

Flaming Sword Christian Academy – Enrollment Forms



Items Required for a New Student Application

In order for the new student application process to continue the following items must be turned in with the application.

- _____ Application
- _____ Last year's report card
- _____ Latest report card (if moving during school year)
- _____ Latest EOG test scores
- _____ Birth certificate
- _____ Disciplinary Records
- _____ Psycho-Educational Evaluation (public school and/or private)
- _____ Latest IEP (complete IEP including DEC 3)
- _____ Application Fee of \$250 (check, cash, or money order)

Items Required For Enrollment

Once a student has been accepted for admission into FSCA, the following documents along with the enrollment forms must be turned in within 5 days before a student is considered fully enrolled at FSCA.

- _____ Complete copy of student records from present/previous school
- _____ Immunization record
- _____ Demographic survey
- _____ Enrollment forms:
 - _____ Departure Authorization
 - _____ Request for Release of School Information
 - _____ Request for Release of Medical Records and Information
 - _____ Emergency Contact Including Medical Personnel Information
 - _____ Student Medical Information
 - _____ Code of Conduct
 - _____ Tenets of Faith
 - _____ Parent/Guardian Statement of Cooperation and Agreement
 - _____ Financial Planning Contract
- _____ Before/After Care Contract, if needed

When all documents are received, assessment dates and times will be provided so that we can determine the functioning grade level of your student and the best program for your student. Parent will be contacted by Mrs. Terri Becker, FSCA Executive Assistant, as soon as possible for scheduling. Thank you for your interest in FSCA.

Dr. Wanda Hatmaker, Founder/CEO

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Elementary, Middle and High School Student

Application for Admission

PLEASE WRITE IN YOUR STUDENT'S GRADE. IF YOUR STUDENT IS NOT AT GRADE LEVEL, WRITE THEIR FUNCTIONING GRADE LEVEL IN THE SPACE PROVIDED.

Kindergarten _____ Elementary (1-5) _____ Middle (Grades 6-8) _____ High School (Grades 9-12) _____ Functioning Grade _____

For which school year are you seeking admittance? _____

Which academic program would benefit your student the most? (This will be reviewed with CEO for final determination)

_____ Gifted Program _____ Typical Program _____ Supportive Bridges _____ Intensive Bridges

STUDENT INFORMATION:

Child's Full Name _____

Last First Middle

Address _____

City _____ State _____ Zip Code _____

Home Phone #1 _____ (Mother) Cell Phone #2 _____ (Father) Cell Phone #3 _____

Date of Birth _____ Age _____ Place of Birth _____

Social Security Number _____ Male Female

FAMILY INFORMATION:

Mother's Name _____

Mother's Email Address _____

Business Phone # _____ Mother's place of employment _____

Mother's level of education _____ Name of Degree (if applicable) _____

Father's Name _____

Father's Email Address _____

Business Phone # _____ Father's place of employment _____

Father's level of education _____ Name of Degree (if applicable) _____

Student lives with Both Parents Mother Father Other

Check any that apply Father is deceased Mother is deceased Parents are divorced/separated

Name(s) of stepparent(s) _____

Other children living in home:

Name Age School Attending

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Please indicate name and address of anyone who should receive report cards if different from above address:

LEARNING AND BEHAVIORAL SURVEY:

Has your child ever been tested for learning and/or behavioral difficulties in the classroom?

Has your child been in a program that serves one of the following: If so, explain.

ADD _____

ADHD _____

BEH _____

LD _____

EMH _____

AG _____

AUTISM _____

Is your child being helped by a tutor or has been helped by a tutor in the past? _____

Has your child had any behavior problems in school? If yes, please explain. _____

Has your child ever been suspended, expelled, or held in detention? If yes, please explain. _____

Has your child ever used tobacco, alcohol or drugs? _____ Yes _____ No

MEDICAL AND EMERGENCY CARE INFORMATION:

Is child allergic to anything? No ___ Yes ___ If yes, what? _____

Is child currently under a doctor's care? No ___ Yes ___ If yes, for what reason? _____

Is the child on any continuous medication? No ___ Yes ___ If yes, what? _____

Any previous hospitalizations or operations? No ___ Yes ___ If yes, when and for what? _____

Any history of:

Significant Previous Diseases? No ___ Yes ___

Recurrent Illness? No ___ Yes ___

Diabetes? No ___ Yes ___

Convulsions? No ___ Yes ___

Heart Trouble? No ___ Yes ___

If others, what and when? _____

Is there anything significant we should know that might affect your child's physical or emotional well-being? _____



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DEPARTURE AUTHORIZATION

If someone other than yourself will be picking-up your child from school, or if your child is allowed to leave school premises during lunch time with another student, or if another student may transport your child after school, please list their names and relationship to student below. Your child will not be allowed to leave school premises with anyone else, regardless of the circumstances.

