OMIT SOCIAL SECURITY NUMBER ON THIS APPLICATION.**

Students entering 1st Grade must bring an **ORIGINAL CERTIFIED COPY OF THEIR BIRTH CERTIFICATE.**

Again, the school office must receive **ALL** of the above documents within 7 days of acceptance notification.

Kindergarten – 3

Four (4) Doses of DTP (diphtheria/tetanus/pertussis)
One (1) dose of MMR (measles/mumps/rubella)
Three (3) doses of Polio Vaccine
Haemophilus Influenza Type B (Hib)
Varicella (Chicken Pox) or has had the virus

Kindergarten – 4 & 5

Five (5) Doses of DTP (diphtheria/tetanus/pertussis)
Two (2) Doses of MMR (measles/mumps/rubella)
Four (4) Doses of Polio Vaccine
Haemophilus Influenza Type B (Hib)
Varicella (chicken pox) ~ or has had the chicken pox

First – Twelfth Grades

All of the above
TD (diphtheria/tetanus) Booster Every Ten Year

The school must have an original copy of the “Blue Slip” in your child’s permanent record. You can call the school to obtain expiration dates.

ENROLLMENT APPLICATION

FACS does not discriminate based on race, sex or national origin. However, we do have restrictions based on Christian beliefs and lifestyles as described in our policies and handbook.

Date of application _____ Grade applying for _____

Parent/Guardian Information:

It is very important to keep this information updated and current.

Student Information

Last Name _____ First Name _____

Middle Initial _____ Goes by _____ Age _____

Social Security # _____ Birthday _____

Male _____ Female _____ Grade last completed _____

Street _____ City _____ Zip _____

Home Phone _____ Cell Phone _____

Mom Work Phone _____ Dad Work Phone _____

Who to call if child is sick _____ Phone Number _____

Parents Name: Mother _____

Father _____

Email: _____ @ _____

In case of emergency contact:

Name _____ Relationship _____

Home phone _____ Work phone _____

Cell phone _____ Cell phone _____

Pick Up Authorization:

List any other persons who are authorized to pick up your child from school. No one will be allowed to pick up your child unless they are on the pickup list or you have given the teacher written permission. Picture I.D. will be checked on anyone the teacher/office is not familiar with.

_____ Phone _____

_____ Phone _____

_____ Phone _____

Educational Information:

Mailing address of most recent school _____

City _____ State _____ Zip _____

Has the student ever repeated a grade? _____

If yes, which grade _____ Explain the reason _____

Does this student have any physical or emotional problems, which require special medication or attention? _____ If yes, please explain _____

Has the student ever been suspended or expelled from school? _____

Please describe the nature of any previous discipline problems. _____

Do you have any outstanding balances at another school? _____

Christian Background Information:

Which best describes the parent's church attendance?

___Active in church ___Attend occasionally ___Attends Sunday School

Do you consider your home a Christian home? _____

Have you received Jesus Christ as your personal Lord and Savior?

Father: yes ___ no ___ Mother: yes ___ no ___ Guardian: yes ___ no ___

Which church do you attend? _____

Pastor's name _____ Church phone # _____

Does your family attend church together? ___ If not, please explain _____

Pastor's Reference:

Church _____

Pastor _____

Dear Pastor,

_____ has applied for acceptance into First Assembly Christian School. In that we require all students to be actively serving the Lord in a local Bible-believing church, would you please answer the following questions?

1. Does the student attend your church on a regular basis? _____
2. In your opinion, is the student a born-again Christian? _____
3. Would you recommend this student to First Assembly Christian School? _____

Pastor's Signature

This page should be completed before turning in the application

FACS FINANCIAL POLICY (Please read carefully)

REGISTRATION: An annual registration fee is charged to each family at FACS. For both returning and new students, the fee is \$100.00 per family.

*New student registration fee is due with application and non-refundable.

**Returning students must submit the registration fee with their re-enrollment applications. This fee is non-refundable and non-transferable except under the following conditions:

1. Student moves out of the area before August 1.
2. Based on the results of the entrance test, FACS administration decided student would not function well at FACS.
3. Space is unavailable in the class.

BOOK FEE: A book fee is charged to cover the cost of textbooks, workbooks, updated teaching material for the school year. For pre-registered students, the fee is due by May 1 for the following school year. For students who register after May 1, the book fee is due upon admission. Books cannot be ordered for any student until the book fee has been paid.

