

CIRCLE CHRISTIAN SCHOOL

Student Application

OFFICE USE ONLY	
F Code	_____
S Code	_____
Other	_____

This form is only to be used by an existing Circle family applying to add a new student.

Current Circle Family # _____ Today's Date: _____

Applying for 20____ - ____ School Year Grade Entering: _____

Student's Full Name: _____ Student goes by the name: _____

Gender: ___ M ___ F Student Social Security #: _____

Date of Birth: _____ Age: _____ Place of Birth: _____

Has student previously been enrolled in Circle? ___ Yes ___ No If Yes, when? _____

Student E-mail Address (REQUIRED for all students in grades 7-11): _____

Student Cell Phone (if exists for students in grades 7-11): _____

Student Cell Phone is authorized to receive text message communication from Circle ___ Yes ___ No

Ethnicity and Race (Check one from each. This information is collected in keeping with state and federal reporting guidelines.)

Ethnicity: Is student of Hispanic / Latin Origin? ___ Yes ___ No

Race: ___ American Indian/Alaska Native ___ Asian ___ Black/African American

___ Native Hawaiian/ other Pacific Islander ___ White

STUDENT EDUCATION HISTORY

Grade	Year	Name and Location of School	Check type: Public	Private	Homeschool
K					
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					

HOUSEHOLD / PARENTAL INFORMATION

Student's biological/legal parents are: ___ Married and living together ___ Separated ___ Divorced ___ Other

In case of Separation or Divorce, who has legal custody? _____

If Other, explain: _____

Attach documentation related to custody declarations. In joint custody situations, Circle may require a letter from the other parent granting consent for enrollment in Circle. If either biological parent is not listed below, attach an explanation including the parent's name, location, and current relationship to the student.

Is this student adopted? ___ Yes ___ No If Yes, at what age? _____



Complete this PAGE ONLY if this student resides part time in another home due to joint custody, etc. and/or the emergency contacts and individuals authorized to pick up this student are different than the information provided related to other students in the family.

OTHER HOME WHERE STUDENT LIVES	
Home Phone: _____	Address: _____
	City/State/Zip: _____
Indicate relationship to student: ___ Father / ___ Stepfather Other _____	Indicate relationship to student: ___ Mother / ___ Stepmother Other _____
Full Name: _____	Full Name: _____
Goes by the name: _____	Goes by the name: _____
E-mail address: _____	E-mail address: _____
Occupation: _____	Occupation: _____
Business Name: _____	Business Name: _____
Business Address: _____	Business Address: _____
City/State/Zip: _____	City/State/Zip: _____
Work Phone: _____	Work Phone: _____
Cell Phone: _____	Cell Phone: _____
Cell authorized to receive CCS text messages? Yes No	Cell authorized to receive CCS text messages? Yes No
Church Affiliation: _____	Church Name: _____
Are you a member of the church? Yes No	How long in attendance? _____

Emergency Contacts

Name	Phone	Relationship to Student

Individuals Authorized to Pick Up Students from Campus Locations

For students who participate in classes and programs on our campuses, please provide a security password which will allow our staff to release the student to the designated individuals you specify.

Security Password _____

Name	Phone	Relationship to Student



STUDENT EDUCATION HISTORY - (Failure to disclose information may result in loss of this student's enrollment status. Attach additional documentation and/or explanation as needed for the questions listed below.)

School holding student's files: _____

Address: _____

City, State, Zip: _____

If homeschooled: County _____ State _____ What years? _____

Homeschooling documentation

If the student has been homeschooling, provide a report card/transcript, including the curriculum used for each of the prior three years for grades 1-11. For students in grades 9-11: For all courses to be given high school credit, samples of the student's work must be provided. This includes: assignments from the beginning, middle, and end of the school year; copies of course specific tests (chapter, midterm, final); and copies of any research papers.