Name	Relationship	Phone
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Name	Relationship	Phone
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Name	Relationship	Phone
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Name	Relationship	Phone
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PARENTAL PERMISSION AND USER AGREEMENT FOR INTERNET USAGE

We are pleased to offer students access to the computer network for research using the internet. To gain access to email and the internet, students must obtain parental permission. Access to the internet will enable students to explore thousands of libraries, databases, and bulletin boards. Parents, please be warned that some material accessible via the internet may contain items that are illegal, defamatory, inaccurate, or potentially offensive. We will do our best to limit the students' searches and access; however, we know that sometimes students will access inappropriate materials. We believe the benefits to further educational goals and opportunities for collaboration exceed the disadvantages. Parents and guardians are ultimately responsible for establishing appropriate standards for their students and the Academy will support and respect each family's right to decide whether or not to allow their student to have internet access. As a user of Flaming Sword Academy's computer network, I hereby agree to comply with expected behavioral codes as stated in the rules of conduct, while honoring all relevant laws and restrictions.

I grant permission for my student to access networked computer services such as the internet. I understand that individuals and families may be held liable for my student's violations of the rules or violation of any laws and regulations concerning internet usage. I understand some materials on the internet may be objectionable, but I accept responsibility for giving my student guidance concerning internet use-setting and conveying standards for my student to follow when selecting, sharing, or exploring information or media.

Parent and Student Signatures and Date

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REQUEST FOR RELEASE OF MEDICAL RECORDS AND INFORMATION

(Note to Parents: Please complete and sign this form **before** sending it to the Physician named below.)

Date: _____

Physician's Name: _____

Address: _____

Re: Child's Name _____

I hereby give permission for the release of information requested on the following sheet to the CEO of Executive Assistant of Flaming Sword Christian Academy for professional use. I understand that this information will remain confidential between the physician and Flaming Sword Christian Academy professional staff.

Parent's Signature: _____

Address: _____

Phone: _____

Note to Physician:

The parents of the above-named child have requested admission to Flaming Sword Christian Academy. We would appreciate any information about the child that you may be able to share with us.

1. Any history of late or atypical maturation of the central nervous system?
2. Any family history of epilepsy, other neurological or emotional disorders?
3. Please describe the home situation in which this child has been nurtured and any remarkable features of family relationships affecting the child.
4. Do you recommend any limitation(s) on this child in our program?
5. Remarks:

Signed: _____

When you have completed the enclosed form, please forward through email to admin@flamingswordcampus.org or mail to Dr. Wanda Hatmaker, CEO, Flaming Sword Christian Academy, 3230 Legion Rd., Hope Mills, NC 28348.

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REQUEST FOR RELEASE OF SCHOOL INFORMATION

Request Date: _____

Student's Name: _____

Grade: _____

Former School: _____

Address: _____

Phone Number: _____ Email: _____

EC Case Manager name and email: _____

Parent's signature/Date: _____

The student listed above has enrolled in Flaming Sword Christian Academy and has specified your school as the school last attended. It has been indicated by the parent this student **has has not** (circle one) has have an exceptional children's record. If the student has exceptional children's record, please forward a copy of all EC records (to include latest psycho-educational evaluation and full IEP including the DEC 3) to Flaming Sword Christian Academy. Released school records should include the following:

1. Grade Record/Transcript
2. Achievement Tests/EOGs
3. Health Record
4. Attendance Record
5. Disciplinary Action Report
6. Exceptional Children's Record (if applicable)

Please forward records to:

Flaming Sword Christian Academy
3230 Legion Rd.
Hope Mills, NC 28348
Attn: Wanda Hatmaker, CEO

Or Email Records to lhatmaker@nc.rr.com

Note to School: Under federal law (Family Educational Rights and Privacy Act-dated April 11, 1988), school records may be transferred between schools without parent's written consent. We appreciate your prompt reply to this request.