TUITION: FACS annual tuition for K5-12th grade is \$1500.00 per year and is payable in 10 equal payments. The first payment is due June 1 and the remaining payments are due on the first of each month from August through May. If the June tuition is not paid by **June 10**, the student's place in class may be cancelled.

Students attending one day or more of any month will owe the full tuition for that month.

Tuition is due on the 1st of each month and is considered late if paid after the 10th. All tuition accounts carried past the 25th of the current month for which tuition is due will be charged a \$25 late fee. Also, a \$20 check fee will be charged to any account whose check is returned by the bank. If two checks are returned, the account is automatically placed on a cash or money order basis.

Permanent records will not be released to any school until the student's account is paid in full. No student will be admitted for the following school term if there is a balance due on the student's account.

Tuition and other fees may be paid in the school office, placed in the drop box or mailed to First Assembly Christian School, PO Box 697, Ashland, AL 36251

Please sign below to indicate that you have read this sheet and will abide by the financial policies outlined above.

A student will not be admitted to class if any account balance is more than thirty days past due unless special arrangements are made and approved by the principal. No student will be admitted for the following school term as long as there is a balance owing on the student's account.

"I have read the above financial policy statement and agree to the terms thereof."

Parent/Guardian Signature

Date

STUDENT DISCIPLINE PROFILE

NAME: _____

It is our desire to discipline your child in the best way for them. It is as we build loving relationships with your child that we are able to best teach them. Are there any behaviors you could list that would help us understand your child?

1. _____

2. _____

3. _____

Parents usually know best what type of discipline their child best responds to. So we may best discipline your child, number the types of discipline below from (1) being the most effective to (10) being the least effective.

___ Time Out ___ Isolation ___ Paddling ___ Writing Sentences

___ Removal of a Privilege ___ Talking to them Calmly

___ Speaking to them Firmly ___ Telling them you are Disappointed

___ Calling Parents ___ Being sent to the Principal

This information will be kept in your child's confidential file, and will be seen only by my secretary, your child's teacher, or the principal/administrator. We thank you for helping us minister to your child.

Copy to Teacher

Student's Medical History

1. Does your child have any allergies (medication, food, other)? _____

2. List any medications your child is presently taking. _____

3. Does your child have any handicaps or limitations (including speech, hearing, vision, coordination, learning, ADD, etc.)? _____

4. Is there any other information regarding your child's physical, mental, or Emotion State that you would like to share? _____

Give Copy to Teacher

**First Assembly Christian School
Trip Permission to Participate and Medical Release Form**

This form must be completely filled out, signed by the parent/guardian and given to the teacher in charge of the trip or event. **NO STUDENT WILL BE ALLOWED TO GO WITHOUT THIS FORM.**

Name of Student: _____

Class/Group: **All Class trips and sport activities.**

Date of Trip: **Blanket coverage from my enrollment date until I graduate/or leave FACS**

PERMISSION TO PARTICIPATE

As parent/legal guardian of the above named student, I hereby grant permission for their participation in the trip planned for the date and destination indicated. I further release the First Assembly of God, Administrator, Teachers, Leaders, Staff, or Chaperones from any claim of liability incurred while on this trip.

Signature of Parent/Legal Guardian: _____

MEDICAL RELEASE

As parent or legal guardian of the above named student, I do hereby authorize the teacher, leader, person, or person's action as chaperones to acquire emergency medical treatment if needed for my child while he/she is participating in this school sponsored event. I further grant permission to any qualified medical personnel and/or medical facility to render such medical treatment as is judged to be reasonable and necessary in the event of injury or illness. I further agree to be totally responsible for the payment of any charges incurred in the treatment of the person named on this form. In signing this form I am indicating that I understand this agreement and that permission is granted. Medications my child is allergic to and should not take:

My child has this medical condition: _____

Are there special instructions while on field trips?

