NEW STUDENT APPLICATION

for HOME Program



NEW STUDENT APPLICATION

for ECS HOME Program

TO BE FILLED OUT BY PARENT: (one per student)

Student's Name (PRINT) Last Name	First Name	Full Middle Nam	— ne	
` ,) K4 K5 1 2 3 4 5 6 7 8			
Present Address				RAARIIEI
			_ CIVI	MANUEL
City	State	Zip	CHRI	STIAN SCHOOL
Phone	Date of Birth (MM/DD/YYYY)	l	Race	Gender
E-mail		Social Secur	rity Number _	<u> </u>
Place of Birth			_ Birth Certifi	cate #
City	County	ate		
Have you ever participated	d in a Home Sch <mark>ool</mark> Prog <mark>ram</mark> be <mark>f</mark> o	ore?	If so, when?	(20to 20)
Name of school last attend	led			
Address of school/home p	rogram last attended			
Has the applicant ever fail	<mark>ed a gr</mark> ade?If so, why	?		
Has applicant ever had any	y serious <mark>problem in school?</mark>	If so, plea	se explain	
Has applicant ever been ex	xpelled from school? If s	so, why?		
Does the applicant have a	<mark>ny</mark> mental, physical, or social cha	llenges?	If so, please	explain
Father's Name		Occ <mark>upation</mark>		
Mother's Name		Occupation		
Father's Business Address			Phone	
Mother's Business Address			Phone	
Other Children enrolled in	home school programs:	Other children	n in family:	
Name	Ag <mark>e</mark> Grade	Name		Age
What church does the fam	ily attend at the present time?			
How frequently do you att	end services? Sunday AM	Sunday PM _	M	idweek
Is Father (or stepfather) a	Christian? Y/N Mother (c	r stepmother)? Y/	N Ap	plicant? Y/N
On what do you base your	answer?			
Student lives with (please	check): Father and Mother	Father only M	other only _	Guardian
How did you find out abou	it the ECS HOME Program?			
			75	
Why do you wish to partic	ipate in the ECS HOME Program	?		

PLEASE READ, SIGN AND DATE THE ATTACHED "STATEMENT OF COOPERATION" AND TURNIN WITH THIS APPLICATION.

STATEMENT OF COOPERATION

- 1. It is hereby understood that we, the parents/guardians, will pay all applicable fees and tuition for the amounts stated on the HOME Program Information Sheet, or the ECS Finance Information Sheet and the ECS Student Handbook no later than the last day of school and that our child(ren) will not be promoted to the next grade or receive a report card until payment is made. We understand that our child's records will not be released to another school until we have paid all applicable fees and tuition. We understand that if our child(ren) enters ECS after the beginning of the school year, the tuition will be prorated according to the policies of ECS. We understand that the due date for each payment is the 10th of the month and a \$25.00 fee will be added to the bill for any returned checks.
- 2. The teacher and administration is hereby given full discretion in the discipline of our child(ren). This includes but is not limited to the issuing of a detention, suspension, or expulsion from the school program. A detention may be used after school for various offenses, and transportation will fully be our responsibility. We will be notified of any detention.
- 3. We understand that the school reserves the right to dismiss our child(ren) if they do not cooperate with the educational process or abide by ECS guidelines. If our child(ren) is dismissed for any reason, all fees and any tuition through the current month will not be refunded.
- 4. We will notify Emmanuel Christian School in advance before withdrawing our child(ren). Withdrawal forms must be completed and all fees paid before any records will be released. If we withdraw our child(ren) before the end of the school year, we are still responsible for one month's tuition per student plus a \$200 early withdrawal fee per student.
- 5. In making application for our child(ren), it is our desire to have him/her attend the school year 20______ to 20_____. It is also our understanding that the policy for the school is to make no refunds on fees. We also give permission for our child(ren) to take part in all school activities, including but not limited to sports, and school-sponsored trips away from the school premises, and absolve the school from liability to us or our child(ren) because of any injury to our child(ren) at school or during any school activity. In case of accident or serious illness, we request the school to contact us. If the school is unable to reach us, the school may make whatever arrangements deemed necessary.
- 6. I understand that the administration may choose use photographs/videos of my child(ren) to post on websites or advertising materials either during or after my child's enrollment at ECS. I hereby give my permission unless I have written a letter to the school requesting otherwise.

I, (print your nam	e)					_, have re	ad the St	atemen	t o
Cooperation,	know the	rules and r	egulations	of the s	school, a	am in full	agreeme	nt with	the
policies and stand	lards, and	will exhibit	the right s	pirit and	attitude	e in suppo	rting the	school	and
its activities.									

Parent/Legal Guardian Signature	Date
Parent/Legal Guardian Signature	Date
Student(s) Signature (Grades 4 th -12 th)	Date

