



**2019-2020 SCHOOL YEAR**  
**K4 ADMISSIONS CHECKLIST**

Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Prior to Enrollment: Students are not considered registered until all the information is received.

Application for Admission	Completed and signed
Kindergarten Discipline and Attendance Policy	Signed
K4 Questionnaire	Completed and signed
Financial Agreement	Completed and signed
Parental Permissions & Agreements	Each item must be signed
Statement of Cooperation	Signed by both parents
Certified Copy of Birth Certificate	Must be a state-issued certificate (not a hospital document) If you supply a copy, we must see the original to compare.
Student's Social Security Card	We will make a copy
School Entry Health Exam Form FL HRS form DH3040	We are required by state law to have an original file. See your doctor to obtain this form.
FL Certification of Immunization Form FL HRS form DH680	We are required by state law to have an original file. See your doctor to obtain this form.
Registration Fee	Paid at enrollment - fees are non-refundable

**If Applicable:**

VPK Certificate	
Is the Student a legal resident of the United States?	If the child was born outside the U.S.A., we must have copies of all necessary forms which permit the child to go to school in the U.S.A.
Is the student living with guardians?	If the student is living with guardian rather than parents, we must have a copy of legal guardianship or adoption papers.

*\*\*\* Do not sign below until registration is completed by the office\*\*\**

I have submitted all the above required documents and fees for my child to be enrolled:

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

\_\_\_\_\_  
Date

I have verified that all the above required documents and fees for this child to be enrolled have been received:

\_\_\_\_\_  
PCA Office Staff

\_\_\_\_\_  
Date

<b>Office Use Only</b>	
<b>K4:</b>	Full day
VPK	Non-VPK



# PARKWAY

CHRISTIAN ACADEMY

## 2019-2020 SCHOOL YEAR APPLICATION FOR ADMISSION

Students Full Name: \_\_\_\_\_ Age \_\_\_\_\_  
Last First Middle

Birthdate \_\_\_\_\_ Students Social Security# \_\_\_\_\_ Home Phone: \_\_\_\_\_

Street Address: \_\_\_\_\_  
Street Address City/State Zip Code

Mailing Address: \_\_\_\_\_  
(If different) Street or P.O. Box City/State Zip Code

Gender: Male Female Applying for grade \_\_\_\_\_ Repeated any grade \_\_\_\_\_ Grade last attended? \_\_\_\_\_

Church you attend: \_\_\_\_\_ How often? \_\_\_\_\_

Are there any unusual factors in the child's life (absence or invalidism of a parent, adoption, unusual accidents, serious illness, grandparents in the home, custody issues, etc.)? Yes/No If yes, please explain: \_\_\_\_\_

### School Information

Name of previous school: \_\_\_\_\_ School's Phone: \_\_\_\_\_

Address of previous school: \_\_\_\_\_  
Street address City/State Zip Code

Has the child ever been disciplined, suspended, or dismissed from another school? Yes/No If yes, please explain: \_\_\_\_\_

Do you plan for your child to complete their education at PCA? Yes/No If not, why? \_\_\_\_\_

Are you applying for the admission of all your school-aged children? Yes/No If not, why? \_\_\_\_\_

Parent / Legal Guardian # 1 Information (if legal guardian, copy of official papers must be submitted) both parents listed on a birth certificate are legally allowed to pick up children, unless the school has been provided with official court documents stating otherwise.

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address (if different from child's) \_\_\_\_\_  
Street City/State Zip Code

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

Email Address: \_\_\_\_\_

Marital Status: Married Separated Divorced Widowed Single

Parent / Legal Guardian #2 Information (if legal guardian, copy of official papers must be submitted):

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address (if different from child's) \_\_\_\_\_  
Street City/State Zip Code

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

Email Address: \_\_\_\_\_

Marital Status: Married Separated Divorced Widowed Single

<b>Office Use Only</b> Enroll Date: _____ Grade Entering: _____
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<b>Office Use Only</b> K4: Full Day AM VPK Non-VPK PM
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## **STATEMENT OF FAITH**

