#### **ADMISSION REQUIREMENTS**

A Student is tentativelyaccepted at Florence Baptist Academy after an interview with the administration, Final acceptance is contingent of the result of testing (if needed) and placement of the student.

#### **Procedures**

Submit the completed application with the following

- Previous year's report card and achievement test (if applicable)
- -Testing (if applicable) completed
- -Records or Transcripts received
- Parent's interview with administration
- Medical forms as applicable
- Immunization records for all students
- Copy of birth certificate

(Note No new student will be allowed to attend classes without a copy of his/her birth certificate and current records for immunizations)

#### CONDITION FOR ADMISSION AND RE-ENROLLMENT

Students seeking admission to kindergarten must be 4, or 5 by September 1 of the current school year. Students seeking admission to first grade must be 6 by September 1 of the current year.

All students (fourth grade and above) and their parents or guardians must sign the Student Conduct Agreement, which will be placed in their permanent files

No student will be admitted or allowed to remain in Florence Baptist Academy who does note cooperate with our overall purpose, philosophy and programs.

If a family realize that they disagree with the philosophy of the school, they are asked to discuss the matter with the appropriate administrations if the issues cannot be resolved, the family will be asked to voluntarily withdraw from the school Students are accepted on a yearly basis. Re-enrollment is based on academic performance and behavior; therefore, re-enrollment is not guaranteed.

We accept students without regard to race, color or national origin.

Some people tend to falsely think of a Christian school as a hedge against integration or as a reform school for delinquent children. Florence Baptist Academy is neither of these. The avowed purpose of this ministry is to train Christian young people to meet their fullest potential both spiritually and academically.

# School Supplies Needed

# Kindergarten through 4th grade

- 1. Lots of number 2 pencils
- 2. Big erasers the bigger the better
- 3. If mechanical penicils please no lead small than a 7mm
- 4. At least 2 spiral note books
- 5. Color pencils
- 6. Colors
- 7. High lighters
- 8. Ruler
- 9. Covered drinking cups only

# 5th grade through 8th grade

- 1. Lots of number 2 pencils
- 2. Big erasers the bigger the better
- 3. Protractor
- 4. Compass
- 5. Straight edge Ruler
- 6. At least 4 note books
- 7. Black and blue ink pens
- 8. Graft paper
- 9. Hightlighters
- .10 Covered drinking cups only
- 11. Scientific calculator grades 7-8

# High school

- 1. The same as 5-8
- 2. Access to a computer for essays and Computer courses
- 3. Scientific Calculators is a must

STUDENT INFO	RMATION
Name:	
Address:	
City/State:	ZIP:
Telephone: Sex: Birth Date:	Rirthnlace
School Last Attended:	Bit diplace:
Address:	
Last Grade Completed:	
FAMILY INFORMA	ATION
Father's Name:	
Employment:	
Position: Busines	ss Phone:
Mother's Name:	
Employment:	
Position: Busine	ess Phone:
For any and Talanda and Noveland	
Emergency Telephone Number other then those already listed :	
Marital Status: Married	Widow
Divorced	Separated
Children in family of school age if not applying:	
Name:	Age
Reason they are not applying:	
RELIGIOUS INFOR	MATION
RELIGIOUS INTON	
Charach Arran Para	
Church Attending:	
Address:	Dhonor
Pastor:	Phone: o:
Mother: Christian? Yes: No	
Has applicant ever made a profession of faith in	
Thas applicant ever made a profession of faith in	GIII ISti

Yes: \_\_\_\_\_ No: \_\_\_\_

Term: 20\_\_\_\_\_ Date: \_\_\_\_\_

## **MEDICAL INFORMATION**

Family Physician: Phone: Done student have any physical defects or allergies? Explain: Has student received immunizations? DTP/DTaP/DTT/TD: Polio: MMR: Varicella: HepatitisB:  SCHOLASTIC INFORMATION  Has student ever been expelled, dismissed, suspended or refused admission to another school? If yes, explain: Has student ever had disciplinary difficulty at school? If yes, detail:  Does student have a juvenile or arrest record? If yes, explain:: Has student ever used tobacco or non-perscription drugs of any kind? If yes, explain: Please indicate academic level of student's previous work: Excellent: Good: Average: Poor:  GENERAL INFORMATION  How did you hear about this school? Reason for selection this school:  Application must be filled out completely before it can be processed.	Family Dlandsides			3
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	Reason for selection this	school:		
	Application must be filled	d out completely	hefore it can be i	nrocessed
An interview with the parents and the student will be required before				
final acceptance.				

### FLORENCE BAPTIST ACADEMY

## 30. N WILLOW STREET P.O. BOX 298 FLORENCE,AZ 85132

## EMERGENCY/MEDICAL NOTIFICATION FORMS

Please fill out the "emergency information" below and return immediately to the school. This information is needed in the event an emergency and is kept in a file in the school office. Emergency Number will be called in numerical order as listed. If you do not have a telephone please give a number where you can be reached in case your child should become ill or have and accident at school.

NOTE: A child must bring a note from the doctor or a signed statemnt from a parent to take or use medication of any kind at school. All medications will be kept and dispensed from the school office.

