

FOR OFFICE USE ONLY

HOH ID _____

Name _____

Student ID _____

Applying for Grade _____

Start Date _____ Withdrew _____

Return by _____

_____ Secretary

New Enrollment _____ Re-Enrollment _____

Teacher _____

WVCA Siblings Grades _____



WEST VALLEY
CHRISTIAN ACADEMY
PRESCHOOL - 8TH

2020-2021
ENROLLMENT APPLICATION

*1790 Sequoia Blvd.
Tracy, CA 95376
Phone: (209)832-4072
Fax: (209)832-4074
www.westvalleychristianacademy.com*

A Ministry of Tracy Community Church

2019-2020 STUDENT APPLICATION

Student's Name _____
First Middle Initial Last
Grade Entering _____ Date of Birth _____ Male _____ Female _____
Home Address _____
Street City State Zip
Home Phone Number _____ May this number be shared with other parents? _____
Person responsible for payment _____

Address City State Zip
Name of last school attended _____ Has the child ever been retained? ☐ yes ☐ no
Has the child ever been suspended or expelled? ☐ yes ☐ no Does the child have an IEP? ☐ yes ☐ no

Parent/Guardian Information:

Father _____
Name Street City State Zip
Mother _____
Name Street City State Zip
Guardian _____
Name Street City State Zip

Student lives with: Father ☐ Mother ☐ Both ☐ Other ☐ _____

If the student does not live with both parents, who has legal custody of the child? _____
Do you have a court order? ☐ yes ☐ no If yes, please submit a copy of paperwork.

Please list name and address of non-custodial parent if we are to mail: statement newsletter both
(circle one of the above)

Sibling _____ Age/Grade _____ Attends or applying for WVCA-Grade _____ Wee Care Age _____
Sibling _____ Age/Grade _____ Attends or applying for WVCA-Grade _____ Wee Care Age _____

Place of Employment of Father/Guardian	Place of Employment of Mother/Guardian
Email	Email
Work# Cell #	Work# Cell#
Father's/Guardian's Drivers Lic.# Birth Date Social Security #	Mother's/Guardian's Drivers Lic.# Birth Date Social Security #

Emergency & Health Information: If you do not have a local emergency reference, please list an out of town reference.

Emergency Reference & Authorized Pick-up Phone #	Special Medications?
Address Relationship to the Student	Clinic/Medical Center Phone #
Emergency Reference & Authorized Pick-up Phone #	Any known allergies to medications? Food or milk allergies?
Address Relationship to the Student	Physician's Name Phone #
	Insurance Company Policy #

Yearly Enrollment & Re-enrollment Fee:

Kindergarten - Eighth Grade: \$200.00 before Feb. 14*
 \$250.00 Feb. 15-Mar. 20 and \$300 after April 25th.
 Fees for special class projects, extra-curricular sports
 and field trips are not covered. \$200.00 / 250.00 must be
 paid upon enrollment. Forms will not be accepted
 without the enrollment fee. **The \$200.00/ \$250.00 is
 waived after the third child in a family. The
 enrollment fee is non-refundable unless the child is
 not accepted to our school.**

***Must be current on your account.**

Additional Fees: Extra-Curricular Sports Fee for
 participating students in grades 5th-8th: \$100.00 per
 sport payable when each season begins.

Yearly Tuition:

	1 st Child	2 nd Child	3 rd Child
Kindergarten (full day only)	\$5,750.00	\$5,200.00	\$4,500.00
Grades 1-8	\$5,750.00	\$5,200.00	\$4,500.00

***Tuition is yearly and not monthly, but is billed over
 a 10 month period. The above rates would be divided
 by 10 to figure the monthly billing rate. Billing is
 from August through May. Students enrolling after
 August will pay the same monthly rate with a pro-
 rated amount due by the 1st day the child begins
 school. There is no additional fee for curriculum.
Books/curriculum are the property of WVCA.**

For Office Use Only:

Pro-ration:

Fees Paid:

***Students who withdraw early must give 2 weeks
 notice in writing or ½ months tuition will be charged.
When a student withdraws all books/curriculum are
 to be returned to the school.**

*Payments are due on the 1st of each month. A late fee
 of 10% will be assessed if paid after the 3rd. Our entire
 budget comes from tuitions paid, as we have no other
 source of income. Any check returned to the school by
 the bank will result in a \$25.00 charge to the account.
 At the time of billing, any account that has a balance
 from the previous month is considered in arrears. You
 will be asked to withdraw your child from the school
 until your account is paid in full. Your child's spot
 cannot be guaranteed to stay open. We will call from
 the waiting list.

