

# Central Baptist Academy

7645 Winton Road, Cincinnati, Ohio 45224, (513) 521-5481, CentralBaptistAcademy@gmail.com

School year: \_\_\_\_\_

## Application for Admission

Registration Rec'd. \_\_\_\_\_

Please fill out this form completely.

Student Name \_\_\_\_\_ Grade Entering \_\_\_\_\_ Age \_\_\_\_\_

First Middle Last

Address \_\_\_\_\_

Street City State Zip

Birthdate \_\_\_\_\_ Sex \_\_\_\_\_ Race \_\_\_\_\_ SS# \_\_\_\_\_

School attended last year \_\_\_\_\_

Public school district in which you reside \_\_\_\_\_

Father / Guardian \_\_\_\_\_ Marital Status: S / M / D / W

Address (if different) \_\_\_\_\_

Street City State Zip

Email address \_\_\_\_\_

Phone \_\_\_\_\_ Home / Cell / Work Phone \_\_\_\_\_ Home / Cell / Work

Employer \_\_\_\_\_ Position \_\_\_\_\_

SS# \_\_\_\_\_ Does the child reside with the father? Yes / No. Full-time / Part-time.

Does the father know Jesus Christ as his personal Savior? Yes / No.

Mother / Guardian \_\_\_\_\_ Marital Status: S / M / D / W

Address (if different) \_\_\_\_\_

Street City State Zip

Email address \_\_\_\_\_

Phone \_\_\_\_\_ Home / Cell / Work Phone \_\_\_\_\_ Home / Cell / Work

Employer \_\_\_\_\_ Position \_\_\_\_\_

SS# \_\_\_\_\_ Does the child reside with the mother? Yes / No. Full-time / Part-time.

Does the mother know Jesus Christ as her personal Savior? Yes / No.

Name of the church the family attends \_\_\_\_\_ Pastor \_\_\_\_\_

Does the student know Jesus as personal Savior? Yes / No. If yes, please have student give a brief testimony. (Grades 7-8 only)

Has the student ever repeated a grade? Yes / No. If yes, for what reason? \_\_\_\_\_

Has student had any discipline problems in school, i.e. suspensions or expulsions? Yes / No. If yes, please explain briefly. \_\_\_\_\_

Does student have any mental, emotional, or physical handicaps or communicable diseases which may affect his/her activities or progress? Yes / No. If yes, please explain briefly. \_\_\_\_\_

Does student have any identified learning disabilities, learning difficulties, or an Individualized Education Program (IEP) or 504 Evaluation? Yes / No. If yes, please explain briefly. \_\_\_\_\_

Do you give permission for student's picture or video to be used on the school's website or Facebook page? Yes / No.

Does student have any allergies to food or medicine? Yes / No. If yes, please explain briefly. \_\_\_\_\_

Whom should we call in case of illness or emergency if we cannot reach a parent?

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

Is there a court order in effect limiting the presence of any person or limiting the removal of this student by any person or persons during school hours? Yes / No. If yes, please explain.

Court order # \_\_\_\_\_ Date \_\_\_\_\_

**FINANCIAL OBLIGATION:**

Tuition payments are due on the 1st of each month, August through May. Payments received after the 15th are delinquent and a \$25.00 late fee will be assessed. Students whose accounts are not paid by the 25th (except May when by the 16th) will be suspended until the account is current. Accounts more than 20 days in arrears will be turned over to a collection agency. Academic records will be withheld until all accounts are up to date. The fee for returned checks is \$30.00. After the second returned check, tuition and fees will be accepted on a cash or money order only basis. ALL REGISTRATION FEES ARE NONREFUNDABLE AND NONTRANSFERABLE.

If a student withdraws or is dismissed at any time during the school year, any unpaid fees including that month's installment for tuition must be paid in full. All academic records will be held until the balance is paid in full.

**EDUCATIONAL PHILOSOPHY:**

I agree to support the Christian philosophy to which the Central Baptist Academy is committed and the rules and regulations by which the school is administered as contained in the Policy Handbook. I further understand that my child is expected to comply with and maintain the academic and behavioral standards as contained in the Policy Handbook. The administration, according to enrollment, staff availability, etc., will determine class size and grade combinations. All new students will be on probation for the first semester of attendance.

**CONSENT TO POLICY:**

I hereby certify my consent and compliance to all governing policies of the school and understand that admission to Central Baptist Academy is a privilege, not a right. Continued attendance at the school is subject to the sole discretion of the administration. All parents should understand that students are admitted only if the following conditions are met:

- 1 Parents grant permission to the school authorities to discipline their children using necessary methods. Parents agree that they will cooperate and discipline the child in the home. (Proverbs 13:24, 19:18, 22:15)
- 2 Parents agree that if their child should become involved in any difficulty with other children in school, they will in no case complain to any other parent. This should be handled in a prayerful spirit through the teacher(s) and administration. Any questions, comments, or problems with any child should be handled through the teacher(s) prior to going to the principal or administrator. (1 Peter 3:8-12)
- 3 Parents agree that their children will abide by all school rules and policies including, but not limited to, the uniform dress code and use of the King James Version of the Bible. Parents are responsible for all information in the Policy Handbook. Changes may occur; written notification will be made available to parents about the changes.
- 4 Parents agree to meet their financial obligations to the school. This includes tuition, fees, etc. (II Kings 4:7; Romans 13:8)
- 5 Parents understand that the school does not have insurance for students. Insurance for all school activities and events should be covered under parents' insurance policies.
- 6 The school administration reserves the right to open and search lockers at any time.
- 7 Admission of students is based upon at least one parent being a born-again believer. This is the only way that what is being taught in school can be reinforced in the home. Strong participation in and faithfulness to your church is critical to the educational process.

Father / Guardian Signature \_\_\_\_\_

Date \_\_\_\_\_

Mother/Guardian Signature \_\_\_\_\_

Date \_\_\_\_\_

**MEDICAL:**

I give consent for my child to participate in regularly scheduled activities sponsored by the school and to be transported to and from such activities. In the event that my child should be ill, injured, or in a similar emergency and I cannot be reached, the school or its agents may authorize physicians and/or hospitals to perform emergency treatment. I understand that unless I give other instructions hereon, my child would be transported to Children's Hospital if I cannot be contacted.

Parent Signature \_\_\_\_\_

Date \_\_\_\_\_