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EMERGENCY CONTACT INCLUDING MEDICAL PERSONNEL INFORMATION

STUDENT INFORMATION:

Student's Name: _____

Student's Birthdate: _____

Student's Last 4 of SSN: XXX-XX _____

MEDICAL PERSONNEL INFORMATION:

Physician(s) Name: _____

Physician's Phone Number: _____

Pharmacy: _____

Pharmacy's Phone Number: _____

Dentist(s): _____

Dentist's Phone Number: _____

Therapist: _____

Therapist's Phone Number: _____

Hospital Preference: _____

Hospital Address: _____

Hospital Phone No.: _____

EMERGENCY CONTACTS OTHER THAN PARENTS:

Name	Relationship	Home Phone	Cell Phone	Work Phone
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

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STUDENT MEDICAL INFORMATION

(This form must be renewed annually or whenever there is a change in allergies, diagnoses, or medications.)

MEDICAL/MENTAL/EMOTIONAL/LEARNING CONDITIONS

(List diagnosed disabilities only please)

1. _____ 2. _____ 3. _____
4. _____ 5. _____ 6. _____

ALLERGIES TO MEDICATIONS OR FOODS	
MEDICATION OR FOOD NAME	REACTION

OVER THE COUNTER MEDICATIONS PERMISSION:

In the event my child becomes ill or is injured while under school supervision, I approve the following steps:

1. Contact a parent of the child and follow his/her instructions, if parent cannot be reached, contact those listed as emergency contacts.
2. Contact the child's physician and follow his/her instructions, in the event neither parent or emergency contacts cannot be reached, or if this is a life threatening event.
3. I authorize the school to use their own discretion in contacting a properly licensed physician and follow his/her instructions if the child's physician cannot be reached.
4. If I cannot be reached in case of injury, sudden disabling illness, or life-saving emergency, I authorize school personnel at Flaming Sword Christian Academy to secure emergency care for a life-saving emergency.
5. I authorize school personnel at Flaming Sword Christian Academy to call for medical assistance and then contact me as soon as possible.
6. If, in the opinion of a properly licensed and practicing physician, my child needs medical or surgical services which require my consent before being supplied, and I cannot be reached, I hereby authorize, appoint, and empower the CEO or her designee, to furnish on my behalf such written or oral authorization as may be so required. Further, I release the CEO, or her designee, Flaming Sword Christian Academy, and Flaming Sword International Ministries, from any liability in conjunction with the provision of such medical or surgical services.
7. I also authorize and consent Flaming Sword Christian Academy to collect fees due them by legal means, if I fail to fulfill my financial obligations.
8. I also understand that Flaming Sword Christian Academy can only dispense over the counter medication such as tylenol, motrin, benedryl, cough drops, aspirin, etc., if it has my written permission on file. Students may not give medication to another student. This signed release form from the parent/guardian authorizes Flaming Sword Christian Academy to administer prescription medication and over the counter medication as directed.
9. This form must be updated annually or at any time the medication regime is changed through a physician. We must have a doctor's note when prescription medication dosage or frequency is changed or a new prescription bottle indicating dosage and frequency.

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_____ I authorize any and all Flaming Sword Christian Academy personnel to release any and all medical information, including medications on the medication log for my student, to First Responders and all other medical personnel, in emergency situations. *Please initial the line beside this authorization.*

_____ I acknowledge that it is my responsibility to keep my student’s medication log up to date immediately whenever medications, dosages or frequencies change for his/her best interests. *Please initial the line beside this acknowledgment.*

CURRENT MEDICATION REGIMEN INCLUDING THOSE GIVEN AT HOME

MEDICATION	DOSAGE	FREQUENCY	CONDITION / SPECIAL NOTES

_____ Parent’s Signature/Date

ANNUAL ACKNOWLEDGMENTS:

All of the medication information, including dosage and frequency is the same as listed above.

_____ Parent’s Signature/Date

All of the medication information, including dosage and frequency is the same as listed above.

_____ Parent’s Signature/Date

All of the medication information, including dosage and frequency is the same as listed above.

_____ Parent’s Signature/Date

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CODE OF CONDUCT

The Code of Conduct and associated disciplinary actions are provided to ensure that parents and students understand responsibilities and the policies of the Academy. Parent and Student must sign the form and return with the application. Flaming Sword Christian Academy's acceptable behavior operates within the parameters of the Ten Commandments (Exodus 20:1-17 NIV).

Flaming Sword Christian Academy is a Christian organization. As such, it must be recognized that each day begins with honors to our country, the United States of America, through the saying of the Pledge of Allegiance and with morning prayer in the Name of Jesus Christ. Middle and High school students are expected to lead the Pledge and Prayer daily; therefore, not saying or participating in either is not an option for any student. If parents or students do not wish to participate in either of these two activities, then FSCA is not the school for them.