1. We believe in the plenary, verbal inspiration of the Old and New Testament Scriptures in the original autographs and that these writings are inerrant and supreme and final in all matters of doctrine and life.
2. We believe in one God eternally existing in three persons: Father, Son, and Holy Spirit. We believe in Jesus Christ's deity and humanity, His conception by the Holy Spirit, His virgin birth, His bodily resurrection, and His personal, visible return with power and great glory.
3. We believe that man being created by a direct act of God was righteous, free, moral being; that he sinned and thereby incurred the penalty of physical and spiritual death not only for himself, but also for the entire human race, with the result that we are all sinful by nature.
4. We believe that Jesus Christ, by His substitutionary death on the cross, made salvation possible for all who will receive Him as their only Savior; that these, who are regenerated by the Holy Spirit, will never perish; and that it is utterly impossible for anyone to be saved except by Jesus Christ.
5. We believe that the universal, invisible church is composed of all believers; that the local, visible church is a congregation of baptized believers in a particular locality associated for worship, fellowship, service, and the observance of the ordinances; that this local church is independent and the only authority over it is that of Christ and the Word of God.
6. We believe that God has commanded that no intimate, sexual activity be engaged in, outside of a marriage between a man and a woman. We believe that any form of homosexuality, lesbianism, bisexuality, incest, adultery, and pornography are sinful perversions of God's gift of sex. We believe that God disapproves of and forbids any attempt to alter one's gender by surgery or appearance. We believe that the only legitimate marriage is the joining of one man and one woman.



# PARKWAY

CHRISTIAN ACADEMY

2019-2020 SCHOOL YEAR

## K4 REGISTRATION INFORMATION

Three options for K4:

- Each option includes books.
- Option A requires only completed enrollment papers.
- Options B & C require a \$100 registration fee and completed enrollment papers.
- Lunch may be purchased with Options B or C

Option A (no cost to parent)

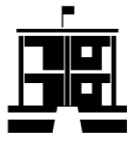
- VPK Allotment for 3-hour program only (8:15a.m-11:15a.m.)
- Parent must obtain Certificate of Eligibility from The Office of Early Learning.
- No lunch is available

Option B (only available to children who do not qualify for VPK)

- Half day K-4 (8:15 - 11:15) is \$4000 and full day (8:00 - 3:00) is \$5500
- Can be paid in 10 or 12 monthly payments.

Option C (VPK program plus all day wrap around program)

- \$3,000 (paid by parents) plus VPK Allotment for the full-day program
- Can be paid in 10 or 12 monthly payments.
- Parent must obtain a certificate of eligibility from The Office of Early Learning.
  - ❖ Take child's birth certificate
  - ❖ Take proof of Florida residence



## K4 INFORMATION SHEET

Please visit the website of The Office of Early Learning ([www.familyservices.floridaearlylearning.com](http://www.familyservices.floridaearlylearning.com)) to learn more about what is necessary for you to receive the VPK funds for your child's K4 education.

1. You do not have to accept voluntary pre-kindergarten funds for your child to be enrolled in our program, but it is a financial benefit you may want to consider.
2. The VPK allocation only pays for three (3) hours of instructional time; other costs are additional.
3. Lunches are \$4.00 per day or you may pack a lunch for your child.
4. K4 students must wear school uniforms. *Please refer to the student's handbook for the dress code policy.*
5. Books for your child are included in the VPK program.
6. To register your child for the 8:00-3:00 program, you must pay the \$100.00 registration fee. If you are only enrolling your child in the 3-hour instructional program there are no additional fees, but enrollment papers must be completed and turned in.
7. Parents and/or students not complying and cooperating with school policies will be subject to having their child dismissed from the program.



**2019-2020 FINANCIAL AGREEMENT**

*Please Read This Document Carefully*

Student Name(s): \_\_\_\_\_

1. I understand that it is the policy of PCA to make no refund of fees. Initial \_\_\_\_\_
2. I understand that payments are due the 1<sup>st</sup> of each month. If account is not current by the 10<sup>th</sup> of the month, a \$50.00 late fee will be charged to my account. Initial \_\_\_\_\_
3. I understand that if my account is still delinquent (this includes all charges on the account: cafeteria, music, aftercare) on the 20<sup>th</sup> of the month, my child(ren) will not be permitted to attend classes until the account is satisfied. I further understand that these absences will be unexcused.  
Initial \_\_\_\_\_
4. I understand that the first tuition payment must be paid by August 1<sup>st</sup> and the last tuition payment must be paid by May 1<sup>st</sup>. If my account is not current by May 10<sup>th</sup>, my child(ren) will not be permitted to return to class on May 12<sup>th</sup> or thereafter until the account is satisfied. I further understand that these absences will be unexcused. Initial \_\_\_\_\_
5. I understand that my account will be charged a \$40.00 returned check fee for each check returned on my account. After the 2<sup>nd</sup> returned check, I understand that my account will be on a cash or money order only basis for the rest of the school year. Initial \_\_\_\_\_
6. I understand that there will be a financial hold on my child(ren)'s report card(s) and school records if my account is not current at the end of each grading period. This financial hold will remain in effect until the account is current. Initial \_\_\_\_\_
7. If my student is withdrawn or dismissed for any reason and has attended any school day of the month I am still required to make that month's tuition payment in full. Initial \_\_\_\_\_
8. I understand that tuition payments are based on a yearly basis divided into equal payments; not on the number of days a student has attended each month. Initial \_\_\_\_\_
9. I understand that I am ultimately responsible for all payments to this account. Initial \_\_\_\_\_
10. I understand that I will be charged from 3:00p.m. to 6:00 p.m. if I do not sign my child out of Aftercare. Initial \_\_\_\_\_
11. I understand that I will be charged for Aftercare on half days from dismissal time until the time I pick up my child(ren), at the rate of \$3.00 per hour. Initial \_\_\_\_\_



