

FORMS NEEDED--RETURNING 1st Student

Please complete and return all forms, information on the checklist, and enrollment fees to the school office.
ALL FORMS MUST BE COMPLETED AND RECEIVED BY THE SCHOOL TO COMPLETE ENROLLMENT.

STUDENT NAME: _____

_____ Reenrollment Application

_____ Standard of Conduct

_____ Parental Permission

_____ Parent/School Agreement

_____ Emergency Medical Release

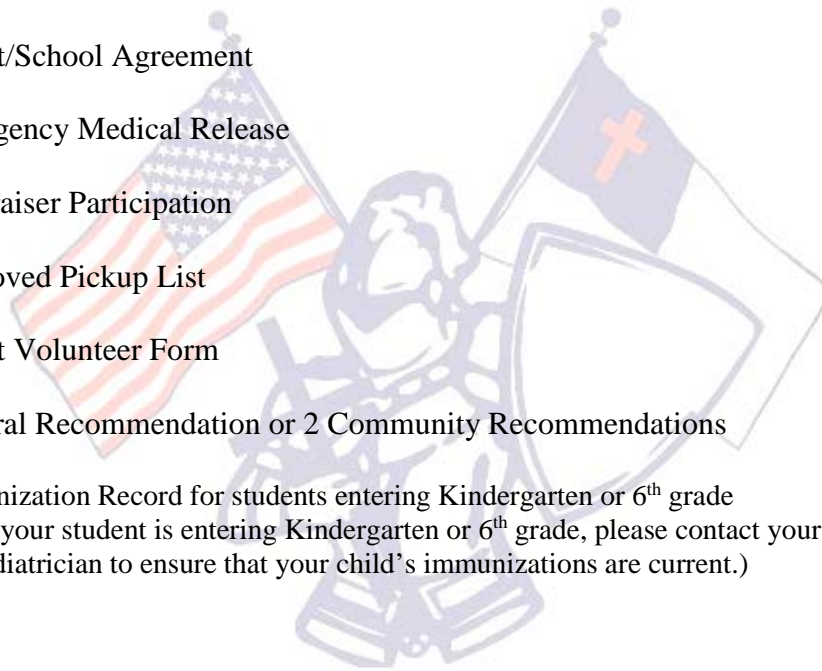
_____ Fundraiser Participation

_____ Approved Pickup List

_____ Parent Volunteer Form

_____ Pastoral Recommendation or 2 Community Recommendations

_____ Immunization Record for students entering Kindergarten or 6th grade
(If your student is entering Kindergarten or 6th grade, please contact your pediatrician to ensure that your child's immunizations are current.)



Grace Christian Academy

Dr. Emma L. Allen/Founder
Tim D. Allen/Principal

1705 Access Road
Covington, Georgia 30014

Phone: 770-385-7390
Fax: 678-212-0363

Website: www.gcacovington.org
Email: info@gcacovington.org

Reenrollment Application

Application Date: _____

Student Information

Full Name _____

Address _____

City _____ State _____ Zip _____

Home Telephone _____ Email _____

Age _____ Gender _____ Birth Date _____ Grade into which reenrolling _____

Family Information

Father's Name _____

Employment _____

Business Phone _____ Cell Phone _____

Mother's Name _____

Employment _____

Business Phone _____ Cell Phone _____

Step-Parent _____

Employment _____

Business Phone _____ Cell Phone _____

Marital Status: Married _____ Widow _____ Divorced _____ Separated _____

Church Attending _____

Pastor _____ Phone _____

This application must be filled out completely before it can be processed. Enrollment fees must accompany this application and are nonrefundable.

Grace Christian Academy has a racial nondiscriminatory policy and, therefore, does not discriminate against members, applicants, students, and others on the basis of race, color or national or ethnic origin.

"I hereby pledge to pay my financial obligation to the school on the due date and understand that it may be necessary to withdraw my student if proper arrangements are not made on a past-due account.

"I appreciate the standards of the school and do not tolerate profanity, obscenity in word or action, dishonor to the Godhead and the Word of God, or disrespect to the personnel of the school. I hereby agree to support all regulations of the school in the applicant's behalf and authorize this school to employ discipline it deems wise and expedient for the training of my student.

