

Admissions Checklist

| Application for Admission | The application form should be completed in full for each applicant. Be sure that the appropriate lines are signed. |
|--|--|
| Registration Fee - \$100.00 | The non-refundable registration fee must be enclosed with the completed application packet. No student will be accepted without it. Returning Students - \$50.00, if registered before May 1 st . |
| 4 Forms | All 4 forms included in the application packet must be completed. (Payment Policy, Emergency Information form, <u>Notarized</u> Medical Release form, and Publicity Permission Form) *Notary is available at Calvary |
| Birth Certificate | A copy of the applicant's state-certified birth certificate is required with the application packet. A hospital birth certificate cannot be accepted. |
| Social Security Card | A copy of the applicant's social security card. |
| <i>Immunization Certificate</i> | A copy of the applicant's state certified immunization certificate is required before the first day of school. |
| Kindergarten | All applicants entering Kindergarten must |
| Physical/Eye Exam/Dental Exam | have a complete physical, Dental and Eye exam. A copy of all exams are necessary before the first day of school. |
| Entrance Testing (K-11 th) | All new students are subject to testing before final admission is approved. |
| 6 th Grade Physical | All applicants entering 6^{th} Grade must have a complete physical. A copy of the form is necessary before the first day of school. |

(ADD'L INFO – SEE REVERSE)





Financial Information 2020-2021

| Tuition: Preschool – Part-Time (TTH) (8-2:50) Preschool – Part –Time (MWF) (8-2:50) | Yearly Tuition \$2100.00 \$2600.00 | 10 Monthly Payments \$210.00 \$260.00 |
|---|--|---|
| Preschool – Full-Time 2's (8-2:50) | \$4000.00 | \$400.00 |
| Preschool – Full-Time 3's and 4's (8-2:50) | \$3700.00 | \$370.00 |
| Kindergarten thru 4 th Grade (8-3:10) | \$3800.00 | \$380.00 |
| 5 th Grade – 8 th Grade (7:45-3:10) | \$3800.00 | \$380.00 |
| 9th Grade - 11th Grade (7:45-3:10) | \$4100.00 | \$410.00 |
| Infant/Toddler - 6wks-24 mths (8-2:50) | \$5500.00 | \$550.00 |

Tuition payments are due on the 1st of each month. The first tuition payment is due in July. If this payment is not made by the 10th of July, your student's place is forfeited. In August, there is no tuition charge; materials fee is due. If a student withdrawals in the middle of the month during the school year, any tuition payment for that month (including July) will be forfeited. If payment has been made for subsequent months, tuition for those months will be refunded.

Registration:

New Students - \$100 Returning Students - \$50 (Considered new students after May 1st)

Discounts:

There is a 5% discount on yearly tuition paid in full by July 10^{th} . Sibling discounts are as follows: 1^{st} child – Regular tuition, 2^{nd} child – less 20%, 3^{rd} child – less 25%, 4^{th} child – less 30%

One Time Fees:

| Material | (Due August 1 st) |
|--|-------------------------------|
| 2/3 Year Old | \$175.00 |
| 4 Year Old | \$225.00 |
| Kindergarten | \$250.00 |
| Grades 1 st -5 th | \$325.00 |
| Grades 6 th – 8 th | \$375.00 |
| Grades 9 th -10th | \$425.00 |

Extended Care:

Extended Care services are available from 6:30AM – 6:00PM. Charges are based on a daily rate.

| 6:30AM- 7:15 AM | \$3.00/day |
|-----------------|-------------|
| 3:20PM – 4:30PM | \$5.00/day |
| 3:20PM – 6:00PM | \$10.00/day |

Summer Care/Snow Day/Holidays:

6:30AM – 6:00PM Meals and Snacks are included \$32.00 daily or \$150.00 weekly \$20.00 daily for 4 hours or less

Meals:

Tuition:

Lunch is \$4.00/day if pre-ordered. Meals are ordered online and paid in advance. Milk, juice or water can be purchased for lunches that are prepared at home. The cost/beverage is \$.60. Prepaid beverage cards are available.

Beverage Card \$12.00/20 Beverages

Late Fees:

Due the 1st of each month. On the 11th a late fee will be applied.

Extended Care: Billed weekly and due by the Friday of the billing week. Accounts are revised weekly for arrears. A \$15 late fee will be applied on all E/C accounts that are past due.

