

OFFICE USE ONLY

Reg. Paid _____
 Amount _____
 # Students _____
 Post-dates _____
 Date Rec'd _____

SUSSEX CHRISTIAN SCHOOL
45 Chapman Drive
Sussex, NB E4E 1M4
433-4005
www.sussexchristianschool.ca
RE-APPLICATION FORM



Father/Guardian Name _____
 Last First Middle Initial

Mother/Guardian Name _____
 Last First Middle Initial

Family Address _____
 # & Street

 Town Prov. Postal Code

E-Mail Address _____
 (SCS uses email as a major communication method with school families)

Home Phone _____ **Cell #** _____

Please check one of the following:

- ___ Yes, I give permission for my phone # to be published on a list issued to school families
 ___ No, I do not wish my phone # to be available to school families.

Father/Guardian Employment _____
 Work Phone

Mother/Guardian Employment _____
 Work Phone

Family Attends What Church? Complete Name _____

Complete Address of Church _____

Pastor's Name _____ Phone # _____

Attend Regularly? _____ We / I do not have a church home. ()

FULL Name of Children for whom you are applying	Date of Birth	Grade completed	SIN #
1.			
2.			
3.			
4.			

We, the parents or guardians understand that the primary responsibility for Christian education of children remains with the home and with the church. SCS can help supplement the Christian training of home and church. We know SCS administration urges each family to have regular times for devotions together daily in their home. We are to regularly attend the services of a spiritual church where the Bible is honoured as the Word of God and the good news of the gospel message of salvation through Jesus Christ is clearly proclaimed.

We have read the Sussex Christian School Student/Parent Handbook and agree with the school's outlook and aims. Yes () No ()

Father/Guardian _____ Mother/Guardian _____
 Date _____ Date _____

STATEMENT OF FAITH

Preamble:

Sussex Christian School is a ministry of Sussex Wesleyan Church. It is also, however, non-denominational in its teaching approach and in its acceptance of constituents. SCS adheres to and teaches basic tenets of the Christian faith only, not denominational positions.

All faculty, staff and council members must be able to sign the Statement of Faith without reservation. Each parent must be able to sign either that s/he agrees with the Statement of Faith, or that s/he agrees with the school's right to uphold the Statement of Faith.

SCS Statement of Faith

1. We believe that the Bible is God's inspired, infallible Word, and we seek to establish our faith and actions on its teaching. (2 Timothy 3:16, 2 Peter 1:21)
2. We believe in one God, who is Father, Son, and Holy Spirit. (Matthew 28:19, John 10:30, 15:26, 1 Corinthians 8:6)
3. We believe in the full deity and full humanity of Jesus Christ; his virgin birth, sinless life, miracles, atoning death, physical resurrection, ascension, and his physical return to earth. (Matthew 26:64, Mark 6:2, Luke 1:34-38, Acts 1:9-11, Acts 2:23-24, Romans 5:8-9, Philippians 2:6-11, Hebrews 2:9, 1 Peter 3:18,)
4. We believe that humanity was/is created by God in His own image and that though we are spiritually separated from God because of sin we are reconciled to God by the work of Christ on the cross. (Genesis 1:27, Romans 5:7-9, 1 Corinthians 15:20-23)
5. We do not teach hatred towards any group or individual. We believe, according to the teaching of the Old and New Testament, that sexual intimacy outside of marriage is morally wrong and that marriage is meant to be an exclusively heterosexual institution. (Genesis 2:24, Leviticus 18:22, Matthew 19:4-6, Mark 10:6-9)
6. We believe that Jesus Christ is the Saviour of all, and that those who receive new life in Christ experience a personal relationship with God. They are called to live a holy life in character and conduct through the help of the Holy Spirit who is sent to indwell, guide, teach and empower them for service. (John 14: 6, 26, John 16:13, Acts 1:8, 2 Timothy 1:9, Revelation 3:20)
7. We believe that the Church is the body of Christ, in fellowship with Christ and with fellow believers, and is commissioned by Christ to share the Good News with everyone. (Matthew 28:19-20, Ephesians 1:22-23, 3:10-11)
8. We believe God desires for people everywhere to know Him and that the purpose of His Church is to share the love, peace, and salvation that Christ brings to the world.(1 Timothy 2:3-4, 2 Peter 3:9)
9. We believe that human life begins at conception and that the unborn child is fully human and deserves the same protection as any other person. (Job 31:15, Psalm 22:10, Psalm 127:3, Ecclesiastes 11:5, Isaiah 44:24, Jeremiah 1:5, Luke 1:31)
10. We believe in the resurrection of all people: the saints to eternal life/fellowship with God and the lost to suffer eternal separation from God. (John 3:16-18, John 5:28-29, 1 Corinthians 15:20-28, 1 Thessalonians 4:14-17, Revelation 20:12-15)

Each parent please sign one of the statements below:

Father

Mother

I have read and agree with the SCS Statement of Faith

I have read the SCS Statement of Faith
and agree with the school's right to uphold this statement.

