

Student Name _____ Grade _____ School Year _____

Freedom Christian Academy Admissions Packet 2010-2011

Each student must have the following packet completed **BEFORE** the student is considered registered and admitted.

Admin.
Initials

- _____ Paid registration fee
- _____ Completed application forms
- _____ Copy of immunization record
- _____ Copy of Birth Certificate
- _____ Previous school records

Please keep this page attached to the application forms. It will serve as the cover page for all documentation. Thank you.

2010-2011
Continuing Student
Enrollment and Tuition Fees

CLASS	NON-REFUNDABLE REGISTRATION FEE	TUITION YEARLY	TUITION MONTHLY
Preschool: 2 day (T/TH)	\$150.00*	\$2,000.00	\$200.00
3 day (M/W/F)	\$150.00*	\$2,750.00	\$275.00
5 day (M-F)	\$150.00*	\$4,000.00	\$400.00
Kindergarten	\$150.00*	\$3,750.00**	\$375.00**
Grades 1 - 8	\$150.00*	\$3,750.00**	\$375.00**
High School Grade 9 and up	\$150.00*	\$4000.00**	\$400.00**
Curriculum Fee	Pre-K - \$50 Kindergarten - \$100 1 st – 6 th Grade - \$200 7 th -8 th Grade-\$300 9 th Grade & up: fee assessed per class		

**Contact the office on how you can raise student credit through
the Scrip program to pay for your curriculum fee for next year.**

Student's Name _____ Grade: _____

Discounts available:

- Multiple Students Discount
 ASCTO/Other Scholarship Program Recipient
 Single Tuition Payment Discount – 5% - MUST BE RECEIVED BY JULY 31,2010

Additional Students:

Name: _____ Grade: _____

Name: _____ Grade: _____

Name: _____ Grade: _____

Payment Method Desired:

Single Tuition Payment Monthly Tuition Payment

Acceptable Payment Method:

Cash Check Automatic Debit

NEW STUDENT APPLICATION
FREEDOM CHRISTIAN ACADEMY

Registration Number: _____ School Year: _____ Grade: _____

Student Name: _____ Date of Birth: _____

Address:

_____ Street address

_____ City State Zip Code

Phone Number: _____ City and State of Birth: _____

Parents/Guardians

Father's Name: _____ Mother's Name: _____

Address: _____ Mother's Address: _____
(If different from student) (If different from student)

City/State/Zip: _____ City/State/Zip: _____

Nearest Crossroads or Neighborhood Development name for possible carpool: _____

Home Phone: _____ Home Phone: _____

Cell. Phone: _____ Cell Phone: _____

Email Address: _____ Email Address: _____

Father's Occupation: _____ Mother's Occupation: _____

Employer: _____ Employer: _____

Business Phone: _____ Business Phone: _____

Church Background

Name of Church Attending: _____

Church Address: _____
Number and Street City/State Zip Code

Name of Pastor: _____ Phone Number: _____

Please write a brief statement concerning your belief in the Bible and the Christian faith:

Educational Background

Name of last school attended or attending: _____

School Address:

Number/Street

City/State

Zip Code

School Phone: _____ Grade Completed: _____

Has the student had:

Academic difficulty _____ Discipline Problems _____ Truancy problems _____

Absences due to illness _____ Difficulty with civil authorities _____ Special Education Services _____

Explain any "Yes" answers:

Describe your child's study habits:

How did you become interested in Freedom Christian Academy? _____

Please state briefly why you want your child to attend FCA: _____

Please list the name(s) and age(s) of any other children in the home: _____

Has there been any emotionally upsetting event in the home in the past three years; such as a death, a divorce/separation, a move? Yes _____ No _____ if yes, please explain: _____

Special Interests or hobbies you have as a family: _____

Freedom Christian Academy Statement of Agreement

Freedom Christian Academy is an inter-denominational school, a ministry of The Great Commission, Inc. Our purpose is to equip our students with the full knowledge and understanding of the Word of God and provide the highest standards of academics at all levels of learning.