Child's Name:		Birth Date:		
Adress				
IS YOUR CHILD ALLERG	DIC TO BEE STINGS?	YES: NO:		
LIST ANY ROUTINE MEI	DICATIONS YOU CHILD IS CU	JRRENTLY TAKING:		
ADDITONAL MEDICAL I	NFO:			
IN CASE OF AN EMERGE	·			
	(Relationship)	(Phone)		
<b>2.</b> (Name)		(Phone)		
(Name)	(Relationship)	(Phone)		
Name of Physician)	(Phone Number)	(Date)		
rianic of Filysician)	(i none number)	(Date)		
Signature of Parent or Guar	dian)	(Date)		

## STUDENT RECORD RELEASE



O RELEASEING SCH	IOOL COUNSLOR	<b>:</b>	
			Date
ear Counselor y child(ren) has (have) ealth records to the foll			e release their academics an
	Acce	epting School	
School Name			
Address			
City	State/Province	ZIP/Postal Co	ode
Student's Name (s) (Last Name, First)		Age	Grade Level at time of withdrawal

#### STUDENT STATEMENT OF COOPERATION

(Grades 1-7)

#### I, as a student of Florence Baptist Academy, pledge to:

- 1. Support Florence Baptist Academy in action, attitude and loyalty.
- 2. Cooperate respectfully with those in authority.
- 3. Respect Florence Baptist Academy's Biblically based philosophy, purposes. and objectives.
- 4. Strive for excellence as a student.
- 5. Avoid the use of alcoholic drinks, tobacco and illegal drugs.
- 6. Refrain from gambling and listening to rock and other forms of questionable music
- 7. Associate with people of high moral character
- 8. Strive for godly relationships with fellow students
- 9. Abstain gossip, grumbling and complaining.
- 10. To be true and guard what I post on social medical and the internet.
- 11. Refrain from dressing in worldly fashion

I have read and agree to abide by the guidelines stated above, and in the student handbook.

I also willingly state that it is my desire to attend Florence Baptist Academy.

NAME:	GRADE:	DATE:
	•	

#### PARENT STATEMNT OF COOPERATION

Florence Baptist Academy

- 1. I believe that discipline is necessary for the welfare of each student, as well as the entire school. I give permission for my child's teacher and/or administrator of the school to make and enforce classroom requirements in a manner consistent with Christian principles and disciplines as set forth in the Scriptures. I have been presented and support the Discipline Policy of Florence Baptist Academy.
- I realize that the Administration has full responsibility for placing my child in the proper grade.
- **3.** I realize that the school is the final authority on all matters of dress and grooming, and I agree to help the school enforce its dress code by sending my child to school dressed and groomed accordingly.
- **4.** I give permission for my child to take part in all school activities, encluding school-sponsored trips away from school premises, I absolves the school from all liability in the event the my child is injured at school or during any school activity.
- My cooperation is expected in regular tuition payments. If I am ever unable to pay on time. I will notify the office, giving reasonable explanation for the delay and state wen the payment can be made.
- **6.** If I become dissatisfied with the school any respect. I promise to go directly to the school administrator and seek to resolve the matter right away.
- **7.** If for any reason my child does not respond favorably to the school, I will not try and change the school to fit his/her needs, but will withdrawal my child quietly and without delay.
- **8.**Realizing that absence from school hinders my child's academic progress. I will only allow my child to miss school in times of dire emergency, illness or doctor appointments.
- I have read the Statement of Faith and I am willing to have my child trained according to it.
- 10 As I am a Christian and Florence Baptist Academy is a Christian ministry organization, both parties agree that they would never make demands, threaten to sue or actually litigate any matter whatsoever relating to or resulting from the Agreement. To do otherwise, would be in clear violation of Biblical teaching and practice.
- 11.
  I have read and understand the Student Handbook and I agree with it completely. I agree that my child must abide by all of the policies, rules and regulations of the school, including those listed in the Student Handbook and I agree to support Florence Baptist Academy with my prayers
- **12.** I certify that I will explain this agreement and its meaning to my child. I will assist the school in every way necessary to ensure my child abides by all the terms of this agreement,

PARENT SIGNATURES:	(Father)	(Date)
PARENTS SIGNATURES:		
	(Mother)	(Date)

## STUDENT/PARENT INTERVIEW

	Applicant's Name:			Date: _	ACL	
	Father's Name:		Mo	ther's Name:		
A.	With both parent 1. Review Application					
	2. Friends already e	nrolled (Names):	:			
	Others anticipat 3. Staff (Names and	- '	Names):			
	4. School policies					
	Transportation, lunch, financial arrangments, dress codes, academics discipline, ect.  5. School objectives, character, training and academic excellence					
	Comments:					
В.	With child 1. Get acquainted					
	(info to remembe	er)				
	2. Note attitudes and values noticeable:(Toward you):					
	(Toward academic program):					
	(Toward Parents	s):				
	(Toward School)	:				
	Comments:					
C.	With parents 1. Note attitudes:					
	(Towards school	ol work):				
	(Toward chapel)	):				
	(Toward disciple 2. Frank discussion	n on supporting	the school staff when o	hildren complain		
D.	Status		Yes	□No		
		Accepted	□Rejected	□Indecision	□Probation	
	ce this form in the st					