THE FOLLOWING CONDUCT IS PROHIBITED:

1. Dress:
Deviation from handbook policy on acceptable dress appearance is prohibited.
2. Verbal Abuse/Disrespect:
Participation in any verbal action that prevents an orderly and peaceful learning environment is prohibited. Cursing, using vulgar, obscene, or abusive language including racial, gender, religious slurs or insults intended to mock another person are specifically prohibited. Per the Bible, the Lord's Name is not to be used in vain at any time.
3. Ungodly Speech:
Lying or deception of any type is prohibited. Gossip, slander, and any other unwholesome speech is prohibited.
4. Peer Relations:
Engaging in behavior which is immoral, indecent, overly affectionate, or sexually harassing while in the school setting or when on school trips and/or activities is prohibited.
5. Integrity:
Engaging or attempting to engage in cheating, plagiarism, falsification, violation, of software copyright laws or violation of computer access is strictly prohibited.
6. Disruption:
Using passive resistance, noise, threat, fear, intimidation, coercion, force, violence, or any other form of conduct that causes the disruption of any lawful function, mission, or process of the Academy, or urging other students to engage in such conduct is prohibited.
7. Disruptive Materials:
Possessing or distributing materials, illustrations, or music that is obscene or that disrupts the classroom, are prohibited.
8. Electronic Devices:
Electronic devices such as pagers, cellular phones, ipods, CD players, radios, etc. are prohibited from being in student's possession during school hours. These items must be turned into the home room teacher in the morning when student gets to class. They will be returned at the end of the school day.
9. Skipping School:
Failure to attend or leaving the Academy grounds during the instructional day without prior written consent from parents, faculty, or administration is prohibited.
10. Fire Alarms:
Setting off, attempting to set off, or abetting anyone setting off a fire alarm is prohibited. This is now considered an act of terrorism and will be treated as such. Pyrotechnics are prohibited. In addition, bomb threats or communicating a hoax of any kind is prohibited and is punishable by law.

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11. Assaulting Students:
Hitting, shoving, scratching, biting, or throwing objects at another person or the threat to cause bodily harm in any way is prohibited.
12. Theft:
Stealing, attempting to steal, or knowingly being in possession of stolen property is prohibited.
13. Damage to Property:
Intentionally damaging or attempting to damage or deface the Academy's property or private property belonging to others is prohibited.
14. Possession of Weapons:
Possession of any type of weapon is prohibited. Handling or transmitting any firearm, knife, razor, explosive or facsimile or other object that could be considered a weapon or dangerous instrument is prohibited and is punishable by law.
15. Drugs:
Possessing, using, transmitting, selling, or being under the influence of alcohol, inhalants, tobacco, prescription drugs, or illegally controlled substances including paraphernalia possession is prohibited.
16. Assaulting Employee:
Assaulting, causing or attempting to cause any physical injury or behaving in such a manner that could reasonably cause physical injury to any Academy employee is prohibited.
17. Bullying:
The continued negative or intimidating actions or speech is deemed bullying and is prohibited.
18. False Accusations:
Proven false accusations made against another student or employee is prohibited and is punishable by school disciplinary action and by law.

Disciplinary Actions: For violation of the above mentioned items, a student may be given any one of the following disciplinary actions:

- Verbal warning, verbal redirection
- Time-out or "thinking" chair
- Student counseling with Director/CEO
- Parental counseling with teacher or Director/CEO
- Corporal punishment (see block below)
- Out of school suspension
- Expulsion
- Contact of law enforcement
- Or any approved punishment the Academy deems necessary

I acknowledge and understand the Director/CEO may deliver corporal punishment if it should become necessary in the Director's opinion. As a parent, I will be notified through electronic means or written note by the end of the day of the incident. _____(parent's initials/date)

I acknowledge and agree that each day begins with honors to our country, the United States of America, through the saying of the Pledge of Allegiance and with morning prayer in the Name of Jesus Christ. Middle and High school students may be expected to lead the Pledge and Prayer daily. Therefore, not honorably participating in either activity is not an option for any student. If parents do not wish their student to participate in either of these two activities, the student does not belong with FSCA. _____(parent's initials/date)

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Please initial and date each of the statements of acceptance and acknowledgment that you understand these requirements.