**SUSSEX CHRISTIAN SCHOOL
PARENTAL UNDERSTANDING AND COMMITMENT FORM**

We understand that a basic responsibility of Christian parents is to “train up a child in the way he should go . . . that when he is old he will not depart from it.” (Proverbs 22:6). Sussex Christian School is a school seeking to mold your children’s lives after God’s fashion. Successful Christian living hinges on three areas: the home, the church, and the school. These institutions must work cooperatively together. Parents should not give their responsibility to the Christian school and let them train the children alone. Both the home and the school share this responsibility. Therefore, as parents we pledge to do our part and enter into covenant with SCS.

Father Mother

- () () I have received the Lord Jesus Christ as my Saviour, am born again, and am actively involved in my local church.
() () I regularly attend a local church.
() () I do not have a church home.

- ___ a) It is my choice as a parent that my child have an academic education based on the Word of God and its teachings.
- ___ b) I understand that Sussex Christian School is a ministry of Sussex Wesleyan Church and that the church’s doctrinal position on the Word of God will be reflected in all affairs of the school.
- ___ c) I believe it is in the best interests of the school and the children that parents express a POSITIVE ATTITUDE toward the goals, aims, and standards of the school. SHOULD A PROBLEM OR MISUNDERSTANDING ARISE I WILL IMMEDIATELY SEEK TO RESOLVE IT PRIVATELY WITH THE SCHOOL ADMINISTRATION.
- ___ d) I agree to uphold and support the high academic standard of the school by providing a proper atmosphere for my child to study and to give my child encouragement in the completion of any homework or assignments.
- ___ e) I appreciate the standards of the school and WILL NOT TOLERATE PROFANITY, OBSCENITY IN WORD OR ACTION, DISHONOUR TO THE LORD AND THE WORD OF GOD, OR DISRESPECT TO THE PERSONNEL OF THE SCHOOL.
- ___ f) I fully approve of the STANDARD OF CONDUCT for students and the DRESS CODE and AGREE TO SUPPORT ALL REGULATIONS OF THE SCHOOL made in the applicant’s behalf and authorize this school to employ such discipline as is deemed wise and expedient for the training of my child.
- ___ g) I commit myself to promptly pay my financial obligations to the school, understanding that REGISTRATION FEE and monthly TUITION are payable in ADVANCE.
- ___ h) I understand that the school reserves the right to dismiss any child who fails to comply with the established regulations and discipline or WHOSE FINANCIAL OBLIGATIONS ARE NOT MET.
- ___ i) I understand that the staff of Sussex Christian School will treat my child with love and respect and are committed to providing the best possible academic instruction.

Signature of Father/Guardian

Signature of Mother/Guardian

Date

Date

FINANCIAL INFORMATION 2014-15

A **Registration Fee of \$75 per student** for JK to 12 is due upon submission of application *before August 1st*. After Aug 1st, registration fee is \$100. After first day of school, registration fee is \$125. A **Student Fee of \$250** per student covers curriculum and other classroom costs. The Student Fee(s) are added to the below-listed tuition rates and factored into the payment plan. An interview with parents and the child is required before final acceptance. **International Student Rate: \$2600 per student** (in addition to regular tuition)

Tuition is as follows ~

Tuition	First Child	2 nd Child	3 rd Child	4 th Child
Jr. K-3 (2-Day)	\$1410	\$1160	\$1160	\$880
Jr. K-4 (3-Day)	\$1985	\$1735	\$1735	\$880
Jr. K-4 (5-Day)	\$3000	\$2630	\$1755	\$880
Kindergarten to Gr. 2	\$3270	\$2630	\$1755	\$880
Grades 3-12	\$3760	\$2630	\$1755	\$880

Tuition and Student Fees for my family will be as follows:

CHILD	\$
First	
Second	
Third	
Fourth	
Student Fees (\$250 X # students)	
Total	

Note:
Fees are subject to
change for the
2015-2016 School Year

I understand my financial obligations and will, upon notification of acceptance (please check one of the following):

Make a lump sum payment for the total amount [5% discount on tuition portion (K-12) for lump sum payment received **before July 1**]

Submit 10 equal monthly post-dated cheques starting August 2014 thru May 2015 dated the 15th or 30th of the month

Submit 20 equal post-dated bi-monthly tuition cheques (dated the 15th & 30th of each month (½ payment on the 15th and ½ on the 30th, August 2014-May 2015)

If a student enrolls after a school year begins or withdraws before the year ends, tuition will be pro-rated according to the quarter in which the student is enrolled. All other fees must be paid in full.