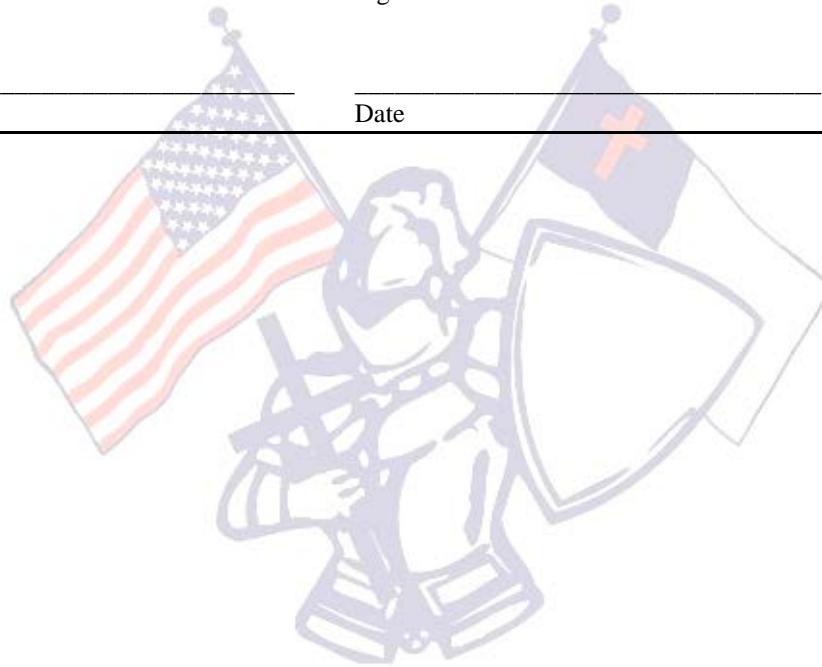
"I understand that the school reserves the right to dismiss any student who fails to comply with the established regulations and discipline or whose financial obligation remains unpaid."

Signature of Father

Signature of Mother

Date

Date



STANDARD OF CONDUCT FORM

Student's Name _____ Age _____ Grade _____

The student's attitudes, conversation, and behavior reflect the character of the institution from which he derives his training. This form reflects the Educational Ministry's attempts to secure students who would best adjust to the rigor of a highly disciplined training program which must set high standards. These standards will result in a characterized student to lead in reformation for our nation and the world.

We ask that each student honestly answer the following questions:

Do you attend church regularly? _____

Where do you attend church? _____

Do you accept the Bible as God's Word and submit yourself to its principles as a final authority? _____

Do you sincerely pledge allegiance to the Christian and American flags? _____

Do you use tobacco products of any kind? _____ Have you ever used tobacco products of any kind? _____

Do you use or have possession of narcotics? _____ Have you in the past? _____

Are you a member or contributor to any website or social networking site (I.E. Facebook, etc.)? _____

If you answered "yes" to the previous question, please list the addresses to ALL websites and forums of which you are a member, owner, or contributor:

Have you ever run away from home? _____ How long ago? _____

Will you promise not to draw, wear, or display in any way any anti-Christian symbols? _____

Will you agree to abide by the dress code of the Educational Ministry while at the School or on any sponsored activity? _____

Boys: Will you agree to keep your hair neatly trimmed according to the school code and be clean shaven? _____

Will you agree to keep all facial hair shaved? _____

Girls: Will you agree to use makeup and wear jewelry in good taste? _____

Will you agree to keep all the rules and respect all authorities without being critical and finding fault? _____

Have you read the Handbook for the Education Ministry? _____

Do you want to attend this school? _____

Why? _____

General Policy:

Students are expected to abide by these standards of conduct throughout their enrollment. Students found to be out of harmony with the Educational Ministry's ideals of work and life may be invited to withdraw whenever the administration determines that it is necessary.

As a student of the Educational Ministry, I pledge to uphold the standards against cheating, swearing, backbiting, smoking, gambling, dancing, drinking alcoholic beverages, using or talking favorably about narcotics, using indecent language, viewing or talking about questionable movies, lying, and using profanity. I will act in a very orderly and respectful manner and will maintain the standards of courtesy, kindness, morality, and honesty. I will strive to be of unquestionable character in dress, conduct, and other areas of life.

I agree to abide by the above standards of conduct and other regulations expected of each student enrolled in this Educational Ministry while I am a student attending the Educational Ministry and will not give the impression to students, parents, or faculty that I am not in harmony with the goals, aims, and standards of the Educational Ministry.

Date _____ Student's Signature _____

Father's Signature _____

Mother's Signature _____

PARENTAL PERMISSION

We hereby give permission for our children to participate in all activities of Grace Christian Academy, both on and off the premises. We further grant permission to the staff of Grace Christian Academy or a designee thereof to transport our children to and from school functions. We also agree not to hold the school or staff responsible for personal injury.