***I have read, received a copy and agree to all of the
 above financial requirements:**

 Parent/Guardian Name (Printed)

 Parent/Guardian Signature Required

Extended Care:

WVCA partners with WVCA Cougar Club, a licensed
 child care provider, offering our WVCA K-8th grade
 students access to before and/or after school care during
 the school year, and Summer Camp during the summer
 months. If you need more information, go to Cougar
 Club offerings on our website at:

www.westvalleychristianacademy.com

Medical Treatment Consent:

In the event that our child, _____,
 becomes ill or sustains an injury while under the care of
 West Valley Christian Academy, we give our
 permission to those in charge to take whatever steps as
 are deemed necessary for the health and welfare of our
 child. If it is not possible to reach the doctor listed,
 consent is given to any licensed physician to administer
 drugs or medicines, and/or perform such surgical
 procedures as he/she shall think the emergency requires
 for the relief of pain and to preserve our child's life or
 health. We hereby agree to pay for any and all of the
 expenses incurred by such illness or injury.

West Valley Christian Academy does not supply any
 type of medication because of state laws governing the
 dispensation of medication. All medications must be
 supplied by the parent/guardian in the original container,
 whether prescription or over-the-counter. All
 medications must be accompanied by a written consent
 form that you can pick up in the school office.

Binding Christian Arbitration:

We agree to resolve all disputes and grievances by first
 using the Biblical Conflicting Principles found in
 Matthew 18:15-17 and, if unsuccessful, resolve all
 claims by Binding Christian Arbitration (separate
 agreement).

Parental Support:

We agree to support the Code of Conduct and all other
 policies of West Valley Christian Academy regarding
 discipline, dress code, homework, school attendance,
 parental functions, extracurricular activities, and
 spiritual training, which include regular church
 attendance at a church of our choice. If we have
 questions, disagreements, conflicts or concerns we agree
 to work it out with the teacher rather than let it cause
 discontentment pursuant to the process described in
 Matthew 18:15-17.

Initial_____

STATEMENT OF FAITH

West Valley Christian Academy (also known as WVCA) was founded and functions upon the basic fundamental principles of the Word of God, and it espouses the historic Christian view of life as presented in the Bible. The following statements of faith and practice are held by every West Valley Christian Academy employee and school family:

1. We believe the Bible to be the only inspired, infallible, authoritative Word of God (2 Timothy 3:15, 2 Peter 1:21).
2. We believe there is one God, eternally existent in three persons: Father, Son and Holy Spirit (Genesis 1:1, Matthew 28:19, John 10:30).
3. We believe in the deity of our Lord Jesus Christ (John 10:33), His virgin birth (Isaiah 7:14, Matthew 1:23, Luke 1:35), His sinless life (Hebrews 4:15, 7:26), His miracles (John 2:11), His victorious and atoning death (1 Corinthians 15:3, Ephesians 1:7, Hebrews 2:9), His resurrection (John 11:25, 1 Corinthians 15:4), His ascension to the right hand of the Father (Mark 16:19), and His personal return in power and glory (Acts 1:11 and Revelation 19:11).
4. We believe in the absolute necessity of regeneration by the Holy Spirit for salvation because of the exceeding sinfulness of human nature and that men are justified on the single ground of faith in the shed blood of Christ and that only by God's grace and through faith alone we are saved (John 3:16-19, 5:24, Romans 3:23, 5:8-9, Ephesians 2:9-10, Titus 3:5)
5. We believe in the resurrection of both the saved and the lost, they that are saved unto the resurrection of life, and they that are lost unto the resurrection of damnation (John 5:28-29).
6. We believe in the spiritual unity of believers in our Lord Jesus Christ (Romans 8:9, 1 Corinthians 12:12-13, Galatians 3:26-28).
7. We believe in the present ministry of the Holy Spirit by who's indwelling the Christian is enabled to live a godly life (Romans 8:13-14, 1 Corinthians 3:16, 6:19-20, Ephesians 4:30, 5:18).

ADMISSIONS POLICIES

We reserve our First Amendment right to select, discipline and terminate students on the basis of academic performance, religious criteria, and personal qualifications, including a willingness to uphold the school's religious requirements as well as cooperate with the staff and administration of West Valley Christian Academy. Attendance at WVCA is a privilege, not a right. Students will strive to do their best in all areas. WVCA is not a refuge for students who will not cooperate, have had previous behavioral problems in other schools, or who will not apply themselves to the best of their academic abilities. Students that have been suspended or expelled will not be admitted. Students seeking admission will be evaluated on the basis of their transcript, interview (if requested by the Principal) and the ability to perform satisfactorily at WVCA. Students with less than a "C" average in their academic subjects may have difficulty attaining a satisfactory level of academic achievement. WVCA Academy is not equipped with resources needed to serve children with special educational needs. The student must have a sincere desire to attend West Valley Christian Academy and be willing to submit to all the standards and regulations of the school as outlined in the WVCA Handbook.

PARENT AGREEMENT

ACADEMICS: We will encourage, support and help our child in homework, memorization, projects and study habits.

CONDUCT: We understand that the standards of WVCA do not tolerate profanity or obscenity by word or action, or disrespect to students, personnel of the school or of the church.