Has this child exhibited any of the following or been treated in one of the ways described below? Please check all items that apply for each question below.	Never	Tested but undiagnosed	Diagnosed	Treated previously	Treated currently
ADD					
ADHD					
Autism spectrum					
Developmental delays					
Dyslexia					
Occupational therapy					
Physical therapy					
Speech therapy					
Other					
Does student have a Behavior plan?					
Does student take medication before, during, or after school?					
Does student have an IEP or 504?					
Does student need classroom accommodations?					

Has this student ever repeated or been held back in any grade? ___ Yes ___ No If Yes, which grade? _____
Please explain:

Has this student ever been involved in behavior that resulted in disciplinary action, including being suspended, expelled, arrested or asked to withdraw from another school?
___ Yes ___ No If Yes, attach information with name of the school and related details.

Has a school official, psychologist or other professional ever evaluated this student for academic, behavior, emotional or attention difficulties? If Yes, please attach a copy of the evaluation report and/or diagnostic result to this application.

If evaluation report is not attached, the application will not be accepted for review.



PRIMARY ACADEMIC OVERSEER - (Attach additional documentation as needed.)

Because Circle utilizes a parent-directed component in its educational model, it is essential to identify the *parent/guardian* who will assume the role of *primary academic overseer* for this student. The *primary academic overseer* is the person that Circle will communicate with regarding the academic needs, requirements, and progress of this student.

NOTE: If your student has learning disabilities, it is the obligation of the *primary academic overseer*, not Circle teachers, to provide accommodations for the learning disabilities.

The questions on this page relate to and should be completed by the *primary academic overseer*.

Name of the *primary academic overseer*: _____

Relationship to student: _____

Does the *primary academic overseer* work outside the home? Yes No

If Yes, what arrangements are in place to ensure the academic and physical oversight and well-being of this student when the *primary academic overseer* is not available?

What level of academic performance do you feel this student has achieved in the last year or so?

High Above Average Average Below Average

In your opinion, what level of academic performance do you feel this student should be achieving?

High Above Average Average Below Average

Upon what do you base your opinion?

Why are you seeking enrollment in Circle for this student at this time?

Do you plan to enroll the student in Circle classes and/or programs? Yes No

If Yes, which classes or programs are you considering?

If Yes, what classroom accommodations do you expect?

What expectations do you have of your child as a student?



COVENANT AND AGREEMENT

All Parents and Students (Grades 7-11) should read the following statements.

Circle Christian School is a private Christian organization that exists for the purpose of glorifying the Lord Jesus Christ by assisting Christian families in providing Godly education and academic excellence. The school adheres to the conviction that God has ordained that parents are primarily responsible for the education of their children. The school provides assistance and support to Christian parents who subscribe to this belief.

The two-fold goal of education is first to create within the student the desire to learn and, secondly, to give the child the ability to relate well to the world around him. The goal of Christian education is to accomplish this while acknowledging and applying the absolute standard of God's Word, the Bible. Because education is more than the mere gaining of academic knowledge, the school is committed to encouraging an environment in which families can more effectively cultivate the qualities of Character, Integrity, Responsibility, Creativity, Leadership, and Excellence in every facet of life.

Covenantal Relationship

Circle is a covenant school that partners with students and parents. A covenant is a binding agreement between two parties. It signifies a solemn oath and sincere pledge of mutual respect and cooperation. Circle covenants to provide the best it can for its students and families through the programs and services it offers. Additionally, Circle pledges to do all it can to support each household in growing every student in the nurture and admonition of the Lord. Circle expects students and parents to covenant with the school by faithfully fulfilling all their responsibilities and complying with all school policies and procedures.

Disagreement

If for some reason parents and/or students become dissatisfied with Circle, all parties should seek to resolve the matter with the person(s) involved, rather than spreading criticism and negativism. (Matthew 18:15-17, 5:23-24). The parties should engage in the process of resolving conflicts as part the partnership with Circle. This process may integrate the use of other parties to facilitate the conflict to a resolution.