You will notice that FSCA’s disciplinary actions given are not as harsh as the public school’s policy. ***It is a privilege to come to FSCA, not your right, so rules and policies are expected to be followed by students and parents.*** Students or parents who are not in harmony with the policies, procedures, or rules of the Academy will be asked to leave the Academy. While open communication with parents and students is desired, there will not be a “bending” of the rules for any student or parent. While this may seem harsh, parents are placing their most precious possessions - their children - in our care and at no time will any student be subjected to inappropriate behavior or speech by another student or a parent that may influence them in a negative manner, when the offending student or parent will not comply with the rules of the Academy.

PARENT AND STUDENT ACKNOWLEDGEMENT:

We have read, understand and agree to the Parent and Student Handbook, Code of Conduct, Prohibited Conduct, Disciplinary Actions, and expectations for Honors to God and Country. We understand that if we break the rules of conduct for FSCA, then we may be subject to any and all of the disciplinary actions as described herein.

Signature of Parent or Guardian / Date

Signature of Student / Date

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TENETS OF FAITH

We believe:

The entire Bible is the infallible Word of God, is inspired by the Holy Spirit without error, and the authority by which we base our faith, doctrine, and conduct. (2 Timothy 3:16-17, 2 Peter 1:20-21, 1 Corinthians 2:13)

There is one God, existing in three persons: God the Father, God the Son, and God the Holy Spirit. - (Matthew 28:19, Colossians 2:9)

Man is created in the image of God and was created good and upright, but by voluntary disobedience was separated from God. (Genesis 1:26-31; 3:1-7, Romans 5:12-18; 6:23)

Jesus Christ is the Son of God. As a result of man's disobedience and sin, Jesus came to this earth as Savior of the world. (Luke 1:26-35, John 1:18; 3:16, Isaiah 9:6)

Jesus' death on the cross has provided salvation, or deliverance from everlasting death, to those who choose to accept Him as Lord and Savior. By admitting that we have sinned and accepting Jesus as Lord, we can have a personal relationship with God now and spend eternity with God in Heaven. Salvation is not a result of what we do, but is a free gift from God through faith. (Ephesians 2:8-9, Romans 5:11; 10:8-13, 1 John 5:10-13, Hebrews 9:15)

Water baptism, as taught and demonstrated by Jesus, is symbolic of the cleansing power of the blood of Christ and a testimony to our faith in Jesus. (Matthew 28:19, Romans 6:3-4, Colossians 2:11-12)

The Baptism of the Holy Spirit with evidence of speaking in tongues is a gift from God. The Holy Spirit empowers the believer to develop the character of Christ and live every day in God's will.- (John 14:26-27; 16:8, Acts 2:1-4; 2:38; 8:14; 10:44-46, Romans 8:26-27)

The regular taking of Communion is an act of remembering the sacrifice of Jesus Christ on the cross. (1 Corinthians 11:23-32)

Every believer should grow in his/her relationship with God through obedience to God's Word, following the example of Christ, and an active prayer life. (Ephesians 5:8, 2 Corinthians 6:14; 7:1)

Divine physical, emotional, and mental healing and restoration is active today through the power of Jesus, our Healer. (Acts 4:30; Romans 8:11; 1 Corinthians 12:9; James 5:14; Matthew 8:17; 1 Peter 2:24; Mark 16:17-20)

Jesus will return and take all who have accepted Him as Lord and Savior to Heaven for eternity. The Bible describes hell as a real place of suffering and permanent separation from God for unbelievers. God sent Jesus to redeem us so that no one who have to endure this punishment. (Job 1:7, 2 Corinthians 11:14, Ephesians 4:27, James 4:7, Mark 9:43-48, 2 Thessalonians 1:9, Revelation 20:10-15, John 3:18, Romans 6:23)

Children are a gift from God and if raised in the admonition of the Lord, when they are old, they will return. Therefore, we also believe that to spare the rod is to spoil the child, so we do believe in corporal punishment as a consequence of rebellion. (Proverbs 13:24, 22:15; 23:13-14)

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Marriage is between a man and a woman. Therefore, we believe in a heterosexual marriage that is monogamous. (Leviticus 20:13, 18:22, 20:13; Genesis 1:28, 2:24, 19:1-25; Matthew 5:17, 31-32, 9:1-6; Romans 1:24-27, I Corinthians 6:9-10, I Timothy 1:10)

God intends sexual intimacy to occur between a man and a woman who are married to each other (1 Corinthians 6:18; 7:25; Hebrews 13:4).

Any form of sexual immorality (including adultery, fornication, homosexual behavior, bisexual conduct, bestiality, incest, and use of pornography) is sinful and offensive to God (Matthew 15:18-20; 1 Corinthians 6:9-10).

