



Albany Christian School

a family ministry of Willamette Community Church

420 Third Ave. SE

Albany, OR 97321

www.albanychristianschool.org

Admission Application 2010-11

Student's Name: _____ **DATE:** _____

❖ Returning families

1. Families whose children have been enrolled in grades K-7 at ACS during the past school year need only to complete the **APPLICATION FOR ENROLLMENT**, sign the **PARENTAL AGREEMENT, CONSENT FORM, CHILD CARE CONTRACT** (if applicable), and pay the **REGISTRATION FEE(S)**.
2. All school accounts must be paid current before an Application for Enrollment will be processed.

* The school reserves the right to review, at its discretion, all returning applicants to determine whether re-enrollment is in the best interests of both the school and the child(ren).

❖ Kindergarten Applicants

1. Families applying for kindergarten admission need to submit a completed **APPLICATION FOR ENROLLMENT**, and the **FAMILY INFORMATION SHEET**, sign the **PARENTAL AGREEMENT, CONSENT FORM, CHILD CARE CONTRACT** (if applicable), enclose the **KINDERGARTEN PREFERENCE SHEET** and pay the **REGISTRATION FEE(S)**.
2. An interview with our principal, is scheduled with your family.
3. A screening appointment will be scheduled for your child following receipt of your application and registration fee.
4. Applicants will need to have on file a **CERTIFICATE OF IMMUNIZATION** (orange form), before they will be accepted. **A CHILD CANNOT BEGIN ATTENDING CLASS UNTIL THE CERTIFICATE OF IMMUNIZATION IS ON FILE AND IMMUNIZATIONS ARE UP TO DATE.**
5. Within two weeks of the screening, you will be notified by phone or by letter as to the results of your child's screening. (If the screening should indicate that next year would be a better time to start your child, your registration fee will be promptly refunded.)

* The school reserves the right to review, at its discretion, all applicants to determine whether enrollment is in the best interests of both the school and the child(ren).

Checklist for New Applicants: Kindergarten

- ✓ Complete **APPLICATION FOR ENROLLMENT**
- ✓ Complete **FAMILY INFORMATION SHEET**
- ✓ Sign the **PARENTAL AGREEMENT**
- ✓ Sign the **CONSENT FORM**
- ✓ Sign **CHILD CARE CONTRACT** (if applicable)
- ✓ Pay the **REGISTRATION FEE** for each student
- ✓ Enclose **KINDERGARTEN PREFERENCE FORM**
- ✓ Have on file a **CERTIFICATE OF IMMUNIZATION**

❖ New Applicants: Grades 1-8

1. New families applying for admission to ACS need to complete the **APPLICATION FOR ENROLLMENT**, and the **FAMILY INFORMATION SHEET**, sign the **CONSENT FORM, CHILD CARE CONTRACT** (if applicable), and pay the **REGISTRATION FEE(S)**.
2. An appointment will be made for testing your child(ren), and an interview with our principal, is scheduled.
3. You will be notified within five working days of your interview as to the status of your application.

* The school reserves the right to review, at its discretion, all applicants to determine whether enrollment is in the best interests of both the school and the child(ren).

Checklist for New Applicants: Grades 1-8

- ✓ Complete **APPLICATION FOR ENROLLMENT**
- ✓ Complete **FAMILY INFORMATION SHEET**
- ✓ Sign the **PARENTAL AGREEMENT**
- ✓ Sign the **CONSENT FORM**
- ✓ Sign **CHILD CARE CONTRACT** (if applicable)
- ✓ Pay the **REGISTRATION FEE** for each student
- ✓ Enclose copy of last year's Report Card
- ✓ Have on file a **CERTIFICATE OF IMMUNIZATION**