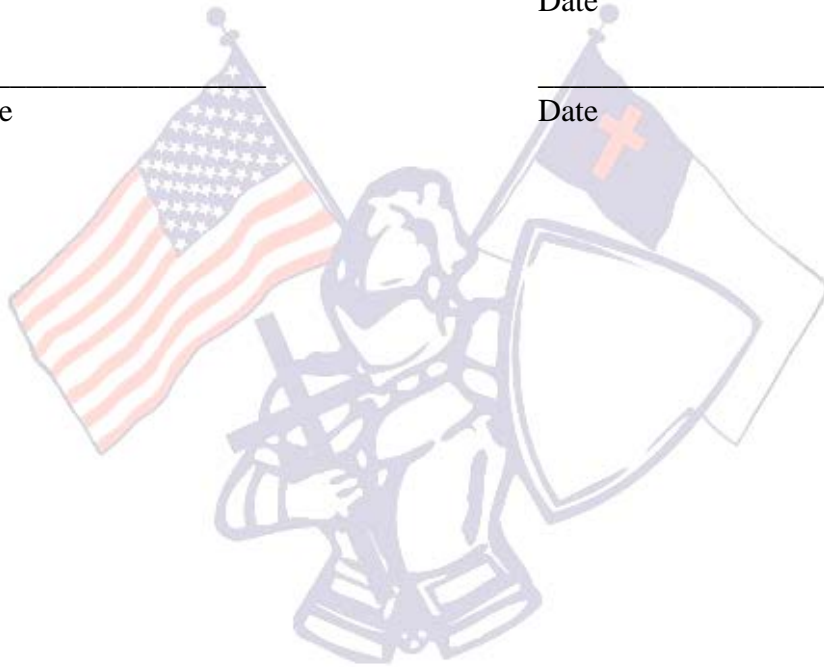
We hereby promise to uphold Grace Christian Academy to our children and to insist that they adhere to all rules and regulations specified in the handbook. We give the Grace Christian Staff permission to discipline our children in a suitable, Biblical manner.

Father's Signature

Date

Mother's Signature

Date



PARENT/SCHOOL AGREEMENT

In order to solemnify the desire of the undersigned parties to glorify the Lord with their obedience to Him and to promote a clear understanding of the duties and responsibilities of each party, the undersigned parties adopt the following agreement:

I, _____, for and in consideration of my child(ren), _____, being admitted as a student at Grace Christian Academy, do hereby accept such admission and the duties and responsibilities entailed therein and agree to be bound by the terms of this Agreement:

1. I subscribe without reservation to the Doctrinal Statement and the Standards of Conduct of Grace Christian Academy and agree that my family will abide by these standards in all aspects of our lives, both at and away from school ministries and functions. I am a member of _____ Church, faithfully attending services and taking an active part in the total church program.

2. I have read and understand the Student Handbook and I agree with it completely. I agree that my child must abide by all of the policies, rules, and regulations of the school, including those listed in the Student Handbook, and I agree to support Grace Christian Academy with my prayers.

3. I understand and agree that the education of my child will be guided by the instructors and other school officials. I agree that my purpose in obtaining a Christian education for my child will be achieved by following the curriculum set by the instructors. To that end, I agree that I will require my child to perform all duties and responsibilities entrusted to him by the instructors or school officials to the best of his ability to their satisfaction. I understand and agree that during my child's enrollment the courses offered and the instructors teaching them may change from time to time in the discretion of school leadership.

4. I understand and agree that my child has no right to publish and distribute a student newsletter or any other publication. I understand and agree that Grace Christian Academy, has the right, in its sole discretion, to control what is published, circulated, or otherwise distributed at its school to its students or staff, and I will ensure that my child understands this provision.

5. I understand and agree that attending Grace Christian Academy is a privilege and the school reserves the right to suspend or expel my child from the school for just cause, as determined by the school. Notwithstanding anything to the contrary contained herein, this Agreement does not bind either party to any specific period of enrollment. Either party may terminate this Agreement without cause upon seven days written notice.

6. As I am a Christian and Grace Christian Academy is a Christian Ministry, both parties agree that they would never make demands, threaten to sue, or actually litigate any matter whatsoever relating to or resulting from this Agreement. To do otherwise, would be in clear violation of Biblical teaching and practice.

7. I certify that I will explain this agreement and its meaning to my child. I will assist the school in every way necessary to ensure my child abides by all the terms of this agreement.

The Parties have executed this Agreement on the _____ day of _____, 20_____.

Parent 1

Parent 2

I understand this agreement and its content and agree to abide by its terms and all rules which apply to students.

Student 1

Student 2

ACCEPTED AND APPROVED:

Principal

EMERGENCY MEDICAL RELEASE

I, _____, give my permission for an approved physician to administer emergency medical care to my child while they are with the school group from Grace Christian Academy, Covington, Georgia. I further give permission for the school staff to sign any emergency medical forms for my child.