DAMAGES: We will pay for damage caused by our child, to include paying for lost or damaged text books.

DISCIPLINE: The school shall have authority to discipline our child (in accordance with applicable California State laws), and we will require our child to comply with all school regulations. We further agree that we will cooperate and discipline our child in the home as needed. We understand that a child who persists in unacceptable conduct will not be permitted to remain in school.

GRIEVANCES: We will endeavor to communicate our grievances honestly and directly to those involved and to forget them quickly. We agree not to pursue outside redress against other Christians, the school or church. Matthew 18:15-17 gives a process for settling of disputes. First privately, then within a small group, then with the congregation. The same holds true in principle for the school. Speak first with the teacher before going up the ladder of authority. Does your child have a continuing disagreement with another child? Call that child's parents. Going to other parents first is an indication you feel your position in the matter is weak and you want others to take sides. Known as third party offenses, a person may have a grievance with someone but rather than go to them first, they share it with others. Often the two principals in the problem eventually settle and leave others with unresolved, hard feelings.

PHOTOS: We hereby authorize WVCA to photograph or permit other persons to photograph our child while under their care, and agree that they may use or permit other persons to use the negatives or prints prepared for such purposes and in such manner as may be deemed desirable for the support and promotion of WVCA. (National Heart Association, Field Trips, Chapel, Yearbook and Other). **Initial**_____

VISION SCREENING: We hereby authorize WVCA to conduct vision screening on our child. This will be done by a professional pediatric vision screener once a year for all kindergarten – third grade students or a teacher/parent request for 4th – 8th. **Initial**_____

PLACEMENT: The school has full discretion in the placement of our child. *Requests for teachers will not be accepted.*

PARENT/STUDENT AGREEMENT: We have discussed the agreement with our child(ren) and have explained its importance to them. He/She agrees to cooperate with the staff as they give guidance. We agree to prayerfully strive to meet the standards of guidance and conduct as set forth herein and all rules, policies and procedures including the school's Statement of Faith, Code of Conduct, Student Handbook policies and standards, as well as Binding Christian Arbitration Agreement.

Amended by WVCA Board 2016

Father/Guardian's Signature

Date

Mother/Guardian's Signature

Date

Kindergarten Explanation of Forms & Immunizations

A copy of the child's birth certificate must be returned with the enrollment form. Children enrolling must be 5 years old by 9/01/20.

Physician's Report Form – This form must be filled out by the child's physician and returned to WVCA by **June 8th**. We must have a current report on file for all kindergarten students.

IMMUNIZATIONS – Please bring in or fax a copy of your child's yellow immunization card by **June 8th** or when you receive a completed physician's report form. We must have a copy for the state immunization card. Kindergarten students must have all the immunizations listed below. If your child has already received all of the immunizations below, bring in a copy of the yellow card with the enrollment forms.

5 DTP – 4 doses meets the requirements if at least one was on or after the 4th birthday.

4 Polio – 3 doses meets the requirements if at least one was on or after the 4th birthday.

3 Hep B

2 MMR

1 Varicella or proof the child has had the chicken pox

WVCA Student Admission Agreement

This **Admission Agreement** is made between West Valley Christian Academy (WVCA) and the parent(s) or legal guardian(s) _____, _____. In consideration of the services

Print Name of Father / Guardian Print Name of Mother / Guardian

provided by WVCA, parent agrees, as a condition of enrollment of _____, to abide by the

Print Name of Student

terms and conditions of this Agreement as follows:

1. Parent will pay school all applicable registration and tuition fees as described in WVCA's Fee Schedule in the manner and at the time required therein.
2. Parent agrees that Parent and Child are required to comply with all health, safety and discipline policies of WVCA. Parent will cooperate fully with WVCA to ensure full compliance with all rules and policies.
3. Parent will complete and return all questionnaires and forms given to Parent by WVCA. Prompt return of complete and accurate documentation by Parent is a condition of enrollment.
4. Parent agrees that enrollment may be terminated by either party without cause and that Parent is responsible for any fees and costs incurred prior to termination of enrollment.
5. Parent agrees to keep school informed of any medical, legal or behavior concerns of their Child throughout the time of Child's enrollment.
6. Parent agrees to pay for any property damage or medical services resulting from Child's care and acknowledges that WVCA cannot be responsible for Child's lost or damaged property.
7. Parent acknowledges that he/she has had adequate opportunity to investigate and has in fact investigated the school's curriculum, Code of Conduct, equipment, facilities, teaching methods, administration, safety procedures and discipline policy of WVCA. Parent agrees that a Child's continued enrollment at WVCA will be deemed acceptance of and satisfaction of the school's services.
8. Parent agrees to comply with all requests of WVCA, reasonably necessary to accomplish the school's purposes, as outlined in the Parent / Student Handbook and Code of Conduct.
9. Parent agrees that any complaint he / she may have concerning WVCA, shall first be directed to the child's teacher, then the school's administration, and not to other parents or children. If Parent remains unsatisfied then any complaint shall be presented to the school's board of directors.
10. Parent agrees that as a condition of enrollment, he / she will submit to Binding Christian Arbitration (separate agreement), instead of civil litigation, in the event of an unresolved dispute, grievance or claim.
11. **IMPORTANT:** Parent acknowledges that WVCA is a religious school and agrees to submit to the school's interpretation and application of biblical principles in all areas of school education, administration and conduct.