Signature of Father/Guardian

Signature of Mother/Guardian

Date

Date

One copy of this page to be completed for each student being enrolled

Student's FULL Name _____
Last First Middle

Date of Birth _____ **Grade applying for** _____

PERMISSION SLIPS

School Sponsored Events off School Property

I do/ do not (please circle one) give permission for my child to take part in all school activities, including sports and school sponsored trips away from the school's premises. I absolve Sussex Christian School and Sussex Wesleyan Church from liability to me or my child because of any injury to my child at school or during any school activity.

Parent Signature _____

Publishing Photos

I do/ do not (please circle one) give permission for my child's photo to be published in print media.

I do/ do not (please circle one) give permission for my child's photo to be published on school website.

I do/ do not (please circle one) give permission for my child's photo to be published in video media (for such things as school dramas, etc.)

Parent Signature _____

Cell Phones/ Electronics

SCS does not allow students to have cell phones or other electronics on their person or in their bookbags or lockers during the school day. If a parent feels that it is necessary for the student to carry a cell phone, it must be turned in to the school office at the beginning of the school day. If a student is leaving the school grounds at lunch time, they may pick their phone up from the office before they leave and return it to the school office after lunch.

___ My child does not carry a cell phone

___ My child does carry a cell phone. I understand that when it is brought to school, it will be signed in to the school office for the school day, and may be signed out at lunch time if s/he is leaving the school grounds.

Parent Signature _____

Jr/Sr High Permission to Leave School Property

My child will/ will not (please circle one) be permitted to leave SCS grounds during the designated noon hour. This does not mean they are allowed to leave school grounds at other times during the day (breaks, etc.)

My child will/ will not (please circle one) be permitted to leave school grounds at noon hour in a car driven by a teenage driver?

Have you discussed this with your child? Yes () No ()

By signing this form you understand that Sussex Christian School is not responsible for any injury or harm that may occur off school property during the designated lunchtime. Sussex Christian School reserves the right to revoke this privilege if it is being abused (constant tardiness, etc.).

Parent Signature _____

Students in Grades 7-12 must sign the following:

I recognize that SCS is a Biblically-based Christian school working in cooperation with parents. I agree to abide by the rules of the school as set forth in the student handbook. I understand that as a student of SCS I am to refrain from profane and vulgar language, the use of tobacco, alcohol and illegal drugs, and sexual activity, and that failure to do so could be cause for my dismissal from SCS. I also agree to respect and support the authority under which I am placed as a student at SCS.

Student's Signature: _____ **Date:** _____

MEDICAL INFORMATION

Child's full name _____

Family Physician's Name _____ Phone # _____

Medicare # _____ Expiry Date _____

Does applicant have any mental, emotional, physical limitations, or learning disabilities that may affect his/her activities or progress, or for some reason should be known by his/her teachers?

Please specify if your child has any allergies.

PERMISSION TO RECEIVE MEDICATION

My child will / will not be permitted (please circle one) to be given pain medication (Aspirin, Tylenol, and/or Advil, etc.) during school hours if necessary, understanding that this does not mean they are allowed to abuse this privilege.

By signing this form I understand that Sussex Christian School is not responsible for any injury or harm that may occur as a result of this medication. Sussex Christian School reserves the right to revoke this privilege if we feel it is being abused (constant use of pain medication, etc.).

In order to receive pain medication, students must check with their Home Room teacher before coming to the school office for such medication.

Parent Signature _____

NOTE: If medication is required on a regular basis, or at a specified time, the parent should bring the medication to the school office, labeled with child's name and dosage requirements, and sign permission for school personnel to administer.

EMERGENCY MEDICAL TREATMENT

I hereby authorize Sussex Christian School to call an emergency ambulance in case of accident or acute illness, and to arrange for necessary emergency medical aid and surgical care in case I am not immediately available. Any qualified physician, called by SCS, may treat and do whatever is necessary for the health and well being of my child.

It is understood that a conscientious effort must be made to notify me before such action will be taken. I also agree to accept responsibility for the cost of above medical services.

Mother/Guardian _____ Work Phone _____

Father/Guardian _____ Work Phone _____

Emergency Cell Phone # _____

Neighbor or Relative _____ Phone _____

This section below must have two signatures. If your child is in the custody of one parent, please indicate.

Signature of Father/Guardian

Signature of Mother/Guardian

Date

Date