# PARKWAY

CHRISTIAN ACADEMY

I have read and fully understand the Financial Agreement

Payee's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Payee's Driver's License Number: \_\_\_\_\_  
(We must have this on file before we can accept child(ren) for enrollment.)

Father/Primary Guardian: \_\_\_\_\_ Work # \_\_\_\_\_

Mother/Secondary Guardian: \_\_\_\_\_ Work # \_\_\_\_\_

Billing Address: \_\_\_\_\_

Home Phone # \_\_\_\_\_ Email \_\_\_\_\_

\*\*\*\*\* For Office Use Only \*\*\*\*\*

### Tuition Calculation

Students Names (First & Last)	Grade	Registration Fees	Tuition	Matriculation	Class Fees	Books
Oldest:						
2nd:						
3rd:						
4th:			-0-			
5th:			-0-			

Monthly Account Total: \$ \_\_\_\_\_





## **K4 GENERAL POLICIES**

### **K4 ATTENDANCE POLICIES**

There is probably no factor more important to successful school progress than regular school attendance. Students who are absent excessively from the instructional program will fall behind in academic achievement. Excessive school absenteeism precedes grade failure, loss of interest, and may result in students being withdrawn from school.

The parent of any K4 student who frequently misses instructional time due to several tardies or early pick-ups will be called in for a conference with the VPK Director and will be subject to withdrawal of their child. Students may be immediately withdrawn if their absence leave becomes excessive in to the point that their academic success is hindered.

Students who are absent must supply a written note from a parent to excuse the absence. After ten (10) absences during the year, a doctor's note is required.

**Tardy** - K4 Students are expected to be on time at 8:15 a.m. - in their seats and ready for class to begin. Tardies to school require a written excuse from the parent, stating the reason. Students arriving after 8:15 a.m. are to be brought to the school office by a parent to receive a tardy slip. Habitual tardiness and/or early pick-ups may lead to dismissal from school.

**Absence** - A student accumulating 10 or more unexcused absences in a school year will be subject to the withholding of a passing final grade, pending a review of the absences by the administration.

K4 students who are absent for class for more than one hour of instructional academics will be counted as being absent for ½ day. Students who are absent from class for more than two hours of instructional academics will be counted as absent all day. This will include any portion of academic time that the student spends in the clinic.

The following are acceptable reasons for absences: student illness, medical appointment, death in the family, school-sponsored events or activities previously approved by the school. Students who are absent must present a written note from their parent and or doctor upon returning to school stating the reason for absence (without a valid reason, the absence cannot be excused). The student may only be absent 10 days during the school year (for any reason) before a doctor's note will be required. Doctors' notes must include the date(s) to be excused, the date the student may return to school, and whether the absence was due to illness or injury. A receipt from the doctor's office is not a doctor's excuse. Please refer to the *Parent/Student Handbook* for policies on pre-excused absences.

### **ILLNESS**

For the well-being of all our students and faculty please do not send your child to school with a fever of 100.5 or higher. If a student becomes ill at school and is sent home, he must be symptom free for 24 hours before returning to school (no fever, diarrhea, vomiting). This means he cannot return to school the next school day, unless he was sent home on a Friday.



**K4 DISCIPLINE POLICY**

K4 discipline is handled in the following ways: verbal warning to the student, marks given on daily conduct report, yellow note sent home by the teacher, pink note sent home by the VPK Director, and extracurricular activities withheld.

In the event the student has been sent to the school administrator, the following steps will be followed:

1. The parent will be called and asked to speak with their child on the phone.
2. The parent will be called and asked to pick up their child from school for the remainder of the day.
3. The parent will be called and asked to pick up their child from school for the remainder of the day and student will not be allowed to return the following day.
4. The parent will be asked to withdraw their child from Parkway Christian Academy.