Parent / Guardian understands and agrees that violation of the school's Statement of Faith, Code of Conduct, Student Handbook, Discipline Policy, Safety Procedures or this Admission Agreement, by parent or student, is grounds for student discipline or termination of this Agreement and the student's enrollment.

I have had an opportunity to read this agreement and understand the foregoing terms of this agreement.

Signature of Father / Guardian

Date _____

Signature of Mother / Guardian

Date _____

West Valley Christian Academy

1790 Sequoia Blvd.

Tracy, CA 95376

(209) 832-4072

Fax: (209) 832-4074

Incidental Medical Services Plan of Operation

In accordance with Health and Safety Regulations Section 101173 and Health – Related Services Section 101266 West Valley Christian Academy agrees to provide Incidental Medical Services (IMS) to its students for the following conditions:

- Blood Glucose Monitoring
- Administering Inhaled Medications (with and without a Nebulizer Unit)
- EpiPen Jr. and EpiPen - All necessary disposal equipment will be provided by the student's parent. Final disposal of biologic materials will be the responsibility of the student's parent
- Prescribed and Over the Counter Medications

Prescription Medications Policy

*In centers where the licensee chooses to handle medications, the licensee is required to obtain written approval and instructions from a child's parent / authorized representative prior to administering any physician-prescribed medication to a child. **All prescription medications must be in original containers from the pharmacy.***

In addition to obtaining written approval and instructions from the child's parent / authorized representative to administer medication; prescription medication shall be administered in accordance with the label directions as prescribed by the child's physician. No exceptions will be made with regard to the dose needed regardless of requests or if forms are filled out by parents / authorized representatives contrary to the manufactures dosage instructions on the label.

*All prescription medications will be stored in the locked cabinet in the office or the refrigerator in the kitchen. Parents will complete the appropriate medication permit form prior to dispensing. An **IMS** log will be used to record any services given to a student and will include the date, time, and administering staff's signature.*

Non-Prescription Medication Policy

All over the counter medications must be in original containers. Homeopathic ointments must be in sealed containers and a list of ingredients must be kept with the ointment. Parents will complete the appropriate medication permit form prior to dispensing. All medications must be administered in accordance with the pharmacy or manufacturers label. No exceptions will be made with regard to dose regardless of requests or if forms are filled out by parents / authorized representatives contrary to the manufactures dosage instructions on the label.

*All non-prescription medications (i.e. over the counter medications, lotions, suntan lotion, ointments, chap stick, cough drops, etc.) will be stored in the locked cabinet in the office. An **IMS** log will be used to record any services given to a student and will include the date, time, and administering staff's signature.*

*I have read and understand the **IMS** Policy for West Valley Christian Academy. By signing below I agree to follow the stated Policy.*

Child's Name: _____ **Date:** _____
(Please Print)

Parent's Name: _____
(Please Print)

Signature: _____

REPORT OF HEALTH EXAMINATION FOR SCHOOL ENTRY

To protect the health of children, California law requires a health examination on school entry. Please have this report filled out by a health examiner and return it to the school. The school will keep and maintain it as confidential information.

PART I TO BE FILLED OUT BY A PARENT OR GUARDIAN

CHILD'S NAME—Last	First	Middle	BIRTH DATE—Month/Day/Year
ADDRESS—Number, Street		CITY	SCHOOL
ZIP code			

PART II TO BE FILLED OUT BY HEALTH EXAMINER**HEALTH EXAMINATION**

NOTE: All tests and evaluations except the blood lead test must be done after the child is 4 years and 3 months of age.

REQUIRED TESTS/EVALUATIONS	DATE (mm/dd/yy)
Health History	/ /
Physical Examination	/ /
Dental Assessment	/ /
Nutritional Assessment	/ /
Developmental Assessment	/ /
Vision Screening	/ /
Audiometric (hearing) Screening	/ /
TB Risk Assessment and Test, if indicated	/ /
Blood Test (for anemia)	/ /
Urine Test	/ /
Blood Lead Test	/ /
Other	/ /

IMMUNIZATION RECORD

Note to Examiner: Please give the family a completed or updated yellow California Immunization Record.

Note to School: Please record immunization dates on the blue California School Immunization Record (PM 286).