The beginning of knowledge is the fear of the Lord; this is the standard by which our curriculum and staff are chosen as well as the mantel of our learning. And using this as the standard in educating our students, we recognize that we will give an account to our Lord and to you, the parents. A child's spiritual training is essential to the establishment of good habits of study and conduct, attitudes and ideals, and obedience to and reverence for our God.

Parents are accountable to God for the spiritual, intellectual and moral growth of their children. The purpose of a Christian school is to uphold the Christian values that parents establish in the home and to help mold each child's character to live fruitful Godly lives. Within the structure of such a rewarding task, our students are taught basic skills in all subject areas using the highest standards of academics and motivational techniques so every student may reach their maximum potential. They are also taught Biblical values and principles, belief in God and a love for people and country.

Parents choosing to enroll their children in Freedom Christian Academy will be in complete agreement and support of all areas in this Statement of Agreement as well as the policies as outlined in the Student Handbook.

In completing this application, I/We understand that:

1. **The Registration Fee is Non-Refundable and scholarships cannot be used.**
2. **Scholarships can be used for curriculum fees after yearly tuition is paid in full.**
3. All students receiving need-based scholarship funds will be applied to current school year only. Scholarship administration fee may apply to students receiving awards.
4. My/Our cooperation is expected in:
 - Prayer for FCA
 - Positive attitude in the home supporting FCA's Standards and policies
 - Compliance with all standards and policies
 - Regular monthly tuition payments
 - Participation in school fundraisers-raising a minimum of \$250 for the school year.
5. I/We, as set forth in the Statement of Agreement and the Freedom Christian Academy Student Handbook, accept the Standards and regulations of the Student Handbook.
6. **HIGH SCHOOL** students only (9th grade and up): I/We understand there will be an interview for re-enrollment for all high school students and their parents.

Father/Guardian's Signature Date _____

Mother/Guardian's Signature Date _____

Student Signature Date _____

Freedom Christian Academy
Statement of Agreement

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Freedom Christian Academy complies with the Resolution of Racially Non-Discriminatory Policy per Rev. Proc. 75-50, Section 4.01

Freedom Christian Academy admits students of any race, color, and national or ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at our school and does not discriminate on the basis of race, color, and national or ethnic origin in administration of our educational policies, admissions policies, scholarship and loan programs, and athletic and other school-administered programs.

EMERGENCY & MEDICAL INFORMATION

Student's Name _____ **Date of Birth** _____

MOTHER/GUARDIAN:

FATHER/GUARDIAN:

Name _____

Name _____

Address: _____

Address: _____

Home Phone: _____

Home Phone: _____

Work Phone: _____

Work Phone: _____

Cell Phone: _____

Cell Phone: _____

NAME, ADDRESS AND PHONE OF CLOSEST RELATIVE NOT LIVING WITH YOU:

Name: _____ Phone: _____ Relationship: _____

Address: _____

IN CASE OF EMERGENCY AND PARENTS CAN'T BE REACHED, CONTACT:

1) _____ PHONE: _____

2) _____ PHONE: _____

3) _____ PHONE: _____

Allergies to Food, Medicines, or other substances: _____

What should be done in the event of an allergic reaction? _____

Name(s) of Medications: _____

IF MEDICAL CARE IS NECESSARY, CALL:

Doctor's Name: _____ Phone: _____

Hospital Name: _____ Phone: _____

In case of injure or sudden illness, _____ will be called first. I hereby give authority to any hospital or doctor to render immediate aid as might be required at the time for his/her health and safety. It is understood by me that the expense of this service will be accepted by me.

Parent Signature: _____ Date: _____

FINANCIAL COMMITMENT FORM

We agree to pay the tuition according to the following arrangements, and to conclude all required payments before the last day of school. Our payment preference is:

Payment in full in advance of July 31 Payment monthly, Due on the 1st of the month

