

APPLICATION FOR ADMISSION

-Please print with pen or type-

STUDENT INFORMATION

Student's Full Name: _____
Last First Middle

Preferred Name: _____ Male/Female Present Age: _____ Birthday _____/_____/_____

Social Security Number: _____ Present Grade: _____ Applying for grade: _____

For School Year: _____--_____ Race: _____ **STUDENT CELL PHONE NUMBER:** _____
(If applicable)

If applying for 3 year old PK, circle: 3-day 5-day
If applying for 4 year old PK, circle: 3-day 5-day
Extend Day Care? Yes ___ No ___ If **yes**, 3:15 p.m. ___ OR 5:30 p.m. ___

For grades K-5: Will you need after school care (7:30-8:30/3:30-5:30) "Primetime" for your child? Yes No
For grades K-5: Will you need morning care (7:30-8:30) care for your child only? Yes No

FAMILY INFORMATION

Full Name of Parent(s) or guardian(s) with whom child is living: _____

Are both parents living? ___ Yes ___ No ___ Married ___ Separated ___ Divorced ___ Remarried

If student's parents are divorced, which parent has legal/financial responsibility? _____

Please provide TCS with a copy of any legal guardianship documentation pertaining to visitation.

Father/Step-Father Information (Please circle one)

Full name: _____ Preferred Name: _____

Address: _____
Street City State Zip

Place of employment: _____ Occupation Title: _____

Work Address: _____
Street City State Zip

Home phone: (_____) _____ - _____ Business phone: (_____) _____ - _____

Cell phone: (_____) _____ - _____ Email address: _____

Mother/Step-Mother Information (Please circle one)

Full name: _____ Preferred Name: _____

Address: _____
Street City State Zip

Place of employment: _____ Occupation Title: _____

Work Address: _____
Street City State Zip

Home phone: (_____) _____ - _____ Business phone: (_____) _____ - _____

Cell phone: (_____) _____ - _____ Email address: _____

CHURCH AFFILIATION AND CURRENT PARTICIPATION

Name of Church your family attends: _____ Members? Yes No

Do you and your family attend services/activities regularly? _____

For Preschool Parents Only:
Parent Signature: _____

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OTHER CHILDREN IN FAMILY

Name: _____ Age: _____ School: _____

Name: _____ Age: _____ School: _____

Name: _____ Age: _____ School: _____

Name: _____ Age: _____ School: _____

Grandparent Name (s), and Address: _____

Grandparent Name (s), and Address: _____

SCHOLASTIC INFORMATION

Current school attending: _____ Type of school: _____

Grades Attended: _____ Phone: (_____) _____ - _____ Principal/Head of School: _____

Address of School: _____
Street City State Zip

Reason for leaving: _____

Is the student able to return? _____ Yes _____ No *Is the student under disciplinary action at this time?* Yes No

OTHER SCHOOLS ATTENDED

Name of School	Location	Grades	Dates
_____	_____	_____	_____
_____	_____	_____	_____

Has your child ever been suspended from any school or asked to leave? _____ Yes _____ No

If Yes, please explain: _____

Describe your expectations of Texoma Christian School in regard to your child's education: _____

Please describe your parental perspective on your child. Include your child's strengths and abilities and special areas of interest as well as areas of concern, and his or her relationship with God. We appreciate your assistance in helping us to know your child better. _____

NEW FAMILY APPLICANT REQUIREMENTS

- *Return the completed application with the non-refundable application fee and testing fee, and copies of the following documents: student's birth certificate if 10 or under, immunization records, student's most recent standardized test scores, the last two years of report card. All items must be returned to the Director of Admissions beginning March 1.*
- *Texoma Christian School admits students of any race to all the rights, privileges, programs, and activities generally accorded or made available to its students and does not discriminate on the basis of race in administration of its educational policies, admissions policies, scholarship programs, and athletic and other school administered programs.*

<p><i>For Preschool Parents Only:</i> Parent Signature: _____</p>

Statement of Cooperation, Emergency Card and Doctor's Information

-Please print with pen or type-

Applicant's Name: (LAST) _____ (FIRST) _____ (MIDDLE) _____

Grade Entering: _____ Date of Birth: _____ Age: _____ Place of Birth: _____

PERMISSION TO PUBLISH ADDRESS/Photos & Marketing Materials

TCS publishes a directory of students that is distributed to each TCS family. To be included, please check:

TCS **may** publish _____ address _____ phone number in school directory
TCS may **NOT** publish _____ address _____ phone number in school directory

From time to time TCS likes to display class pictures, group pictures, or possibly your child's photo in conjunction with an activity they were involved in on our website, the newspaper, or TCS marketing brochures. We will not include personal information with this (i.e. name or address). Please sign below if you give your permission to post a photograph of your child.