VACCINE	DATE EACH DOSE WAS GIVEN				
	First	Second	Third	Fourth	Fifth
POLIO (OPV or IPV)					
DtaP/DTaP/DT/Td (diphtheria, tetanus, and [acellular] pertussis) OR (tetanus and diphtheria only)					
MMR (measles, mumps, and rubella)					
HIB MENINGITIS (Haemophilus influenzae B) (Required for child care/preschool only)					
HEPATITIS B					
VARICELLA (Chickenpox)					
OTHER (e.g., TB Test, if indicated)					
OTHER					

PART III ADDITIONAL INFORMATION FROM HEALTH EXAMINER (optional)**RELEASE OF HEALTH INFORMATION BY PARENT OR GUARDIAN**

I give permission for the health examiner to share the additional information about the health check-up with the school as explained in Part III.

☐ Please check this box if you do not want the health examiner to fill out Part III.

Fill out if patient or guardian has signed the release of health information.

☐ Examination shows no condition of concern to school program activities.

☐ Conditions found in the examination or after further evaluation that are of importance to schooling or physical activity are: (please explain)

Signature of parent or guardian _____ Date _____
Name, address, and telephone number of health examiner _____

Signature of health examiner _____ Date _____

If your child is unable to get the school health check-up, call the Child Health and Disability Prevention (CHDP) Program in your local health department. If you do not want your child to have a health check-up, you may sign the waiver form (PM 171 B) found at your child's school.

Oral Health Assessment Form

Section 1: Child's Information (Filled out by parent or guardian)

Child's First Name:	Last Name:	Middle Initial:	Child's birth date:
Address:			Apt.:
City:			ZIP code:
School Name:	Teacher:	Grade:	Child's Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female
Parent/Guardian Name:	Child's race/ethnicity: <input type="checkbox"/> White <input type="checkbox"/> Black/African American <input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> Asian <input type="checkbox"/> Native American <input type="checkbox"/> Multi-racial <input type="checkbox"/> Other _____ <input type="checkbox"/> Native Hawaiian/Pacific Islander <input type="checkbox"/> Unknown		

IMPORTANT NOTE: Consider each box separately. Mark each box.

Assessment Date:	Caries Experience (Visible decay and/or fillings present) <input type="checkbox"/> Yes <input type="checkbox"/> No	Visible Decay Present: <input type="checkbox"/> Yes <input type="checkbox"/> No	Treatment Urgency: <input type="checkbox"/> No obvious problem found <input type="checkbox"/> Early dental care recommended (caries without pain or infection; or child would benefit from sealants or further evaluation) <input type="checkbox"/> Urgent care needed (pain, infection, swelling or soft tissue lesions)
------------------	--	--	--

Licensed Dental Professional Signature

CA License Number

Date

To be filled out by parent or guardian asking to be excused from this requirement

Optional: other reasons my child could not get a dental check-up: _____

The law states schools must keep student health information private. Your child's name will not be part of any report as a result of this law. This information may only be used for purposes related to your child's health. If you have questions, please call your school.

Return this form to the school no later than May 31 of your child's first school year.
Original to be kept in child's school record.



West Valley Christian Academy

1790 Sequoia Blvd.
Tracy, CA 95376
(209) 832-4072

RACE AND ETHNICITY REPORTING FORM

Parents/Guardians,

In October of 2007, the U.S. Department of Education started requiring all schools and child care centers to comply with federal Office of Management and Budget race and ethnicity guidelines. Schools and centers are now required to collect race and ethnicity data using a two-part question. **Part A** asks if the student is Hispanic or Latino. Hispanic/Latino is considered an ethnicity, not a race. **Part B** asks the race(s) of the student. In order to comply with reporting requirements, we need to have parents/guardians complete this form for each student. This information will remain confidential.

.....

Student's Name: _____ Date of Birth: _____

Part A. Ethnicity	Is this student Hispanic or Latino? (Select only one)
<input type="checkbox"/>	No, not Hispanic or Latino
<input type="checkbox"/>	Yes, Hispanic or Latino
The above part of the question is about ethnicity, not race. No matter what you selected above, <u>please continue to answer the following</u> by marking one or more boxes to indicate what you consider your student's race to be.	
Part B. Race	What is the student's race? (Select one or more)
<input type="checkbox"/>	American Indian or Alaska Native
<input type="checkbox"/>	Black or African American
<input type="checkbox"/>	White
Asian (please choose from the options below)	
<input type="checkbox"/>	Chinese
<input type="checkbox"/>	Japanese
<input type="checkbox"/>	Korean
<input type="checkbox"/>	Vietnamese
<input type="checkbox"/>	Asian Indian
<input type="checkbox"/>	Laotian
<input type="checkbox"/>	Cambodian
<input type="checkbox"/>	Filipino
<input type="checkbox"/>	Hmong
<input type="checkbox"/>	Other Asian
Native Hawaiian or Other Pacific Islander (please choose from the options below)	
<input type="checkbox"/>	Hawaiian
<input type="checkbox"/>	Guamanian
<input type="checkbox"/>	Samoan
<input type="checkbox"/>	Tahitian
<input type="checkbox"/>	Other Pacific Islander