- * We understand that there will be a \$25 late charge assessed on accounts not paid on or before the 5th of every month.
- * We understand that there will be a \$40.00 charge for any returned check.
- * **Curriculum fees are an additional fee due on or before June 15 or in 3 installments with the 1st payment due June 15, 2nd payment 1st day of school, 3rd payment due September 1st.**
- * This Scrip program can be used to pay the curriculum fee. Any Scrip amount raised over the curriculum fee can be credited towards your child's fundraiser participation fee. See the office for details.
- * We understand that in the event the office has not received any payment within 10 days after the due date, student(s) will be withdrawn from FCA.
- * In the event that our account remains delinquent after the 30 days and upon discretion of FCA, our account may be turned over to a professional agency for collection.
- * Tuition and fees from the previous year must be paid in full before the new school year begins. FCA will not reserve classroom space for your child if any tuition from the prior year remains after May 20th.
- * We agree to pay lunch, field trip and other incidental charges that may be incurred.
- * My child is covered by an insurance policy hereby releasing FCA from any responsibility in case of accident or injury.
- * Families seeking financial assistance may apply to ASCT, ACSTO or Arizona Scholarship Program, Arizona's tax credit programs.
- * All students receiving need-based scholarship funds will be applied to current school year only. Scholarship administration fee may apply to students receiving awards
- * We understand that participation in school fundraisers is essential to maintaining school facilities/equipment. We will do all we can to be a part of fundraising and raise a minimum of \$250 per school year.
This document is understood to be legally binding, and we have read and agree to comply with the above commitment. All financially responsible parents/guardians must sign this document and when special arrangements concerning billing have been specified as stated:

Admin. Use only:

Student's Name: _____ Date: _____

Father/Guardian's Signature: _____ Date: _____

Mother/Guardian's Signature: _____ Date: _____

FINANCIAL COMMITMENT FORM

KEEP THIS COPY FOR YOUR RECORDS

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Admin. Use only:

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Freedom Christian Academy

AUTHORIZATION FOR RELEASE OF SCHOOL RECORDS

Name of School

Address of School

City

State

Zip Code

School Fax Number: _____ School Phone Number: _____

In order to assist in the provision of an appropriate educational program for my child, and in accordance with the Family Educational Rights and Privacy Act of 1974 and Arizona State Lay, I hereby authorize the release to Freedom Christian Academy the following student records:

_____ Transcripts of Grades _____ Attendance Records
_____ Withdrawal Grades _____ Psychological Records/Special Ed. Records
_____ Health Card _____ Achievement Test Scores
_____ Other: _____

For:

Name: _____ Date of Birth _____ Grade _____

Name: _____ Date of Birth _____ Grade _____

Name: _____ Date of Birth _____ Grade _____

Parent/Guardian Signature: _____ Date _____

Please send all school records to:

**FREEDOM CHRISTIAN ACADEMY
39731 N. Kennedy Dr.
Queen Creek, AZ 85242
480.987.5488
(f)480.882.1330**

PERMISSION TO PICK UP FORM

Student's Name: _____ Grade: _____

Who has permission to pick up your child? Please print clearly and legibly.

1. (Mother) _____ 2. (Father) _____

3. _____ 4. _____

5. _____ 6. _____

7. _____ 8. _____

Is there anyone who should NEVER be allowed to pick up your child?

1. _____ 2. _____

I am the legal guardian of the above mentioned child and have full legal rights over this child.

Signature

Date

MEDIA CONSENT FORM

I give permission for my son or daughter's photo or name to be released to any media publications or school promotion material. This includes local news articles and photos pertaining to school activities.

If you have any questions, please contact our office at 480/987-5488.

Child's Name(s)

Parent Name

Parent Signature

Freedom Christian Academy

Statement of Agreement Probationary Period

To ensure Freedom Christian Academy is able to meet the needs of all students academically, socially, and spiritually, new students will be admitted on a probationary period of 45 days. It is appropriate and acceptable that incoming students be placed on academic and behavioral probation for this period of time. At the end of the 45 days, students may then formerly be accepted with a record of success or may be asked to leave without having met the requirements of the program. The school board and parents will re-evaluate student performance, and if in agreement, student will remain.

The probation may be extended if deemed appropriate. This routine provides the school with the opportunity to measure whether or not it is able to meet the needs of the student. It also gives the student the opportunity to achieve academic acceptance, which is directly related to his/her achievements.

Please keep the top portion and sign and return the bottom portion.

I have read and understand the Probationary Period agreement for new students.

Parent Signature: _____

Date: _____

Student Name: _____

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