The names of my child(ren) are:

My child is allergic to the following (drugs, insects, food, etc.):

My child is currently taking the following medications:
(Please list child's name, medication, and reason for medication.)

I grant permission to the personnel of Grace Christian Academy to give my child:

_____ Tylenol/Acetaminophen _____ Advil/ibuprofen _____ None

I relieve Grace Christian Academy and all personnel therewith connected of any liability in regard to any emergency medical care received.

Parent Signature

Emergency Contact: _____ Number: _____

Other emergency numbers are:

Mother's Work: _____ Mobile: _____

Father's Work: _____ Mobile: _____

Other: _____

This release will be effective: _____ through _____.

FUND RAISER PARTICIPATION

According to the G. C. A. Policy Handbook:

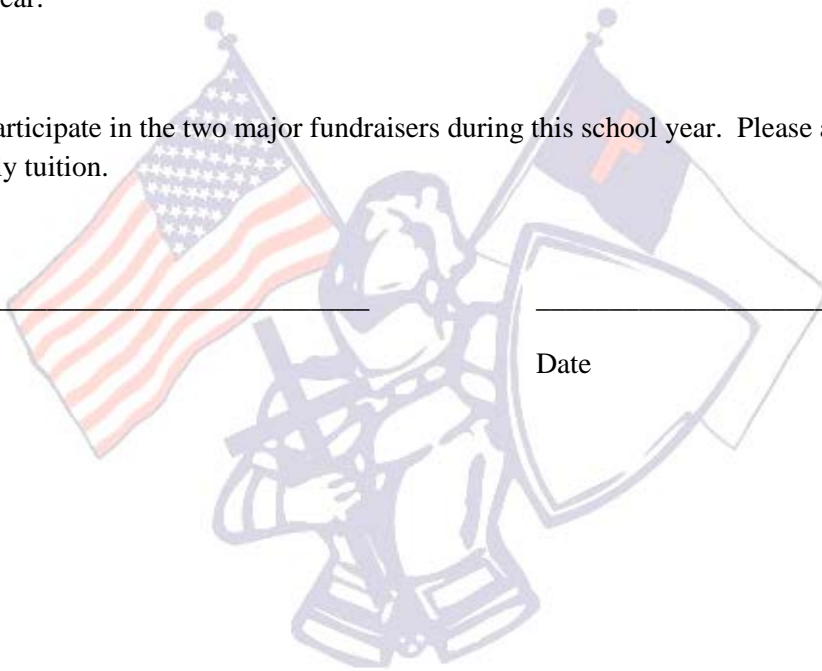
“Each student and parent is expected to participate in fund raisers throughout the year. To help maintain reasonable tuition costs, GCA asks that every family be involved in the two major fundraisers each year. Each family is responsible to raise \$200 for each of these fundraisers. Should a family choose not to be involved with the fundraisers, tuition cost for the family would raise \$40 a month. A participation form will need to be completed at enrollment or re-enrollment. Each parent is expected to support the school's total program.”

_____ I will support the GCA ministry by raising at least \$200 for each of the two major fundraisers during this school year.

_____ I will not participate in the two major fundraisers during this school year. Please add this cost to our family's monthly tuition.

Parent Signature

Date



I CAN BE A PARENT VOLUNTEER!!!

I, _____, am willing to help the school in the following areas:

_____ I hold a CDL license and would be willing to drive the bus occasionally.

_____ I would like to help organize class parties, special dinners, etc.

_____ I would be interested in assisting the elementary students with an art, music, or p.e. class once a week.

_____ I would like to help on the Fundraising Committee.

_____ I would like to help on the Yearbook Committee.

_____ I have experience with photography and could help students with projects.

_____ I have experience with sewing and/or needlework and could help students with projects.

_____ I have experience in the following areas and could be available to give assistance:
(Examples: woodworking, art, metal/clay sculpture, or another area that might be of interest to young people.)

_____ I can help the school in the following way:

Thank you all for the help you can give to this ministry. We hope that all of you will continue praying for our students as we all help to train them academically and spiritually.

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Dear Pastor,

The family listed below is seeking admission into Grace Christian Academy. It is our desire to maintain a student body that is actively seeking to keep Christ as the focal point of their entire lives. To this end we seek to accept students who are actively involved in a local, Bible-believing Church. We believe that Christian education is not one-dimensional but rather three-dimensional. It is vital to the character and moral standing of Grace Christian Academy that each student be under the authority of Christian parents who are concerned about their faithfulness to a local church body. It is our goal to provide for every student an environment that is consistent with his/her church and home. Together, the home, local church, and Christian school can provide a stable, Christ-centered environment in the three major dimensions of a young person's life.