The following are sources of additional information on the federal race and ethnicity data collection and reporting requirements:

<http://www.ed.gov/policy/rschstat/guid/raceethnicity/index.html>

<http://nces.ed.gov/pubs2008/2008802.pdf>

Annual Notification of Pesticide Applications

Dear Parent or Guardian,

The Healthy Schools Act 2000 requires that all schools provide parents or guardians of students with annual written notification of expected pesticide use on school sites. This notification identifies the active ingredient or ingredients in each pesticide product and will include the Internet address (<http://www.cdpr.ca.gov>) for further information on pesticides and their alternatives. WVCA's IPM plan is posted on the school website (westvalleychristianacademy.com). Notifications will be sent September through May.

The following pesticide ingredients may be used during the current school year:

Insect Control Chemicals

388B Advance Ant Gel Bait	Conrac All Weather Blox
Advance 375A Select	Cool Power
Advance Granular Ant Bait	CoreTect Tree & Shrub Tablets Insecticide
Advance Granular Camenter Ant Bait	Cv-Kick C & C Pressurized Residual
Advance Roach Gel	CvKick CS
Advion Ant Gel	Cv-Kick CS Pressurized C & C Residual
Advion Cockroach Bait Arena	Demand CS
Advion Cockroach Gel Bait	Dimension Ultra 40 Vv'P
Advion Fire Ant Bait	Ditrac All Weather Blox
Advion Insect Granule	Drain Gel
Alpine PI	Drione
Archer	EcoEXEMPT IC (2)
Arilon	EcoPCOACU
Astro	EcoPCO EC
Azatrol	EcoPCO JET
Barricade 4L	EcoPCO WP-X
BioMon	Exciter
Bora-Care	FastOut CS Foam
Borid	Gallerv 75 DF
Cardinal 1-7-3	Generation Mini Block
Chase Granular Mole Gopher Repellent	Gentrol IGR Concentrate
Conserve SC	Gentrol Point Source

Parents or guardians may request prior notification of individual pesticide applications at the school site. People listed on this registry will be notified 72 hours prior to pesticide application. Please fill out the bottom of this form and return with your enrollment forms.

Child's Name _____ **Grade:** _____

Please check one of the following:

☐ I would **prefer not** to be notified each time a pesticide application is made.

I understand that, upon request, WVCA is required to supply information about individual pesticide applications at least 72 hours before application.

☐ I would like to be notified each time a pesticide application is made.
○ I would like to be notified by class communication envelope
○ I would like to be notified by phone/text message (SchoolCast)

Parent Signature: _____ **Date:** _____

School Uniform & Dress Code Information for Elementary and Middle School Students

Dress Code Benefits

West Valley Christian Academy Administration, Staff and Board has a mandatory dress code for all elementary and middle school students. There are many positive reasons for a school dress code, including:

- A specific Dress Code encourages students to express their individuality through personality and academic achievements, not outward appearances
- A dress code puts the focus on academics, not fashion, it projects a neat business like image
- Schools with dress codes have fewer discipline problems because students aren't distracted
- Dress Codes can be less expensive
- Dress Codes eliminate the visible differences between students that may be more affluent
- Dress Codes eliminate pressure to wear brand name clothing, "gang colors," etc.
- Dress Codes create a sense of school pride and belonging



MONDAY / TUESDAY / WEDNESDAY and THURSDAY



Khaki/Tan or Navy Blue Uniform Shorts, Slacks, Skorts, Skirts, Jumpers - Must be plain (No cargo shorts or cargo pants)

Tops: Navy Blue Knit Polo with a Collar (with or without a WVCA logo)

- Must have short sleeves or long sleeves
- Polo shirts with a WVCA logo can be purchased through dayaksdensoccer.com or French Toast

FRIDAY

Denim Jeans or Denim Shorts: Solid blue, black or khaki (all denim has to be in good condition)

- Denim not approved: Baggy low riders, holes or frayed, tight fitting, denim mini skirt, cargo, painter, overall or fatigue style, denim shorts that are too short, chains attached

Tops: Solid Navy Blue T-Shirt with a WVCA logo or Navy Knit Polo with a Collar (with or without a WVCA logo)

- T-shirts or Polo Shirts with a WVCA Logo can be purchased through dayaksdensoccer.com
- The Dress Code does not allow for clothing with colored trim, stripes, embroidery, decoration, etc.

