

# SUDBURY CHRISTIAN ACADEMY ENROLMENT FORMS

## APPLICATION FOR ADMISSION

**Application Date:** \_\_\_\_\_ **Grade to Enter:** JK SK 1 2 3 4 5 6 7 8  
(Please circle appropriate grade.)

**Child's Name:** \_\_\_\_\_  
(Last Name) (First Name) (Middle Name)

**Address:** \_\_\_\_\_ **Home Ph #:** \_\_\_\_\_

**Gender:**  M  F **Birth Date:** \_\_\_\_\_  
(Month/Day/Year)

**Citizenship Status:**  Canadian Citizen  Landed Immigrant  Other \_\_\_\_\_  
(Visitor, Student Visa, Etc.)

**Church Affiliation** (if applicable): \_\_\_\_\_

### Custody Arrangements:

Joint Custody  Exclusive – Mother  Exclusive – Father

Other – Comments: \_\_\_\_\_

### TO BE COMPLETED BY SUDBURY CHRISTIAN ACADEMY

The Registration fee of \$ \_\_\_\_\_ is paid.

A Series of 10 Postdated Cheques are submitted.

A One-time Annual Payment is submitted.

An Activity/Materials Adjustment of \$ \_\_\_\_\_ is paid.

Date of Admission: \_\_\_\_\_

Date of Discharge: \_\_\_\_\_

**All information contained in this application form is confidential.**

# SUDBURY CHRISTIAN ACADEMY ENROLMENT FORMS

## STUDENT INFORMATION

Student's Name: \_\_\_\_\_  
(Last Name) (First Name) (Middle Name)

Parent/Guardian Name(s): \_\_\_\_\_

Address: \_\_\_\_\_ Home Ph. #: \_\_\_\_\_

1. Last School Attended: \_\_\_\_\_  
Name of School

\_\_\_\_\_ Address of School

2. Last Grade: \_\_\_\_\_ Grades Repeated, (if any): \_\_\_\_\_

3. Has student ever been suspended?  Yes  No Expelled?  Yes  No

If so, please explain circumstances: \_\_\_\_\_

\_\_\_\_\_

4. Provide Pertinent Medical History/Information: \_\_\_\_\_

\_\_\_\_\_

5. Is the student regularly on medication? If so, provide details: \_\_\_\_\_

\_\_\_\_\_

6. Does student have identified learning disabilities or special needs? If so, please explain:

\_\_\_\_\_

\_\_\_\_\_

7. Briefly describe any extracurricular activities and interests: \_\_\_\_\_

\_\_\_\_\_

8. Briefly describe student's strengths and weaknesses: \_\_\_\_\_

\_\_\_\_\_

9. Reason for selecting this school: \_\_\_\_\_

\_\_\_\_\_

10. Do you require extended care?  Yes  No  
 8:00 a.m. to 8:30 a.m.  3:45 p.m. to 5:15 p.m.

All information contained in this form is confidential.

# SUDBURY CHRISTIAN ACADEMY ENROLMENT FORMS

## STATEMENT OF COOPERATION

### **STANDARDS AND EXPECTATION**

I understand the standards of Sudbury Christian Academy, in that they will not tolerate profanity, obscenity in word or action, dishonour to the Word of God, or disrespect to the personnel of the school.

I herewith agree to authorize the school to employ such discipline as it deems wise and expedient for my child. I both understand and agree with the policies in this area. (Proverbs 22:6).

Realizing that my attitude toward the teachers and policies of Sudbury Christian Academy affects the emotional and academic stability of my child, I support and uphold the ideals of the school in every way and will abide by the discipline and regulations of this administration. (1 Thessalonians 5:13)

At no time will I participate in destructive criticism of the staff or the school to my child or others, but will instead, if a problem arises, go directly to the teacher or principal in a Christian manner, as indicated in our Parent Manual and Matthew 18:15.

### **PEANUT POLICY**

I agree to respect potential peanut allergies in other children by not sending peanuts or foods containing peanut products to school with my child.

### **PAYMENT OF FEES**

In making application for my child, I fully understand that if I choose to withdraw my child for any reason, a thirty (30) day written notice must be submitted before the date of termination. An **additional** month's tuition payment will be applied for early withdrawal (total of two monthly tuition payments). Prepayment discounts do not apply with early withdrawal. Acceptance of your child in subsequent years is conditional upon the previous year's tuition being paid in full. Sudbury Christian Schools Inc. reserves the right to withhold academic records until payment is made in full. If a monthly payment is defaulted there will be a written warning issued, if two months are defaulted the child will be asked to be withdrawn from the Academy.

Tuition payment may be made in one of the following manners:

- 1) A one-time *Annual Payment*, or
- 2) *10 Post-Dated Cheques*

A certified cheque is required to replace any returned or N.S.F. cheque within seven (7) days of the date of a returned or N.S.F. cheque. A fee of \$25.00 will be charged for all N.S.F. cheques.

### **PERMISSION AND LIABILITY WAIVER**

I give permission for my child to take part in all school activities including sports programs and school sponsored trips away from the school premises. I absolve the school from all liability in the event my child is injured at school or during any school activity. I exonerate Sudbury Christian Academy and its staff from responsibility in the event of an injury to my child, subject to scrutiny by the licensing government agency and/or the Public Health Department and their approval in the handling of the occurrence by staff.

### **MEDICAL AUTHORIZATION**

In the event of an emergency, I hereby authorize the staff or appointed designated individual to seek and obtain necessary medical treatment for my child. Your signature below gives Sudbury Christian Academy permission to provide this care, should it be necessary.

Your signature below indicates your commitment to comply with the entire "Statement of Cooperation."