APPLICATION FOR ENROLLMENT • 2010-2011

Name of Father Home Phone: _____ Address Please omit my phone in school directory <input type="checkbox"/> City, State, Zip Email: _____ Cell Phone: _____ Church Attended Member Yes <input type="checkbox"/> No <input type="checkbox"/> Occupation Name and Address of Employer Work Phone: _____ Do any of the following apply? Married: _____ Single: _____ Widower: _____ Separated: _____ Divorced: _____ Remarried: _____ Is student by present marriage? _____	Name of Mother Home Phone: _____ Address Please omit my phone in school directory <input type="checkbox"/> City, State, Zip Email: _____ Cell Phone: _____ Church Attended Member Yes <input type="checkbox"/> No <input type="checkbox"/> Occupation Name and Address of Employer Work Phone: _____ Do any of the following apply? Married: _____ Single: _____ Widow: _____ Separated: _____ Divorced: _____ Remarried: _____ Is student by present marriage? _____
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Individuals Authorized for Pick-up & Contacts in Emergency Situations (Local Only)
The State of Oregon requires us to have a minimum of 2 authorized adults (not parents) for contact in an emergency situation.

Name:	Phone:	Relationship to child:

Student's Name	First	M.I.	Last	Sex	Date of Birth	Grade in 09-10

People **not authorized** to pick up my children

Medical Information

Child's Physician: _____ Phone: _____

Drug Allergies, medical alert, or regular medication: _____

For ACS Office Use Only

School Registration Fee _____

Child Care Registration Fee _____

Summer Child Care Registration fee _____

Check # Cash

Computer Data Entry

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Family Information Sheet

Required for each new student entering grades K-8 at ACS

Student's Name: _____

Date: _____

Grade to be entered _____ Grades skipped _____ Grades repeated _____

Has student ever been suspended? _____ Expelled or asked to withdraw from a school? _____

If so, please give full details on a separate sheet of paper, including the principal's name and the name and address of the school.

Has the student ever received counseling or psychological testing? _____

Has the applicant experienced any physical, emotional, mental or social problems within the past two years? _____

If yes, please explain on a separate sheet of paper. _____

Please give any information concerning your child, which will help us better serve you. _____

Please list schools attended in the last three years. (If home school, give the name of the supervising school district.)

School	Mailing Address (if outside Albany)	Zip	School Year	Grade
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Describe briefly any learning disabilities. _____

Briefly describe applicant's extra-curricular interests and abilities. _____

Is the student receiving any medication? _____ If so, explain: _____

Child Care Information

Do you need Child Care? If yes, please fill out the enclosed Child Care Contract.

The \$25 school year fee applies to any child using Child Care, including ACS students.

**** If your child comes before 8:40 A.M. or stays after 3:40 P.M. you will be charged for Child Care****

Has your child had previous experience in Child Care? _____ Yes _____ No

If yes, where and when? _____

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Parent Agreement

1. We are in complete agreement with the mission of Albany Christian School to partner with families, to educate students with excellence from a biblical foundation that they might personally experience God's love grow into Christian maturity and bridge to a local church for a lifetime of learning.
2. We realize that we are partners with the school in Christian education, realizing that God has given us the responsibility to raise our child.
3. We hereby grant permission for our son/daughter to receive emergency care at the school's discretion. We hereby authorize our child to be transported by ambulance to an emergency center. We agree to pay all costs associated with necessary treatments.
4. We grant permission for son/daughter to be given non-prescribed medication as indicated on the container, including sunscreen, children's pain reliever, and antibacterial first aid cream. We will contact parents prior to administering non-prescription pain reliever. Prescription medications must be current and require authorization forms for each medication.
5. We hereby invest authority in the school to discipline our son/daughter as the school feels necessary. We further agree that we will cooperate and discipline our son/daughter in the home as needed.
6. We hereby grant permission for our son/daughter to attend field trips and other off-campus outings during the normal school day.
7. We hereby agree to support and encourage appropriate school functions and to attend Parent-Teacher meetings as able.
8. We pledge our fullest cooperation to keep doctrinal controversy and denominationalism out of the school at all times.
9. We agree that, if our son/daughter should become involved in any trouble with other children in the school, we will in no case complain to any other party but, in the love of Christ and with prayer, we will register only necessary complaints with the teacher or principal.
10. We understand that assessments will be made to cover damage to school property (including breakage of windows, abuse of books, etc.).
11. We understand that we are responsible to pay tuition and child care costs in a timely manner and we understand that late fees will be assessed if we do not meet requirements as stated on our billing contracts.
12. We understand that continued enrollment and re-enrollment at ACS is dependent on my parental support of the school, its staff, and its policies.
13. We understand that Albany Christian School accepts students and families from a variety of religious backgrounds but whose basic tenets are set forth in the following Statement of Faith.
 - ♦ The Scriptures of the Old and New Testament were verbally inspired by God the Holy Spirit, and completely inerrant in the original writings and serve as supreme and final authority in faith and life.
 - ♦ There is one God, eternally existing in three Persons: Father, Son, and Holy Spirit.
 - ♦ Jesus Christ was begotten of the Holy Spirit, was born of Mary, a virgin, true God and true man. He died for our sins according to the Scriptures as a representative and substitutionary sacrifice, and all who believe in Him are justified by God on the basis of His shed blood.
 - ♦ Man was created in the image of God. He sinned and thereby incurred not only physical death but also spiritual death, which is separation from God. All human beings are born with a sinful nature and in the case of those who reach the age of moral responsibility, become sinners in thought, word, and deed.
 - ♦ The crucified body of our Lord Jesus was resurrected. He ascended into heaven, and presently intercedes for us as High Priest and Advocate before God. Likewise, there shall also be a bodily resurrection of the just and of the unjust, an everlasting blessedness of the saved and an everlasting conscious punishment of the lost.
 - ♦ There shall be the imminent, personal premillennial return of our Lord and Savior, Jesus Christ.
 - ♦ All who receive the Lord Jesus Christ by faith are born of the Holy Spirit and thereby become sons of God, a relationship in which they are eternally secure.
14. We have read and understand the *Parent/Student Handbook* which is online at www.albanychristianschool.org.