Outerwear: SOLID Navy Blue Sweaters or Navy Blue Sweatshirts (with or without a WVCA logo)

- Sweaters and Sweatshirts can be purchased from the school or French Toast
- No pictures, phrases, logos, trim, advertisements (Solid Navy Blue only)



Other dress code guidelines:

- Shorts/skirts/jumpers must be mid-thigh or longer
- Shoes must be safe and appropriate, no flip flops, sandals must be secured behind the heel (no shoes with wheels)
- Clothes must be appropriate size, with waist of garment worn at student's waist, clothing that is too tight or too loose is not appropriate for school. Sagging is not permitted
- No Hats/caps/ scarves (Navy Blue or WVCA beanies approved for recess only)
- No Tattoos (real or fake)
- No earrings for boys or dangly earrings for girls
- Boys haircuts are to be clean-cut; above the ears and the collar of their shirt and not below their eye brow, no razor, zigzag or artistic cuts, no dying, bleached or extreme fashions
- Girls hair must be neat in appearance, no dying, bleached or extreme fashions
- No headbands with colored hair or cat ears attached etc...
- Belts must not be worn long or hanging. Wallets may not have chains hanging from them
- Girls are to wear solid white or navy blue socks or tights only
- Boys are to wear solid white, navy blue or black socks only
- Clothing, jewelry, backpacks, and other personal items shall be free of writing, pictures and/or other insignia which are inappropriate, crude, vulgar, profane, sexually suggestive, or gang related

- Clearly label all outerwear with students first and last name

"Free Dress" Guidelines (Special events / field trips)

- Clothing which contains foul language, promotes negative moral or ethical values, or espouses racism, sexism or gang affiliation is not allowed.
- Any clothing which displays a slogan or picture portraying any firearms, tobacco, alcohol or drug product or any slogan which may be disruptive to the school environment or deemed offensive by school personnel is prohibited
- No tank tops or spaghetti straps allowed. All T-shirts must have sleeves. This rule applies regardless of changing weather throughout the warmer months
- Clothing cannot be sexually suggestive. No low-cut shirts, strapless tops, off the shoulder tops, cold shoulder blouses, halter or backless tops permitted. Pants, shorts, skirts and dresses cannot be tight fitting
- Sundresses or spaghetti straps are not to be worn
- No pajama tops or bottoms, sweat pants or leggings

Sixth, Seventh and eighth grade girls may, with parental approval, wear light make-up if it is in good taste (The emphasis is on light)

Coaches and teachers may impose appropriate dress requirements to accommodate the special needs of certain sports and/or class.

Outerwear Jackets are permitted during inclement weather, however they cannot be worn in the classroom or during chapel.

In order for the WVCA dress code policy to work it must be taken seriously by all who are involved. Staff, students and parents must make it a priority to support and uphold the policies that have been approved by the administration and board. Students need to be encouraged by their parents to choose dress consistent with the above guidelines and standards.

Note: Staff and/or administration reserve the right to address questionable dress code concerns. Students who are considered to be in violation of the West Valley Christian Academy Dress Code:

- First offense:** The student's parent/guardian will be contacted and may be asked to bring a change of clothes to the school or the student may be sent home to change clothes if necessary
- Second offense:** The student's parents/guardian shall be contacted and may be asked to meet with school staff. The student may be sent home to change clothes if necessary. The student may be assigned after school detention as determined appropriate by the principal or designee
- Subsequent offenses:** The student may be suspended as determined by the principal or the designee

WVCA Logo Wear can be purchased through **French Toast**. You can go online at www.frenchtoast.com to order the logo tops and khaki bottoms. French Toast offers 5% back to WVCA for phone or internet orders as long as you give them the school source code, which is **QS47EPF**.

Don't buy anything off the rack just because it looks like a uniform.

The following stores sell UNIFORMS that meet the WVCA guidelines

Children's Place	Uniform Line
French Toast Catalog/On Line	French Toast Uniforms
JC Penney's	French Toast, IZOD Uniforms
Old Navy	Uniform Line
Target	French Toast, Cherokee, Dickies
Wal-Mart	George, Faded Glory & Dickies Uniform Line
WVCA Student Store (Cougars Den)	All Uniforms are approved
www.dickes.com	School Uniform Line

West Valley Christian Academy Acceptable Computer Use Agreement Network and Computer Related Resources

In exchange for the use of WVCA data networks and computer systems, either locally attached or through remote connection, the following agreement will apply. Please read this document carefully.

The use of the WVCA network/computer system is a privilege for which users accept responsibility.

The WVCA network/computer system is shared and available to all students. The system may not be used in a way as to disrupt or interfere with its use by others. Inappropriate use of the system includes, but is not limited to:

- Damage, vandalism or theft of equipment as well as theft, piracy or alerting of software.*
- Theft of services, including connection of unauthorized network/computer equipment to the system.*
- Use of the system to communicate unlawful information or to transmit computer viruses.*
- Accessing or communication information which is obscene, abusive or deemed inappropriate by WVCA.*

Any and all information on the WVCA networks/computers is not deemed private. WVCA reserves the right to any materials stored in files, and will remove any material which the staff may believe to be unlawful, obscene, or otherwise objectionable. The WVCA staff will refer disciplinary action for anyone who does not comply with the provisions of this agreement.