NO YES

If YES please specify: _____

My Medical Insurance Company is: _____

My Medical Policy Number is: _____

Home Phone _____ Work Phone _____ Emergency _____

Signature of Parent/Legal Guardian

Date

Copy to Teacher

CHURCH SCHOOL ENROLLMENT FORM



SCHOOL: First Assembly Christian School
Post Office Box 697
Ashland, Alabama 36251 256-354-4090

DISTRICT: Clay County

I. TO BE COMPLETED BY PARENT OR GUARDIAN

STUDENT NAME: _____ **GRADE** _____

HOME ADDRESS:

PHONE: _____ **DATE OF BIRTH:** _____

PARENT/GUARDIAN SIGNATURE _____ **DATE** _____

II. TO BE COMPLETED BY CHURCH SCHOOL ADMINISTRATION.

SCHOOL: FIRST ASSEMBLY CHRISTIAN SCHOOL
POST OFFICE BOX 697
HIGHWAY 9
ASHLAND, ALABAMA 36251
256-354-4090

FACS _____ **DATE OF ENROLLMENT:** _____

ADMINISTRATION SIGNATURE _____ **DATE** _____

III. CONSENT FOR NOTIFICATION OF STUDENT WITHDRAWAL

I hereby give prior consent to the principal of FIRST ASSEMBLY CHRISTIAN SCHOOL church school to notify the public school superintendent should the above named student cease to attend at said school. **DATE OF WITHDRAWAL:** _____

PARENT/GUARDIAN SIGNATURE _____ **DATE** _____

PARENT AGREEMENT FORM

This form is very important

I hereby certify that I have read The Student Handbook, Application Form, the Admissions Policy, the Financial Policies, the Tuition Schedule, Consent for Medical Treatment, Philosophy of Education, and the Statement of Faith, and I do agree to comply with the terms, conditions, and/or beliefs stated therein, and furthermore accept the conditions and requirements of all other official policies and procedures of First Assembly Christian School, including the payment of all fees and charges according to the published schedule of the School.

Father's Signature

Date

Mother's Signature

Date

Guardian's Signature

Date

If the student is enrolling in Grades 5 & up, student must sign.

Student's Signature

Date

I have read all parts of this application carefully, and certify that all information I have given is accurate. I understand that my child is not accepted until I have received official notice from the school Administrator.

Father's Signature

Date

Mother's Signature

Date

Legal Guardian's Signature

Date

CONSENT FOR MEDICAL TREATMENT

Students Name _____

In the event that my child (ren) become (s) ill or is injured while under school supervision, I approve FACS authorities to take the following steps:

1. If only a minor illness or injury, administer the appropriate general medications.
Notice: We will administer only Tylenol, Advil, or general first aid only. See the student handbook regarding prescription medications.
2. If the illness or injury is more serious, contact a parent, legal guardian or a person I have listed as an emergency contact and follow his or her instructions.
3. In an event of an emergency when a parent, guardian or emergency contact cannot be reached immediately, the school authorities are hereby authorized to use their best judgment in contacting a properly licensed physician or in transporting my child to the nearest hospital for consultation and/or treatment. Such transportation is to be done either by School provided transportation, or if the School authorities deem it-wise, by ambulance at my expense.

For information only, the name of my child's physician is _____

And his/her telephone number is _____.

If, in the opinion of a properly licensed and practicing physician, my child needs medical or surgical services which require my consent before being supplied, and I cannot be reached, I hereby authorize, appoint, and empower the Administrator or his representative to furnish on my behalf such written or oral authorization as may be so required.

Furthermore, I release the Administrator or his designed representative, and the First Assembly Christian School, First Assembly of God or First Assembly of God officers from any liability which might arise as a result of medical services and/or treatment provided by any hospital or physician pursuant to such authorization, it being my desire that my child be furnished with such medical or surgical services as soon as possible after the need arises, I agree to be responsible for any cost of medical services and/or treatment of my child (ren) as a result of the above authorization and agree to indemnify and hold harmless the First Assembly Christian School, the Administrator or his representative, or First Assembly of God or her officers from any expense incurred for said treatment and/or services.

Father's Signature

Date

Mother's Signature

Date

Legal Guardian's Signature

Date

Notary Signature

Date

Copy to Teacher

AFFIDAVIT OF PARENT OR GUARDIAN

STATE OF ALABAMA

COUNTY OF CLAY

Before me, Notary Public in and for said state and County, appeared

_____ who is known to me, and who after being duly sworn or affirmed by me, says as follows:

Affiant is the parent or legal guardian of the minor child/children

Affiant has been notified by a representative of First Assembly Christian School, that said First Assembly Christian School has filed notice that said First Assembly Christian School is exempt under law from regulation by the Department of Human Resources.

Parent/Legal Guardian

Sworn of affirmed to and subscribed before me this _____ day of

_____ 20 _____.

Notary Public