



STUDENT APPLICATION

Kindergarten (K5) through 12th Grade

STEPS TO ADMISSION

We recommend that interested parents schedule a tour.

**In order to enroll a new student,
SPCS will need the following items:**

- A. Complete application
- B. Pay registration fee
- C. Provide a copy of birth certificate
- D. Provide a copy of social security card
- E. Provide updated immunization record
- F. Provide a copy of any special testing
- G. Provide a copy of past achievement test
- H. Provide a copy of the most recent report card
- I. Provide unofficial transcript (grades 6-12)

STUDENT APPLICATION

K5 through Grade 12

K5 - 12th : Grade Entering: _____ Start Date: _____

Office Use Only: Date Application Received _____ Reg. Amount Date _____ By _____

Student Information

Student's Legal Name _____ SS# _____

Preferred Name _____
(Last) (First) (Middle) Sex _____ Age _____ Date of Birth: Month _____ Day _____ Year _____

Address _____

If parents are separated or divorced with whom does the student reside? _____

List any legal authority or parental restrictions _____

Last School Attended _____ School Phone _____

School Provider Address _____
(Street Address/P.O. Box No.) (City) (State) (Zip)

Student's grades have been : Superior Above Average Average Below Average Failing Not Applicable

Ever repeated a grade? Yes No If yes, which grade _____. Ever been suspended? Yes No If yes, please explain _____

Has your child ever been diagnosed with a learning disability? Yes No If, yes, please explain _____

Who is responsible for paying tuition, fees, etc., for your child? _____

Preferred number for Parent Alert (School notification system for emergency contact) _____

Father / Guardian Information

Name _____

Address _____

Marital Status _____
(Street Address/P.O. Box No.) (City) (State) Date of Birth _____ (Zip)

Relationship to Student _____ E-mail Address _____

Cell Phone _____ Home Phone _____

Employer _____ Occupation _____ Work Phone _____

Name and city of church you attend _____

Name of your Pastor _____

Mother / Guardian Information

Name _____

Address _____

Marital Status _____
(Street Address & P.O. Box No.) (City) (State) Date of Birth _____ (Zip)

Relationship to Student _____ E-mail Address _____

Cell Phone _____ Home Phone _____

Employer _____ Occupation _____ Work Phone _____

Name and city of church you attend _____

Name of your Pastor _____

Other Information

Physician _____ Phone _____ Hospital Preference _____

Dentist _____ Phone _____

Insurance Company _____ Policy Number _____

Emergency contacts (if parents or guardians are unavailable)

Name _____ / _____ Relationship _____ Home Phone _____ Work Phone _____

Name _____ / _____ Relationship _____ Home Phone _____ Work Phone _____

List known allergies, food restrictions, physical, emotional, or behavioral disorders, and regularly administered medications: _____

List sports (6th-12th) and fine arts interests (1st -12th) _____

Comment on personality traits _____

Has student ever attended South Pointe Christian School? Yes No If yes, when? _____

List the names and grades of any other children in your immediate family who are attending or applying at SPCS: _____

With whom may student be released other than parents?

Name _____ / _____ Relationship _____ Home Phone _____ Work Phone _____

Name _____ / _____ Relationship _____ Home Phone _____ Work Phone _____

Name _____ / _____ Relationship _____ Home Phone _____ Work Phone _____

Parental Statement of Cooperation Agreement

PLEASE READ CAREFULLY. By signing this application, I/we understand and agree that:

1. My family's beliefs and practices are to be consistent with the standards, doctrine, and values of the school. Should my child not respond favorably for any reason to South Pointe Christian School or if conflict arises as a result of not being willing to accept the standards, doctrines, and values of South Pointe Christian School, I will not try to change the school to fit my needs but agree to quietly withdraw my child.
2. I have read and understand South Pointe Christian School's Parent/Student Handbook, and I agree to abide by the policies and procedures set forth therein.
3. South Pointe Christian School reserves the right of dismissal of any student who persistently and willfully neglects his academic work, exercises poor citizenship, reflects adversely on the Christian principles of the school or is engaged in behavior or lifestyle inconsistent with Biblical guidelines as prescribed by South Pointe Fellowship of Pageland.
4. I agree to make every effort to attend scheduled Parent-Teacher Fellowship (PTF) meetings.
5. South Pointe Christian School will not administer over-the-counter medication or prescription drugs to students without a parent's signature on the Emergency Medical Information form (available in the school office). All medication must be in original container with child's name and directions for administering drugs clearly labeled. In the event of a medical emergency, I give permission for my child to receive first aid from a school employee and/or treatment as required by a physician.
6. I have read and agree to comply with the Tuition Contract. I also agree to comply with any withdrawal and/or payment penalties contained therein. I understand my, or my child's failure to comply with the school's policies will result in my child's dismissal without prior notice to me. School records and report cards may be held for unpaid balances.
7. I understand final acceptance of my child is determined by the administration. The school has full discretion in the grade placement and promotion of my child.
8. Promotional advertisements are used by South Pointe Christian School. I understand and agree that my child may be used for such advertisements and that South Pointe Christian School is released from all liabilities.

(Father/Guardian Signature & Application Date)

(Mother/Guardian Signature & Application Date)

South Pointe Christian School admits students of any race, color, national and ethnic origin to all rights, privileges, programs, and activities generally accorded or made available to students at the school. The school does not discriminate in the administration of its educational policies, scholarships, athletic, and other school programs.

FINANCIAL AGREEMENT

The following policies are set forth by the School Board of South Pointe Christian School. If other arrangements need to be made, they must be submitted in writing and sent to the Financial Administrator of SPCS. The School Board will respond within 30 days. You will then be notified by the Financial Administrator of their response.

- * Students will not be allowed to attend class if tuition becomes past due by more than 30 days.
- * Students will not be allowed to participate in sports, field trips, dances, incentive programs, etc. if account is not current.
- * Registration, book and supplies and tuition fees are **non-refundable**.
- * All fees must be current to register for the next school year. A student will not be allowed to return to SPCS if there are any financial obligations remaining from the previous school year.
- * Transcript/diploma or other school information shall not be issued until all financial obligations have been met in full.
- * Due to general expenses and staff commitments, no reduction can be made in tuition due to absenteeism, closings due to inclement weather, scheduled days closed for holidays, teacher workdays, etc.
- * After school care is a separate charge and is not included in your tuition payment.
- * A fee of \$30.00 will be charged to your account for returned checks.
- * A fee of \$50.00 will be charged for late payment after the 10th of the month and an additional \$25.00 after the 15th.
- * For students K5 through 12th grade: A \$150.00 fee will be due if a student withdraws. No records or information will be released until the fee is paid.

All financial information is mailed to the address of the student's residence. It is the enrolling parent/guardian's responsibility to provide this information to the appropriate staff of South Pointe Christian School and Preschool.

BY SIGNING THIS FORM, I ACKNOWLEDGE THAT I HAVE READ, UNDERSTOOD, AND AGREE WITH ITS PROVISIONS AND ACCEPT RESPONSIBILITY FOR MY CHILD'S FINANCIAL ACCOUNT. I ALSO UNDERSTAND THAT ALL FEES THAT HAVE BEEN PAID ARE NON-REFUNDABLE.

Who's name should appear on annual tax receipt for after school and daycare charges?

PARENT'S/GUARDIAN'S SIGNATURE: _____ Date _____
(Required)