The use of the WVCA network/computer system requires that all users abide by the following rules:

- Be polite, do not send or respond to inappropriate messages. Report such messages.*
- Respect (do not access, delete, move, or alter) anyone else's files and/or data.*
- Use appropriate language. Do not swear, use vulgarities, or express yourself in any other inappropriate language.*

ACCEPTABLE COMPUTER USE AGREEMENT

The following sections are for students and their parents.

STUDENTS

I have read the WVCA "NETWORK AND COMPUTER RELATED RESOURCES" agreement and understand its provisions. I accept responsibility for the appropriate use of the WVCA computer system as outlined in the WVCA Acceptable Computer Use Agreement, network and computer related resources and that violations will result in disciplinary action and/or the cancellation of privileges. I agree to report any misuse to the system administrator.

Student Name (Print)

Student Signature

Date

PARENT

I have read the WVCA "NETWORK AND COMPUTER RELATED RESOURCES" agreement and understand the responsibility my child has for the use of the WVCA computer system and that violations will result in disciplinary action and/or the cancellation of privileges. I accept full responsibility for my child's use. I also agree to report any misuse of the system to the system administrator.

Parent Name (Print)

Parent Signature

Date



SchoolCast Registration Form

SchoolCast is a rapid alert notification system that enables **West Valley Christian Academy** to reach students, parents, faculty and staff, within moments through a variety of popular communication methods.

In 2015, the Federal Communications Commission (FCC) updated its rules to prohibit calls made using automatic telephone dialing equipment or a prerecorded message to any telephone number assigned to a cell phone or any service for which the called party is charged for the call without prior consent, unless the call is for emergency purposes as defined by the Telephone Consumer Protection Act. (Reference: 47 U.S. Code § 227)

Therefore, you will need to complete this form giving **West Valley Christian Academy** permission to call and/or text your landline and/or cell phone numbers with information utilizing the SchoolCast rapid alert notification system. If you do not complete this form you will not receive important information. However, according to the current TCPA guidelines, you will still be contacted in the event of an emergency.

Student Name: _____ Grade: _____

Student Name: _____ Grade: _____

Student Name: _____ Grade: _____

Parent/Guardian Name(s): _____

_____ I give permission to be called and/or texted using automatic dialing equipment at the following numbers. By signing this form, I certify that I am the owner of the phone numbers listed.

Landline Phone 1: _____

Landline Phone 2: _____

Cell/Mobile Phone 1: _____ Text Message: **Yes** **No**

Cell/Mobile Phone 2: _____ Text Message: **Yes** **No**

_____ I do not give permission to be called using automated dialing equipment and understand that I will only be called in the event of a school emergency.

Signature: _____ **Date:** _____

West Valley Christian Academy

AUTHORIZATION TO RELEASE STUDENT IN AN EMERGENCY

WVCA has a comprehensive Emergency Disaster Preparedness Plan, which will be used in any potential disaster or emergency that might occur. This is done in compliance with law and county policy. The emergency plan is available for inspection in the school office.

Should there be an emergency, such as a major fire, an earthquake, explosion, or an intruder on our campus; school and day care students may be required to remain in our care until it is deemed safe by emergency services authority for them to be released. At that point, children may be released only to properly authorized parents and/or designees. Therefore, please list as many names as possible (including **current** local telephone numbers and addresses) of persons to whom you would allow release of your child in the event of such an emergency. Be sure to notify these people that you have authorized their supervision in case of emergency.

In the event that you should not be able to come to the school/day care, it is essential that others be designated to care for your child. No child will be released to the care of unauthorized persons. We will do everything possible to contact parents/guardians prior to contacting your emergency authorized representatives.

One form is sufficient for siblings as long as each one is listed below. **PLEASE PRINT LEGIBLY.**

Child/Student's Names: _____ / _____
_____ / _____ / _____

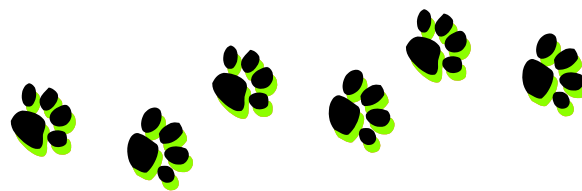
I give permission for my child to be released to any of the persons listed below:

First and Last Name	Address	Telephone	Relationship	For Office Use Only

Parent / Guardian Signature _____ Date _____

(Mom) Home Telephone _____ Work _____ Cell _____

(Dad) Home Telephone _____ Work _____ Cell _____



Welcome new students!

You can purchase polos, t-shirts and jackets with our school logo at dayaksdensoccer.com. Log into their website and choose our school to place an order. You can pick up your order directly at their store or have it delivered to your home for a fee.

Fourth – eighth grade students must order P.E. clothes with our school logo on it through this company. Please remember to place your order prior to school starting in September.

Please allow 2 to 3 weeks for your order to be ready.

Thank you for your support.
WVCA Staff