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Mother/Guardian

\_\_\_\_\_  
Signature of Father/Guardian

# SUDBURY CHRISTIAN ACADEMY ENROLMENT FORMS

## EMERGENCY FORM

ALLERGIES \_\_\_\_\_

Child's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_  
(Last Name, First Name, Middle Name) (Month/Day/Year)

Home Phone # \_\_\_\_\_ Male/Female \_\_\_\_\_

Home Address \_\_\_\_\_

E-Mail Address \_\_\_\_\_ Postal Code \_\_\_\_\_

Mother's Name \_\_\_\_\_ Occupation \_\_\_\_\_

Business Phone # \_\_\_\_\_ Cellular # \_\_\_\_\_

Employer \_\_\_\_\_ Address \_\_\_\_\_

Father's Name \_\_\_\_\_ Occupation \_\_\_\_\_

Business Phone # \_\_\_\_\_ Cellular # \_\_\_\_\_

Employer \_\_\_\_\_ Address \_\_\_\_\_

Arrival Time: A.M. \_\_\_\_\_ Departure Time: P.M. \_\_\_\_\_

Ontario Health Card # \_\_\_\_\_

### PERSON TO BE CONTACTED IF PARENT CANNOT BE REACHED:

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Relationship \_\_\_\_\_

### PERSONS AUTHORIZED TO PICK UP CHILD FROM SUDBURY CHRISTIAN ACADEMY:

(If it is not possible for a designated person to pick up the above mentioned child, an arrangement must be made with staff.)

Name \_\_\_\_\_ Phone \_\_\_\_\_

Relationship \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

Relationship \_\_\_\_\_

**In my absence, the staff of Sudbury Christian Academy  
or authorized individual has my permission to seek medical care for the above-mentioned child.**

Special Arrangements \_\_\_\_\_

Doctor \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Date \_\_\_\_\_ Signature \_\_\_\_\_

**PLEASE NOTE IT IS THE RESPONSIBILITY OF THE PARENT  
TO ENSURE THAT THE INFORMATION ON THIS FORM IS KEPT UP TO DATE.**

# SUDBURY CHRISTIAN ACADEMY ENROLMENT FORMS

## GRADE PLACEMENT

**Name of Student:** \_\_\_\_\_

**Grade Placement:** \_\_\_\_\_

At Sudbury Christian Academy, we strive to place students in age appropriate and pedagogically appropriate grades. From time to time, the teacher, in conference with the principal, may determine that an alternate placement is in the best interest of the student. Sometimes this will mean accelerating a student to a higher grade; however, at other times a student may be moved back or may need to repeat a grade. We endeavour to make this transition as smooth as possible and also to maintain a keen awareness of the self-esteem of the child.

As a parent, you may not concur with the school's recommendations; this is your right. However, placement of the child in the grade, level, or class remains at the discretion of the principal.

Promotion to the next grade level is normally awarded in June. Should your child exhibit the skills and strengths necessary to satisfactorily move into the next grade level at an earlier date, the teacher or principal will discuss the matter with you and make whatever transition is deemed to be appropriate.

**Signature of Parent:** \_\_\_\_\_

**Date:** \_\_\_\_\_

## SUDBURY CHRISTIAN ACADEMY ENROLMENT FORMS

### IMMUNIZATION

Immunization information may be submitted in two ways:

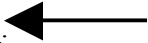
1. Submit a photocopy of your child's yellow immunization card to Sudbury Christian Academy with the application package.

**OR**

2. Pick up a copy of the Immunization Form provided by Sudbury District Health Unit at the school office. Complete the form and return it to Sudbury Christian Academy with the application package.

# SUDBURY CHRISTIAN ACADEMY ENROLMENT FORMS

## RELEASE AND DISCHARGE FOR LIKENESS

1. I understand that **Sudbury Christian Academy** requires my permission to use my child's likeness in its archival, fundraising, or promotional material.
2. I also understand that **Sudbury Christian Academy**, with my permission, from time to time, for the purposes of documenting events, fundraising, or promotional development, may include my child's likeness in its archival, fundraising, or promotional material.
3. I have read the above paragraphs \_\_\_\_\_.  (Parent or Legal Guardian, please initial here.)

**Please print clearly below.**

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**Name of Child**

**Age**

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**Street Name and Number**

**Apt. Number**

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**City**

**Province**

**Postal Code**

I hereby grant **Sudbury Christian Academy** permission to use my child's likeness, as is or as may be retouched or edited, for the purpose of print advertising and promotional material including magazines and brochures, material to be included with the sale of a compact disc, cassette tape or other audio/visual material, from the date hereof.

I, the undersigned, represent that I am the Parent or Legal Guardian of the child named above, and as such I am fully authorized and entitled to enter into this agreement on his/her behalf.

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**Date**

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**Signature of Parent or Legal Guardian**

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**Witness**

# SUDBURY CHRISTIAN ACADEMY ENROLMENT FORMS

## PARENT CHECKLIST

### A. Requirements to be submitted when applying for admission:

- The completed *Application for Admission Form*.
- The completed *Student Information Form*.
- The completed and signed *Student Placement Form*.
- The completed and signed *Statement of Cooperation Form*.
- The completed and signed *Release and Discharge for Likeness Form*.
- The completed *Immunization Record*
- The completed *Emergency Form*.
- The completed *Emergency Card*.
- A *Birth Certificate*. (It will be photocopied and returned to you.)
- Ontario Health Card*. (It will be photocopied and returned to you.)
- A copy of the most recent *Report Card*.
- Registration fee according to date enrolled.

Please submit the above requirements to:

**Sudbury Christian Academy**  
**1101 Regent Street**  
**Sudbury, ON P3E 5P8**

Parents or Guardians will be contacted to arrange an interview.

### B. Additional requirements if application for admission is approved:

- A completed *Tuition Pledge Schedule* must be submitted.