NSF Checks: Must be paid in cash and a \$30 NSF fee will be applied to the account.

| Application 20 | • Pmt. Type: CASH / CHECK |
|---|--|
| Application – 20 | |
| Student's Full Name: | |
| Date of Birth: Gender: Male Female | Social Security #: |
| Grade Entering: Requested Teacher: (Infant, Toddlers, Preschool 2's – 10th Grade) Home address: | |
| FAMILY INFORM | ATION |
| FATHER / GUARDIAN | Social Security #: |
| Home Address: | Home Phone#: |
| (if different from s | tudent) Cell Phone#: |
| Email: | _ (statements will be emailed to this address) |
| Employer: | _ Work Phone #: |
| MOTHER / GUARDIAN | _ Social Security #: |
| Home Address: | Home Phone#: |
| (if different from s | tudent) Cell Phone#: |
| Email: | (statements will be emailed to this address) |
| Employer: | _ Work Phone #: |
| Student lives with: Mother Father Other | Relationship: |
| Is there any custody issues of which we should be aware? \Box Ye | $s \square No$ (if Yes, please explain or attach a court order |
| <u>Siblings</u> <u>DOB</u> | |
| | _ |
| | _ |

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| EDUCATION | NAL INFORMATION | |
|---|---|-------------------------|
| Current School (or Daycare) Attending: | | |
| School Address: | School Phone #: | |
| Most Recent Grade Completed: | Applying for Grade: | $(2's - 6^{th} Grade)$ |
| Has the student ever been asked to leave, suspended | d, or expelled from school? 	Yes No (| if Yes, please explain) |
| Has the student ever repeated a grade? YES If yes, please explain: | | |
| Has the student ever been recommended for tutorin Provided are dates and areas of remediation alo | • | YES NO |
| Has the student ever been administered psychologic if they are gifted, have a learning disability, ADD, A Provided are dates, test results, evaluations, etc. | ADHD, behavior or emotional disorder? | ermine YES NO |
| Is the student presently taking any medications for a | any medical or learning problems? | YES NO |
| If so, please provide kind of medication, dosage, an | nd frequency | |
| Provided is a copy of students medical evaluation | n, which must be within the last 12 month | 5. |
| Is there anything else CCS should be made aware of | of when considering this student for enroll | ment? |
| | | |
| Parent Signature: | | |
| Date: | | |
| | kids fully become who God created them to be. | |



EMERGENCY INFORMATION 20___-20___

| Student's Name: | Birthdate: | |
|---|--------------------------------------|-----------------------|
| Preferred Name: | Grade/Classroom: | (office use only |
| *Allergies: | | |
| *Special Medical Condition | s: | |
| *Medications: | | |
| *Doctor's Name: | <i>Phone #:</i> | |
| *Dentist's Name: | <i>Phone #:</i> | |
| *Preferred Hospital: | | |
| <i>Relationship:</i> <i>D.L. #</i> : | Work Phone# | #: : h options) |
| 2. Name: | Home Phone | #: |
| Relationship: | | · |
| D.L. #: | Cell Phone#: | |
| <i>Emergency</i> |] Pick Up (please choose one or both | h options) |
| 3. Name: | Home Phone | #: |
| Relationship: | Work Phone# | · |
| D.L. #: | Cell Phone#: | |
| Emergency |] Pick Up (please choose one or both | h options) |

*A sheet for listing additional pick-up/emergency contacts can be provided if needed.



EMERGENCY MEDICAL RELEASE

| Child's Name: | Date of Birth: |
|--|---------------------------------|
| Home Address: | Phone #: |
| | |
| | |
| To Whom It May Concern: | |
| I,, the le | gal guardian/parent of |
| (Guardian/Parent) | (Child) |
| grant Calvary Christian School and/or its agents | to authorize emergency care for |
| - | (Child) |

should any medical problems arise.

I understand that the treating facility will make all reasonable attempts to notify me/us at the time of treatment, but that said treatment should proceed as needed, notwithstanding my notification.

I give Calvary Christian School, its directors, teachers and staff permission to seek emergency medical treatment for my child should the need arise. I will not hold Calvary Christian School, its directors, teachers, or staff responsible for any injury or illness that my child receives while in their care.

This instrument shall be in force during my child's enrollment at Calvary Christian School &/or extended care.

If at any time during treatment I/we can be reached or are present at the time of treatment, our judgment may supersede this instrument.

| Signature | Signature | |
|------------------------|--------------|--|
| Relationship | Relationship | |
| Date | Date | |
| Phone # | Phone # | |
| Notary Public: | | |
| My Commission Expires: | | |



Publicity Permission Form

Informational technology has drastically altered teaching, learning, and school administration. Calvary Christian School is seeking to use an electronic format as much as possible. The school's website <u>www.ccschool.net</u> is a wonderful venue for keeping parents and the community informed of the activities of Calvary Christian School. The school searches for the best media to showcase the accomplishments and achievements of our children.