Parent or Guardian _____ Date _____

Parent or Guardian _____ Date _____

Consent to Medical Care and Treatment of a Minor Child

I, _____ (the natural parent or legal guardian) hereby give permission that my child, _____ may be given emergency treatment, to include first aid and CPR by qualified staff member of Albany Christian School. I further authorize and consent to medical, surgical and hospital care, treatment and procedures to be performed by my child's regular physician, or when that physician cannot be reached, by a licensed physician or hospital when deemed immediately necessary or advisable by the physician to safeguard my child's health and I cannot be contacted. In such a case, I waive my right of informed consent to such treatment.

I also give permission for my child to be transported by ambulance or aid care to an emergency center for treatment. I further authorize said center to take my child to a hospital and I agree that I will pay all physicians and hospital bills, and said center shall not be responsible for them.

My child may be given non-prescribed medication as indicated on the container, including sunscreen, children's pain reliever, and antibacterial first aid cream. Syrup of Ipecac may be administered if deemed necessary by the poison control operator. (Prescription medications must be current and authorization forms for each medication.)

Signature of Parent / Guardian

Date

Photograph Release

I hereby authorize Albany Christian School to photograph or videotape my child for news or publicity purposes.

Signature of Parent / Guardian

Date

Field Trip Permission

My child may be taken on field trips or excursions by bus, private motor vehicle; and on neighborhood walking excursions, under required supervision. (Parents must sign individual permission slips for each field trip.)

Signature of Parent / Guardian

Date



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Kindergarten Preference

Student's Name (please print) _____

Please complete and return the following survey with your registration.

◆ I/we have the following preference of sessions:

- Strongly prefer AM
- Prefer AM, but could go either way
- No preference
- Prefer PM, but could go either way
- Strongly prefer PM

◆ Reason for requesting specific Kindergarten session: _____

◆ Child Care use before or after Kindergarten:

- I/we will plan to enroll in Child Care before and/or after Kindergarten
- I/we will not be using Child Care before and/or after Kindergarten

Please note: This does not register or hold a spot for your child in our Child Care Center. If your child will need Child Care before or after Kindergarten, please complete the form attached and return it with your registration. This is a way to help us in the distribution of students between the A.M./P.M. sessions.

Kindergarten screening will begin on June 7th. Screenings will continue until all students are screened. If your child is in Preschool or Child Care, he/she will be taken out of class to be screened. If your child is not in Preschool or Child Care, an appointment will be made for you to bring him/her in for the screening.

Results from the screening will be mailed out within two weeks of the screening date.

Kindergarten Orientation will be held the week before school begins in the fall. You will receive information in the mail regarding the date and time of the orientation.

Signed: _____