To assist us in the acceptance process, please complete and return the following form to the address listed above. We ask for your candor, and we promise complete confidentiality. We consider each application prayerfully and seriously, and we ask that you grant this applicant an open and serious evaluation. Thank you for your help and honesty in this matter.

In His Grip,

Tim D. Allen
Principal

PASTORAL RECOMMENDATION

I, _____, Pastor of _____

Church do recommend the _____ family to Grace Christian Academy.

Please check the following areas in which this family is **faithful**:

<input type="checkbox"/> Sunday School	<input type="checkbox"/> Mid-week Worship
<input type="checkbox"/> Sunday Morning Worship	<input type="checkbox"/> Tithing
<input type="checkbox"/> Sunday Evening Worship	<input type="checkbox"/> Other Ministries _____

(Please explain)

Please detail any additional reasons that you recommend this family for consideration to Grace Christian Academy:

Please candidly list any conditions of which we should be aware that might prohibit the acceptance of this family:

Do you wholeheartedly and without reservation recommend this family to Grace Christian Academy? Y N

Signature

Date

Grace Christian Academy

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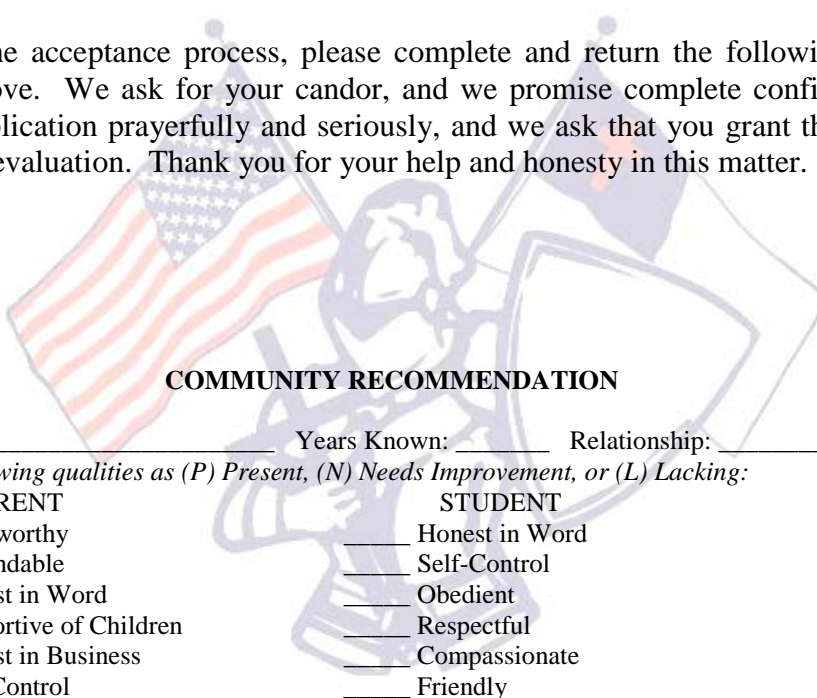
Dear Friend In Education,

The family listed below is seeking admission into Grace Christian Academy. It is our desire to preserve a student body that is actively seeking to maintain high moral and ethical standards. To this end we accept students only upon careful review of recommendations received. It is vital to the character and moral standing of Grace Christian Academy that we continue this tradition. The following recommendation should be a reflection of the student's character as well as the moral standing of the parents and family.

To assist us in the acceptance process, please complete and return the following form to the address listed above. We ask for your candor, and we promise complete confidentiality. We consider each application prayerfully and seriously, and we ask that you grant this applicant an open and serious evaluation. Thank you for your help and honesty in this matter.

In His Grip,

Tim D. Allen
Principal



COMMUNITY RECOMMENDATION

Family Name: _____ Years Known: _____ Relationship: _____

Please label the following qualities as (P) Present, (N) Needs Improvement, or (L) Lacking:

PARENT	STUDENT
_____ Trustworthy	_____ Honest in Word
_____ Dependable	_____ Self-Control
_____ Honest in Word	_____ Obedient
_____ Supportive of Children	_____ Respectful
_____ Honest in Business	_____ Compassionate
_____ Self-Control	_____ Friendly

Please detail any additional reasons that you recommend this family for consideration to Grace Christian Academy:

Please candidly list any conditions of which we should be aware that might prohibit the acceptance of this family:

Do you wholeheartedly and without reservation recommend this family to Grace Christian Academy? Y N

Signature

Date