Student Appearance and Behavior

In order to provide the assurance of a wholesome Christian atmosphere and to prevent any negative reflection on the school itself, Circle reserves the right to review any pertinent information, records, or circumstance of any applicant or enrolled individual or family. Circle reserves the right to ask for letters of referral or may contact former schools, etc. to request references regarding any individual or family. Any information gathered will be kept confidential. The Board of Directors reserves the right to take whatever steps it deems necessary toward any individual or family in order to insure that Circle's reputation and purpose are not hindered. Such action includes, but is not limited to, the denial of enrollment or removal from enrollment of any student or family. In the event of action by the Board of Directors, all student records will remain confidential and will be kept by Circle.

Student Covenant Codes

The school has a series of codes that all students are expected to follow. Students are expected to exhibit an appearance and behavior that will be appropriate and in keeping with a Christian testimony in accordance with traditional Biblical standards. The Administration reserves the right to dismiss any student who fails to comply with these standards from an activity or class. Continued behavior in opposition to these standards may result in exclusion from school events.

View the complete Student Covenant Codes at:

https://s3.us-east-2.amazonaws.com/circlechristianschool/2019-20+Documents/2019-20_StudentCovenantCodes_R01162019.pdf

Student Initials _____



STUDENT QUESTIONNAIRE

This form is **ONLY** for students entering grades 7 and above.

Please return this form with your Student Application. *The following questions are to be answered by the applying student.* If more space is needed, attach additional pages, giving the number of the questions being answered.

Student's Full Name: _____ Gender: ___ M ___ F Grade Entering: _____

1. How do you feel about being enrolled at Circle Christian School?

2. Are you a Christian? ___ Yes ___ No If Yes, tell how and when you became one.

3. Where do you attend church? _____ How often do you attend? _____

4. Are most of your friends Christians? ___ Yes ___ No How do you know?

5. When you get together with your friends, what do you like to do?

6. Do you like to read? ___ Yes ___ No How often do you read a book? _____

7. Name a book you recently read and tell why you chose it:

8. What are your 3 favorite TV shows? _____

9. What are your 3 favorite music albums?

10. Do you have a job after school? ___ Yes ___ No On weekends? ___ Yes ___ No
If Yes, where? _____

11. Have teachers had to remind you to change your behavior? ___ Yes ___ No
If Yes, what behavior do they want you to change? _____

12. Have you ever had in-school detention, suspension or expulsion from school? ___ Yes ___ No
If Yes, please explain:

13. Have you ever been arrested? ___ Yes ___ No
If Yes, please explain:

With my signature below, I certify that I have answered the above questions honestly and completely.

Student signature: _____ Date: _____

Student E-mail: _____



Student Cell phone: _____

STUDENT WORLDVIEW SURVEY

The following questions are to be answered by the applying student in grades 7 and above.

Because the success of Circle Christian School is dependent on the values and investment of all participating parties, we desire to enroll families with a worldview that complements the position of Circle Christian School and the student's classroom experience. *All incoming faculty, staff, parents and students (grades 7–11) will complete this survey in the application process.*

1. Which statement comes closest to what you believe?

- God exists in the minds of some individuals only for the purpose of creating meaning and value.
- God is a being who designed the universe and “set it in motion” but who remains uninvolved or, at best, a distant observer.
- God is the Creator of the universe. He has concern for and is closely involved with His creation.

2. Which statement comes closest to what you believe?

- I believe that the Bible is the infallible Word of God and is accurate in all of its teachings.
- I believe that the Bible is a great piece of literature written by men, not inspired by the Holy Spirit.
- I believe that the Bible is open for interpretation and contains some discrepancies.

3. Which statement comes closest to what you believe?

- I believe that Jesus Christ was a real person, but not the Son of God.
- I believe that Jesus Christ is the Son of God and lived a sinless life on earth.
- I believe that Jesus Christ was simply a great teacher.