I give permission to publish a photograph of my child in conjunction with a TCS activity on the website, newspaper, or marketing materials. (Please sign line above)

INFORMATION SOURCE

How did you hear about Texoma Christian School? (Please circle) **Newspaper** **Phone book**

Television ad **Mailer/postcard** **Friend/relative** **TCS parent** **Other:** _____

Please list any TCS families who referred you to TCS _____

RESTRICTED PICK-UP AND EMERGENCY CONTACT

The following individuals are the only people who have permission to pick up my child from the premises of TCS: (It will be helpful for teachers and staff if, when listing names for pick up, you would include any "special" name your child may call them, i.e., "Nanna", "Pawpaw", "Mimi", etc.) **They must have a TCS sticker displayed on their vehicle.**

- 1. _____ 4. _____
- 2. _____ 5. _____
- 3. _____ 6. _____

Whom should we contact in case of emergency?

Name: _____ Relationship: _____ Phone number: _____

Name: _____ Relationship: _____ Phone number: _____

MEDICAL INFORMATION AND CONSENT

Name and explain any health condition(s), past or present, which need to be brought to the school's attention in order to safeguard this applicant at school (e.g. diabetes, seizures, asthma, emotional disorders, educational challenges, etc.) or which restrict physical activity: _____

Is the applicant taking any prescription medications? _____ YES _____ NO	
Specify: _____	
Has the applicant been tested for any of the following? (please check) <i>Please provide the school with a copy of test scores and recommendations from the evaluator(s).</i>	
_____ Speech/language	_____ Attention Deficit Disorder
_____ Learning Disabilities	_____ Attention Deficit Hyperactivity Disorder
_____ Emotional Issues (<i>which affect learning</i>)	_____ Other _____

Statement of Cooperation, Emergency Card and Doctor's Information

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MEDICATION ADMINISTERED: Any medication sent from home, prescription and non-prescription, must be accompanied by a written note from the parent or guardian stating times and dosages to be administered. **All prescription medications must be in the original container and properly labeled with the student's full name. Sample medications must be accompanied by a doctor's written order.**

Doctor's name _____ Phone _____

Address _____

Medical Insurance _____ Policy number _____

May the school give your child acetaminophen (Tylenol)? _____ YES _____ NO _____ Please call me first.

Ibuprofen _____ YES _____ NO _____ Please call me first

Cough drops _____ YES _____ NO

Benadryl cream _____ YES _____ NO

Allergies _____

Special Medications _____

In case of an emergency, we will seek the assistance of a qualified doctor, dentist or emergency personnel. Please sign to indicate your acceptance of this policy:

The undersigned as the parent/guardian(s) of _____ do hereby consent to any and all medical/surgical treatment, anesthesia, or operations, which may be deemed advisable by any qualified doctor by the agents of Texoma Christian School. The intention hereof is to grant authority to administer and to perform singularly any examinations, treatments, anesthetics, operations and diagnostic procedures that may be now, during the course of the patient's care, deemed advisable or necessary by any qualified medical doctor.

Parent/Guardian Signature _____

Date _____

STATEMENT OF COOPERATION

I give Texoma Christian School permission to transport my child for planned school activities and school sponsored trips away from school property. I further agree to hold the school and its agents harmless for any liability to my child because of any claims on behalf of my child against the school or its agents because of any injury or alleged injury to my child. If legal action should, or any reason, be taken against Texoma Christian School or its agents or its employees, on behalf of my child, and the school or its agents not be found at fault, I agree to pay any attorney fees, court fees, damages, or other costs Texoma Christian may incur to defend itself against such action.

As the parent/guardian(s) of the student applicant named herein, I agree with the mission statement and the philosophy of Texoma Christian School. I agree that upon acceptance of the herein-named student, I will pledge myself to work with TCS staff, administration and faculty within these statements to the betterment of our student and to assist and cooperate with the school in the Christian education of my child. **I understand that the enclosed application/testing fee is non-refundable as well as any pre-paid tuition.**

I further understand and acknowledge that continued enrollment of my child, if admitted to TCS, shall be subject to the payment of all fees and charges set forth on the schedule of fees as periodically amended by TCS. I understand that all tuition payments are handled through the FACTS program unless paid in full prior to the beginning of the school year. The school reserves the right to withhold academic records until all tuition and/or fees are paid in full. My child will comply with the school's code of conduct and policies established by TCS.