Flaming Sword Christian Academy will accept applications for students whose parents are in agreement with and who are willing to support the school's philosophy of Christian education, student conduct requirements, the school's stated positions concerning marriage, gender identify and sexual orientation, and our Tenets of Faith . FSCA will also accept applications for students whose parents are willing to allow their children to be educated and influenced in an intentionally Christian environment. Continued enrollment at Flaming Sword Christian Academy is contingent upon this same understanding and support of FSCA's Tenets of Faith by both the student and parents.

PARENT ACKNOWLEDGEMENT:

In making application for my student to attend Flaming Sword Christian Academy, I acknowledge that I have read, understand and am willing to support the school's philosophy of Christian education, student conduct requirements, the school's stated positions concerning marriage, gender identify and sexual orientation, and their Tenets of Faith. I also acknowledge that I am willing to allow my child(ren) to be educated and influenced in an intentionally Christian environment. I acknowledge that continued enrollment at Flaming Sword Christian Academy is contingent upon this same understanding and support of FSCA's Tenets of Faith by both me and my student .

Parent's Signature/Date

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PARENT/GUARDIAN STATEMENT OF COOPERATION AND AGREEMENT:

IF MY STUDENT IS ACCEPTED, I AGREE TO:

- Support the spiritual, moral, dress and disciplinary standards of the school as outlined in the Parent-Student Handbook.
- Assume the responsibility for my student's education by supervising homework and keeping in regular contact with my student's teachers through the electronic gradebook;
- Support the Academy, to the best of my ability, through attendance and participation in various school activities;
- Support, to the best of my ability, the school's entire program through prayer, time, and financial gifts. I understand the school depends upon gifts above and beyond the tuition and thus conducts community fund-raising, and the school expects participation by the parents;
- Adhere to the appropriate channels when resolving conflicts, (ie) seek unity in conflict using the Matthew 18 principle. 1) Seek to resolve issue with the teacher first. If further action is needed 2) schedule a meeting with the Director/CEO;
- Accept the CEO's decision and understand the school reserves the right to dismiss a student based on the lack of cooperation on the part of the student, parent, and/or guardian;
- Attend Parent Advisory Board meetings and other functions requiring your participation;
- Cooperate in assisting in special workdays called throughout the year;
- Give permission for my child(ren) to take part in school activities, class field trips, including sports and school-sponsored trips away from the school premises, and absolve FSCA, Flaming Sword Daycare-Early Learning Center, and Flaming Sword International Ministries, Inc., from liability to me or my child because of any injury to my child at or away from the school or during any school activity. In case of emergency or serious illness, we request the school contact us first. If we are not available, please contact the designated emergency contact. If the emergency contact cannot be reached, the school has my permission to make whatever arrangements deemed necessary for our child(ren)'s treatment. If the emergency is life threatening and we cannot be reached, the physician has permission to act accordingly absolving the corporation and its subsidiaries of any liability.
- Allow FSIMI or anyone authorized by its subsidiaries, to use and reproduce all audio, video tapes and photographs which are taken of our child(ren) or any family member produced for school literature, facebook, website, and yearbook purposes without further compensation. All copies, masters, pictures and proofs shall constitute FSIMI property, solely and completely.
- Allow FSIMI to provide contact information for our family to the Campus Directory and Parent-Teacher Fellowship in assistance to encourage participation in activities.

I UNDERSTAND:

- There will be daily Chapel, to include honors to our country which is the Pledge of Allegiance and morning prayer in the Name of Jesus and that my student is expected to participate;
- My child (ren) is accepted on a general probationary status for the first quarter;
- Flaming Sword Christian Academy reserves the right to dismiss, suspend or otherwise discipline any student who does not adhere to the standards stated in the Handbook;
- If for any reason our child does not cooperate with the disciplinary standards of FSCA, I will withdraw him/her without delay in cooperation with the administration and avoid discussion with those not involved, so as to avert a spirit of dissension and division at either our child's expense or the school's expense;
- This application cannot be considered without the application fee and that, if my student is accepted, I agree to the payment and/or refund policies as listed in the school's fee schedule and tuition policy;
- If I voluntarily withdraw my student or if my student is dismissed once classes have begun, I am responsible to pay the full tuition for that month; therefore, there will not be any pro-rata refunds for the month of withdrawal and I will be charged a \$500 early withdrawal fee. Records will not be forwarded to another school until all financial obligations have been satisfied;