4. Which statement comes closest to what you believe?

- I believe that there is a set of absolute moral guidelines established by God that applies to all cultures and times.
- I believe that there are no absolute standards, therefore, each person develops their own moral standard.
- I believe that morality is relative to each individual and situation – what may be wrong for one person may not be wrong for another person.

5. Which statement comes closest to what you believe?

- I believe that eternal salvation can be earned through belief and good works.
- I believe that salvation is granted by God to those who achieve a certain level of perfection.
- I believe that salvation is a free gift from God through Jesus Christ and cannot be earned.

6. Which statement comes closest to what you believe?

- I believe in the story of creation and rely on God to work out His plan for mankind.
- I believe that I am a product of evolution and God did not create mankind individually.
- I believe that our origin is a mystery and we won't ever know our true source of existence.

7. Which statement comes closest to what you believe?

- I am not sure whether there is a heaven or hell.
- At death, one ceases to exist – there is no life after death, no heaven or hell.
- At death, everyone will spend eternity in either heaven or hell.

8. Which statement best describes your personal faith?

- I don't know exactly how to describe my faith, but I want to know more about being a follower of Jesus Christ.
- I have accepted Christ as my Lord and Savior and believe He is the only way to heaven.
- My faith is a personal matter and does not necessarily include a belief in Jesus Christ.

I have answered honestly and forthrightly this worldview survey as part of the application process at Circle Christian School.

Signature: _____ Date: _____

Student's Name: _____ Grade Entering: _____



STUDENT AGREEMENT OF CONDUCT

This form is **ONLY** for students entering grades 7 and above.

As a Christ-centered school, Circle Christians School desires that everyone associated with the school reflect a lifestyle consistent with Biblical teaching. Since the testimony of our lives is so significant, you are asked to read and sign the following agreement which pertains to student conduct both on and off campus, during and after school.

HONOR CODE

I, _____, accept each of the following Christian responsibilities:

To Love God Wholeheartedly — “Love the Lord your God with all your heart and with all your soul and with all your mind and with all your strength.” (Mark 12:30)

To Serve Others — “Do nothing out of selfish ambition or vain conceit, but in humility consider others better than yourselves. Each of you should look not only to your own interests, but also to the interests of others.” (Philippians 2:3-4)

To Obey Authority — “Obey your leaders and submit to their authority. They keep watch over you as men who must give an account. Obey them so that their work will be a joy, not a burden, for that would be of no advantage to you.” (Hebrews 13:17)

To Work Diligently — “Whatever you do, work at it with all your heart, as working for the Lord, not for men.” (Colossians 3:23)

ADDITIONALLY

- I will strive for excellence as a student in all that I say and do.
- I will obey Biblical principles with regard to speech and conduct.
- I agree to follow the guidelines found in the *Student Covenant Codes* and will comply with the school's discipline policy.
- I will show respect and cooperate with those in authority at the school.
- I will not try or use alcohol, drugs, and tobacco.
- I will avoid cursing, sexual immorality (including professions and behaviors related to pornography, fornication, homosexual/bisexual), witchcraft, dissension, and cheating. Galatians 5:19-23 presents a list of behaviors that are *of the flesh* in contrast to those that are *of the spirit*.
- I understand that I can be held accountable by the school for any negative behavior both on and off campus at anytime during the year. If the school determines the inappropriate behavior impacts my witness for Christ, the school's reputation and/or other Circle students or families in a negative manner, suspension or expulsion may result.

Signature: _____ Date: _____

Student's Name: _____ Grade Entering: _____

Understanding that God has ordained that parents are primarily responsible for the education of their children, I/we agree to work with the school to hold this student accountable for the above agreement of conduct.