Periodically, we would like to post pictures of the students on the website, include them in our yearbook, and submit them to our local newspaper. If you would grant the school permission, please sign and return the form below.

Thanks,

Calvary Christian School

Student's name

I give permission to have his/her picture used by the school in the following categories: <u>Please check all that apply</u>

School brochures/publications

Newspaper

] Yearbook

Internet (A child's last name is not used with photos)

Social Media

Do not use my child's photo in any of these categories.

Parent's signature



20 -20

Payment can be made at school, your renweb school account, or can be mailed to:

Calvary Christian School 15 Redwing Drive Winchester, Kentucky 40391

Tuition can be paid per month for 10 months or in full for the year. If you pay in full for the year by July 10th, you will receive a 5% discount. There is a non-refundable registration fee of \$100.00 for new students and \$50.00 for students currently enrolled in Calvary Christian School (considered new student after May 1st).

Monthly tuition payments are due the 1st of each month. A late fee of \$25.00 will be added to all accounts not paid by the 10th day of each month. The first payment is due July 1st. If this payment is not made by the 10th of July, you will lose your student's reserved place. There is no tuition payment due in August - only material fees due August 1st. Subsequent monthly payments resume in September and are due the 1st of each month. The final payment is due May 1st. If a student withdraws in the middle of the month during the school year, any tuition payment made for that month will be forfeited (including July). If payment has been made for subsequent months, tuition for those months will be refunded. Tuition will not be reduced for days missed because of illness or vacation.

In the case of a returned check, full payment in cash will be required plus an additional return check fee of \$30.00. If a second check is returned, tuition must be paid in cash, money order, or cashier's check for the remainder of the school year. No personal checks will be accepted.

If your account becomes 30 days past due, your child will no longer attend CCS and we will begin legal proceedings to collect all monies owed to the school. Once all monies are collected, CCS will send your child's record to the school of your choice.

Since the school's operation is based completely on capacity enrollment, we require a two week notice and payment of account in full if it becomes necessary to withdraw your child. Accounts must be cleared upon withdrawal.

As a rule, billing for extended care is sent out weekly after the week of care has been provided. Charges are due the Friday of the billing week. Accounts are reviewed weekly for arrears. A late fee of \$15 will be applied to all E/C accounts that are past due.

I, the undersigned, have read and understand Calvary Christian School's Payment Policy.

Please Print Name of parent or legal guardian

Child's Name

Signature of parent or legal guardian

Date

*Please note the name, address, and email of who will be financially responsible for the student's tuition, childcare, lunches, and other fees, if different from the above signature.

Calvary Christian School - Hot Lunch Ordering Schedule - 2020/2021

Please be reminded that once the ordering date is passed the cost of a school lunch will be \$5.00.

| Month | Open | Close |
|-----------|---------------------------|----------------------------|
| August | July 6 th | July 17 th |
| September | August 3 rd | August 14 th |
| October | September 7 th | September 18 th |
| November | October 5 th | October 16 th |
| December | November 2 nd | November 13 th |
| January | December 7 th | December 18 th |
| February | January 4 th | January 15 th |
| March | February 1 st | February 12 th |
| April | March 1 st | March 12 th |
| May | April 5 th | April 16 th |

LUNCH ORDERS ARE PLACED WITHIN YOUR RENWEB PARENT ACCOUNT. INSTRUCTIONS TO SET UP YOUR ACCOUNT CAN BE FOUND ON OUR WEBSITE <u>WWW.CCSCHOOL.NET</u>

Additional Information

Infant/Toddler: 8:00am - 2:50pm

Preschool: 8:00am - 2:50pm

Elementary: 8:00am - 3:10pm

Middle School: 7:45am - 3:10pm

9th -11th Grade: 7:45am - 3:10pm

2020/21 School Calendar

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| 23 | 24 | 25 | 26 | 27 | 28 | 29 |
| 30 | 31 | | | | | |

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| Memorial [| Independer |
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| May 31 | July 4 |

Mar 29-Apr 2 Spring Break May 19 Closing Day

Nov 25-27 Thanksgiving Break Dec 21-Jan 1 Christmas Break Jan 18 MLK, Jr. Dav

Aug 13 Opening Day Sept 7 Labor Day Oct 5-9 Fall Break

Trimesters: 1st 08-13-20 - 11-11-20 2nd 11-12-20 - 02-19-21 3rd 02-22-21 - 05-19-21 (0-Opening, C-Closing, H-Holiday, B-Break)

nce Day Day