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- I understand that the Academy reserves the right to refuse any application, or dismiss any student, at any time, for unacceptable work or conduct, or any other reason the Academy deems necessary. Neither this application nor payment of non-refundable fees is considered binding upon the Academy;
- If legal action is required to collect fees owed by me, I will be responsible to pay reasonable attorney’s fees and court costs;
- The premises are monitored by closed circuit television with audio and visual surveillance for the protection of the children and staff ;
- Students must be willing to submit to random drug testing and searches of their book bags, purses, lockers, and their person by school personnel. The drug tests are urine tests given by school administration and if the test comes in positive for marijuana, the parent will be immediately contacted. If the drug test comes back positive for any other drugs, the school Director/CEO, parent and student will go directly to an Urgent Care for a detailed drug test. If this test result comes in positive, the parent will be responsible for repayment of the drug test to FSCA and the student will be subject to disciplinary action as determined by the school Director/CEO. If contraband is found on a student, in a locker, book bag, or clothing of any student, parents will be contacted immediately, and if necessary, law enforcement;
- FSCA is involved in training professionals and individuals in the areas of many neurological disabilities, specifically FSCA’s professional staff. The results or records of any evaluations or training sessions will be discussed with the ethics of confidentiality applying to those individuals involved. Occasionally, video or audio taping of a session may be done and used for training purposes. I understand that data secured from evaluations and remedial work with my child will be used internally. Data will be collected on self-concept and achievement scores at the beginning and end of the school year.

At intervals during the year, parents may be asked to participate in completing information forms concerning specific areas of child behavior or parenting practices. Any research conducted at FSCA will have as its primary goals program evaluation; demonstration of the effectiveness of particular teaching methodologies; evaluation of specific remediation processes; and demonstration of self-concept growth

PARENT ACKNOWLEDGEMENT STATEMENT:

In making application for my student to attend Flaming Sword Christian Academy, I acknowledge that I have read FSCA’s policies and desire to have this type of education for my child. I understand the training and research agreement stated above and will cooperate in supplying data necessary as approved by the Chief Executive Officer of FSIMI.

My signature below indicates that I have read, understand, and agree with this Parent/Legal Guardian Statement of Cooperation and Agreement.

_____/_____ / _____
Father’s/Guardian’s Signature Date Mother’s/Guardian’s Signature Date

FSIMI is an Equal Opportunity organization. Flaming Sword Campus and Flaming Sword Daycare – Early Learning Center admits children of any race, color, national origin, or ethnicity to all of the rights, privileges, programs and activities made available to the academy and daycare.

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FINANCIAL PLANNING CONTRACT

Student's Name: _____

School Year 2018-19

Grade _____ Functioning Grade Level _____ Placement Program _____

Initial Application Fee for New Applicants:	\$250 (non-refundable)
Typical or Gifted Program Tuition/Registration Fee/ Resource Fee/ Technology Fee/Administration Fee:	\$7000 (for new students)
Typical or Gifted Program Tuition/Registration Fee/ Resource Fee/ Technology Fee/Administration Fee:	\$7000 (returning students)
Additional tuition fees for Supportive Bridges Program: (K-12)	\$1000 (has only accommodations and average or above cognitive development)
Additional tuition fees for Intensive Bridges Program (K-12)	\$1500 (has accommodations and modifications with average and/or below average cognitive development)
Early Termination Fee:	\$500 (If a student is removed by the administration or by you, there will be a \$500 early termination fee. However, if you receive military or civilian orders, please provide us a copy and the fee will be waived.)
Refunds:	No partial or full refund of tuition of any month will be made for expulsion, withdrawal (whether by parent or administration, or for excessive absences). If student receives a grant from NCSEAA, refunds will be given to NCSEAA according to their schedule if there is early withdrawal.

ADDITIONAL ITEMS FEE SCHEDULE FOR 2018-19

Please check any additional items in which you are interested.

Before/After Care Fees

- Morning only \$125
- Afternoon only \$150
- Morning/Afternoon \$250

Camps

- Music Camp (monthly) \$100
- Art Camp (monthly) \$ 50
- STEM Camp (weekly) \$ 20
- Credit Card Fees Exact charge as shown by Intuit
- Physical Ed (monthly) \$ 50 (adaptive physical education)
- Karate (monthly) \$ 50
- Tutoring (daily 1 hour) \$ 25 (daily)
- Specialized Curricula Exact cost when student cannot access typical curricula offered
- Nationally Standardized Test \$50 (when not required by private school)
- Educational Technology Exact cost of approved item(s)

Flaming Sword Christian Academy – Enrollment Forms

Payments are due the 1st of each month, but no later than the 3rd of the month by 5:00 P.M. Should the account not be paid by this date and time, you will be charged a late fee of \$25. If the account is not current by the 8th of the month, your student will be removed from the Academy.