I have read the school's STATEMENT OF FAITH and I recognize that this statement is the foundation of Texoma Christian School's educational program.

Parent/Guardian Signature _____

Date _____

Texoma Christian School admits students of any race to all the rights, privileges, programs, and activities generally accorded or made available to its students and does not discriminate on the basis of race in administration of its educational policies, admissions policies, scholarship and loan programs, and athletic and other school administered programs.

Texoma Christian School Early Childhood Policies

Child's Name: _____ Class: _____

Discipline and Guidance Policy for Texoma Christian School

- ❖ Discipline must be:
 - Individualized and consistent for each child;
 - Appropriate to the child's level of understanding; and
 - Directed toward teaching the child acceptable behavior and self control.

- ❖ A caregiver may only use positive methods of disciplines and guidance that encourage self-esteem, self-control, and self-direction, which include at least the following:
 - Using praise and encouragement of good behavior instead of focusing only upon unacceptable behavior;
 - Reminding a child of behavior expectations daily by using clear, positive statements;
 - Using brief supervised separation or time out from the group, when appropriate for the child's age and development, which is limited to no more than one minute per year of the child's age.

- ❖ There must be no harsh, cruel, or unusual treatment of any child. The following types of discipline and guidance are prohibited:
 - Corporal punishment or threats of corporal punishment;
 - Punishment associated with food, naps, or toilet training;
 - Pinching, shaking, or biting a child
 - Putting anything in or on a child's mouth;
 - Humiliating, ridiculing, rejecting, or yelling at a child;
 - Subjecting a child to harsh, abusive, or profane language;
 - Placing a child in a locked or dark room, bathroom, or closet with the door closed;
 - Requiring a child to remain silent or inactive for inappropriately long periods of time for the child's age.

Texas Administrative Code, Title 40, Chapters 746 and 747, Subchapters L, Discipline and Guidance

My signature verifies I have read and received a copy of this <u>discipline and guidance policy</u> .	
✓ _____ Signature & Relationship to Child	_____ Date

Please check the following and sign below:

1. _____ I have read and received a TCS (Preschool) Parent Handbook.
2. _____ I have read and understand the Matthew Principle; I agree to follow this Resolution of Conflict that TCS abides by.
3. _____ To my knowledge, my child was seen by a health care professional within the last year, and has been declared free of contagious & infectious diseases as of the last well child visit, and he/she has no physical limitations that may keep him/her from participating in a preschool program.

➤ Doctor's Name: _____ Doctor's Phone #: _____

➤ Doctor's Address: _____ City: _____ State: _____

✓ **SIGNATURE & RELATIONSHIP TO CHILD:** _____ **Date:** _____

Texoma Christian Preschool Family Life Values Statement

Texoma Christian School is a non-denominational evangelical Christian school which exists to assist parents in raising their children in the Lord while providing an excellent academic foundation. Because we are a Christian school and because we believe that the Bible is the living Word of God...

- Our goal is that each of our faculty and staff has a personal relationship with the Lord.
- Our curriculum is developmentally appropriate and is taught from a Christian perspective.
- We honor the child development principles and parenting roles taught in Scripture. Here are key examples:

Ps. 78:5-6 "He commanded our forefathers to teach their children so the next generation would know them (statutes and laws), even the children yet to be born, and they in turn would tell their children." (NIV)

Deut. 6:6-7 "These commandments that I give you today are to be upon your hearts. Impress them on your children. Talk about them when you sit at home and when you walk along the road, when you lie down and when you get up." (NIV)

- We believe that parents are the primary teachers of their children. Our goal is to assist parents by teaching their children the truths of God, a love for people, along with the skills and knowledge necessary to equip them for life.

Prov. 22:6 "Train a child in the way he should go, and when he is old he will not turn from it." (NIV)

Matt. 18:5, 10 "Whoever welcomes a little child like this in my name welcomes me." See that you do not look down on one of these little ones. "For I tell you that their angels in heaven always see the face of my Father in heaven." (NIV)

- Children are precious and important to the Lord. We don't take our responsibility lightly. We love these children, teach them, and respect them, as we fulfill our calling to train up the next generation in the Lord.

As a parent, making application for my child here at Texoma Christian Preschool, I agree to support the principles mentioned here, and to fulfill my role to the best of my ability as the primary teacher and encourager of my child.

✓ Signature of Parent(s)/Guardian(s)

(Date)