The steps listed above are disciplinary procedures followed for most discipline issues. However, in the event of behavior that is harmful to other students, disruptive to the learning environment, or a blatant refusal to obey authority, a student may be dismissed without following the above steps.

PCA policy also allows for the dismissal of a student whose parent(s)/guardian(s) is uncooperative or unsupportive in reference to school policies and/or school authorities.

I have read, understand, and agree to abide by the attendance and discipline policies of Parkway Christian Academy.

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student Name



# PARKWAY

CHRISTIAN ACADEMY

2019-2020 SCHOOL YEAR

## PARENTAL PERMISSIONS & AGREEMENTS

Student's Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Date: \_\_\_\_\_

### Parent/Student Handbook Agreement

I know the Parent/Student Handbook contains the policies, procedures, and rules governing students while at Parkway Christian Academy (PCA). I understand that it is my responsibility to obtain a copy to learn and adhere to these policies, procedures, and rules.

\_\_\_\_\_  
Signature of Parent or Guardian

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### Materials/Library Books Responsibility

I will be responsible for all materials, including library books, that are issued to my child for school use. In the event such materials/books or property are lost or destroyed, I understand that I must make payment to the school to cover the loss.

\_\_\_\_\_  
Signature of Parent or Guardian

.....

### Permission to be Photographed

I give my permission for my child's picture to be used on PCA's website, in advertisements, or in the event of video or media coverage at our school.

\_\_\_\_\_  
Signature of Parent or Guardian

.....

### Permission for Field Trips

This is to certify that my child may go on all scheduled field trips and I agree to release and discharge Parkway Christian Academy, its officers, agents, and employees from liability (all claims and demands/rights and causes of action) growing out of personal injuries and property damage resulting or occurring during the aforementioned activity, or in transit to and from such activity. (Written notice will be sent home prior to each field trip.)

\_\_\_\_\_  
Signature of Parent or Guardian



## Medication Policy

If you would like your child to be given external or internal medication during school hours, you must complete a Permission to Administer form (available at the front office). No medication will be administered without a signed Permission to Administer form from the parent/guardian on file.

\*\*\* All prescribed and over-the-counter medications to be administered by school personnel shall be received and stored in original containers.

\*\*\* The parent or guardian only should transport medication to office personnel.

I have read and understand the above Medication Policy and I understand that a more comprehensive explanation is in the *Parent/Student Handbook*.

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Signature of Parent or Guardian



2019-2020 SCHOOL YEAR  
STATEMENT OF COOPERATION

Student's Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Date: \_\_\_\_\_

1. The school reserves the right to dismiss any student who himself or whose parent does not respect its spiritual standards, statement of faith, philosophy, or who does not fully cooperate in the educational process. Parents who are not in harmony with the school's Christian teachings or discipline policies may be denied admission for their child or may have their child administratively withdrawn.
2. We pledge our support to the goals and ideals of Parkway Christian Academy and will bring all questions and concerns directly to the VPK Director so that they may be properly considered.
3. We have read the statement of faith and the philosophy of education and are willing to have our child trained in accordance with them.
4. It is our understanding that it is the school's policy to make no refunds on registration fees.
5. We give Parkway Christian Academy permission for our child to take part in all school activities, including field trips and school sponsored trips away from the school premises.
6. We believe that discipline is necessary for the welfare of each student as well as for the entire school. We give permission for our child's teacher and/or other agents of the school to make and enforce classroom regulations in a manner consistent with Christian principles and discipline as set forth in the Scriptures. (Parkway Christian Academy does not administer corporal punishment.)
7. We agree to hold the school and its agents harmless for any liability to our child or any guardian or parent thereof; because of any injury or alleged injury to our child. Should legal action, for any reason, be taken against Parkway Christian Academy or any employee or agent thereof, on our child's behalf and the school or its agent not be found at fault, we agree to pay any attorney fees, court fees, damages or other costs that Parkway Christian Academy or its agent should incur to defend itself against such action, and would immediately withdraw our child from school as soon as such action has begun.
8. We understand that it is our responsibility to obtain and read the entire contents of the *Parent/Student Handbook*, and we are willing to abide by all the regulations stated therein.
9. The statement of cooperation will be in effect for as long my student attends Parkway Christian Academy whether it be in K4, kindergarten, elementary, junior/senior high, or summer school.

Signatures of both parents or legal guardians required\*

\_\_\_\_\_  
Parent or Legal Guardian # 1

\* \_\_\_\_\_ I am this child's only parent or legal guardian.

\_\_\_\_\_  
Parent or Legal Guardian # 2

\_\_\_\_\_  
Date