Father's Signature: _____ Date: _____

Mother's Signature: _____ Date: _____



AFFIRMATION OF AGREEMENT and ACKNOWLEDGEMENT AND RELEASE

By signing below, I/we the parent(s) or guardian(s) of this student, affirm that I have given completely truthful information herein and that I have received, read, understand, and will abide by the policies and agreements in the *Statement of Faith, Parent's Statement of Support, Acknowledgements and Releases*.

Additionally, I grant permission for Circle Christian School to request and obtain all academic and disciplinary records pertaining to the enrollment of this student.

Submission of a student application does not constitute acceptance into the school.

Signatures of both parents are required, where applicable.

Father/Guardian Signature: _____ Date: _____

Mother/Guardian Signature: _____ Date: _____



STUDENT HEALTH RECORD AND EMERGENCY MEDICAL RELEASE FORM 2019-20



NOTE: This two-page document must be notarized.
Circle has staff members available to notarize at no charge.

Student Name: _____ Birth Date: _____ Male ___ Female ___

Address: _____

City: _____ State: _____ Zip: _____

Parent/Guardian Name: _____

Home Phone: _____ Father Cell: _____ Mother Cell: _____

Emergency Contact: _____

Phone: _____ Relation to student: _____

Insurance Information

Company Name: _____

Policy#: _____ Phone Number: _____

History

Does student carry an EPI PEN? Yes ___ No ___	___ Ear infections	___ Kidney trouble
___ Anaphylactic reactions	___ Cancer related	___ Fainting
___ Asthma	___ Constipation	___ Frequent sore throat
___ Bronchitis	___ Diabetes	___ Heart defects
		___ Seizure
		___ Stomach upsets
		___ Ulcer

Known Allergies

Drugs: _____

Foods: _____

Plants: _____

Insects: _____

Other: _____

Medications (NOTE: Circle Staff does not have authority to administer medications to students.)

Current medications/dosages: _____

Date of most recent Tetanus vaccine: _____



Student Name (continued from page 1) _____

Medical conditions or physical limitations to be aware of:

Activities I DO NOT want my child to be participate in:

CONSENT AND RELEASE

I hereby consent for my above named child to participate in the classes, programs, and events for which he/she is enrolled at Circle Christian School for the 2019-20 school year. If my child has medical conditions that may be relevant to a physician in the event of an emergency, I have listed them on this form. In the event an emergency occurs, I may be reached at the telephone number listed on this form. If I cannot be reached, I hereby authorize and grant permission for the Circle Christian School staff to obtain emergency medical care for my child. If there are any activities in which I do not want my child to be involved, I have listed them on this form.

I UNDERSTAND AND HEREBY AGREE TO ASSUME ALL OF THE RISKS WHICH MAY BE ENCOUNTERED DURING SAID ACTIVITY, INCLUDING ACTIVITIES PRELIMINARY AND SUBSEQUENT THERETO. I do hereby agree to hold Circle Christian School, Inc. and its agents, directors, and employees, harmless from any and all liability, actions, causes of actions, claims, expenses and damages on account of injury to my child or property, even injury resulting in death, which I now have or which may arise in the future in connection with the activity or participation in any other associated activities.

I expressly agree that this release, waiver, and indemnity agreement is intended to be as broad and inclusive as permitted by the law of the State of Florida and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect. This release contains the entire agreement between the parties hereto and the terms of this release are contractual and not a mere recital.

I further state that I HAVE CAREFULLY READ THE FOREGOING RELEASE AND KNOW THE CONTENTS THEREOF AND I SIGN THIS RELEASE AS MY OWN FREE ACT. This is a legally binding agreement that I have read and understand.

Parent or Guardian Signature Date

Printed Name of Parent or Guardian



NOTARY REQUIRED BEFORE SIGNATURE

STATE OF FLORIDA COUNTY OF _____

The foregoing instrument was acknowledged before me this _____ day of _____, 20_____.

Personally Known ____

Produced Identification ____ Notary Signature _____

Type of Identification _____ Notary Seal