Flaming Sword Christian Academy participates in the Disabilities Grant, Opportunity Scholarship, and Education Savings Account Programs offered through NCSEAA. If you have applied, but have not yet received written approval, you will be responsible for the tuition payments until the approval email comes to you and you send a copy of the approval to FSCA. You will be invoiced June 1 and you must make payments until we receive the monies from NCSEAA. FSCA will reimburse what you have paid once we receive funding from NCSEAA.

If your student's name does not appear on the Endorsement List for FSCA, you will be responsible to continue payment for your child's account.. If we receive their name at a later date on our Certification List, you will be reimbursement any monies you have paid, once we receive the grant monies. We have a waiting list which we must try to fill for those already approved.

Disabilities Grant **Opportunity Scholarship** **Education Savings Account** **Combination**

PAYMENT OPTIONS:

OPTION 1 – DISABILITIES GRANT (DG) _____ **APPROVAL RECEIVED**

New student: Parent is responsible to pay the application fee of \$250, due at time of acceptance into FSCA. NCSEAA will pay up to \$4000 per semester. (Parent is responsible for any other charges such as specific program fees, before/after care, late fees, etc.). Existing student: If FSCA does not have your approval letter for the upcoming year by July 31, you will be billed for the first semester's tuition and payments will be expected from you until NCSEAA reapproves your student.

OPTION 2 – OPPORTUNITY SCHOLARSHIP (OPS) _____ **APPROVAL RECEIVED**

New Student: Parent is responsible to pay application fee of \$250, due at time of acceptance into FSCA. NCSEAA will pay the tuition up to \$2100 per semester. New and/or existing parent is responsible for balance on account to be paid in 12 equal monthly payments, in the amount of \$ _____. (Parent is responsible for any other charges (specific program fees, before/after care, late fees, etc.) which will be added to monthly invoice.

OPTION 3 – EDUCATION SAVINGS ACCOUNT (ESA) _____ **APPROVAL RECEIVED FROM PARENT**

New Student: Parent is responsible to pay application fee of \$250, due at time of acceptance into FSCA. ESA will pay up to \$9,000 per year, broken into 4 quarters of \$2250 each, which is dependent on FSCA's fees for the year. Parent is responsible for turning in all receipts from FSCA in a timely manner so that payment can be made in a timely manner. If payment has not been received from NCSEAA when the next monthly payment is due, parent will be responsible to pay it or student will be removed from FSCA.

OPTION 4 – FSCA SCHOLARSHIP _____ **DATE OF FINAL CONSIDERATION**

_____ **DATE APPROVED OR DENIED** **IF APPROVED, ANNUAL AMOUNT OF SCHOLARSHIP IS \$ _____**

FSCA Scholarship amounts will range from \$500 – \$1,000 annually. Existing families who are not receiving any other financial assistance for tuition are priority-1; new families who are not receiving any other financial assistance for tuition are priority-2; and families, new or existing, who are receiving some tuition assistance are priority-3. However, all families are eligible to apply for the FSCA Scholarship. FSCA will notify families of their scholarship determination through written documentation. The scholarship is not to provide "cash in hand" but provide for the payment of the tuition for the student. FSCA Scholarship applications will be sent home and through email no later than 1st of February. Closing date is March 1st. No applications from existing students will be accepted after that date. New applicants may apply for FSCA Scholarship when they apply for admittance into FSCA.

Flaming Sword Christian Academy – Enrollment Forms

OPTION 5 – SELF PAY (Parent may choose any one of the following payment plans).

_____ Annual tuition, including registration, resource, technology and administrative fees of \$7,000 for gifted or typical program, but if student is placed in one of the Bridges Program, the additional fees will be added, and due in its entirety at time of enrollment or by June 1 for existing students.

_____ Semi-Annual, payments due August 1 (or at time of acceptance) and January 3, of each semester respectively.

_____ Monthly contract: 12 months: \$ _____ (Beginning June 1)
 11 months: \$ _____ (Beginning July 1)
 __ months: \$ _____ (Beginning _____, if enrolled after June/July)

New Student application fee paid \$ _____ Date _____

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Parent or Guardian’s Signature and Date/

Administration’s Signature and Date (Received in office)