



Students Being Conformed To
The Image of Jesus Christ

K – 6TH Grade Student Application

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Lafayette, LA 70501

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2018 – 2019

The Church Academy admits students of any race, color, national and ethnic origin to all rights, privileges, programs, and activities generally accorded or made available at the school. The Church Academy does not discriminate on the basis of race, color, gender, national or ethnic origin in the administration of educational policies, athletics, admissions procedures, and other school-administered programs.

Admission Requirements – Check List

The following information is necessary when applying for admission to The Church Academy - Lafayette. Please provide only the information that applies to the grade your child is entering. Registration for the 2017-2018 school year begins in February for new students entering Kindergarten – 6th grade.

(K-6th Grade)

- A completed and signed application
- A copy of Birth Certificate
- A copy of current immunization record
- A copy of Social Security card
- Parent Questionnaire
- New Student Registration Fee (due February 1st)
 - Registration fee 1 children: \$200.00
 - Registration fee 2 children \$380.00
 - Registration fee 3 children \$545.00
 - Registration fee 4 children \$750.00
- Current Student Re-Enrollment Fee (due February 1st)
 - Registration fee 1 children: \$125.00
 - Registration fee 2 children \$235.00
 - Registration fee 3 children \$355.00
 - Registration fee 4 children \$475.00
- Most recent standardized test scores (IOWA, Leap, CAT, etc.).
- Most recent transcript/report card
- Curriculum & Supply Fee:
 - \$175.00 due May 1st

The above information must be submitted and completed by February 1st to enroll your child into TCA – Lafayette. Applications will not be accepted without registration fee.

ACCEPTANCE OF ANY STUDENT IS CONTINGENT UPON RECEIPT OF “OFFICIAL” SCHOOL RECORDS, AS WELL AS THE EVALUATION OF THE ABOVE DOCUMENTS.

Students are admitted on an individual basis following an interview with the student and parents. During the interview, school policies, curriculum, academics, and behavioral guidelines are explained, and a commitment to conform to these policies and requirements is a prerequisite for admission.

The Church Academy provides all rights and privileges to all students in all programs, and activities, and does not discriminate on the basis of race, sex, or national origin.

Student Application for TCA - Lafayette

Student Information

Name: _____
(Last) (First) (Middle) (Suffix)

Date of Birth: ____/____/____ Age ____ Social Security: ____-____-____ Male Female
Mon Day Year

Current Grade _____ Grade Applying for _____ Primary Telephone: (____) ____-____

Address: _____

City: _____ State: _____ Zip: _____

Student's Cell Number: (____) ____-____ Student's Email: _____

Ethnicity: White Asian African American Hispanic/Latino American Indian Other: _____

Family Information

Student lives with: Father Mother Stepfather Stepmother Father deceased Mother deceased
 Other: _____ Relationship: _____

Parents: Married Single Divorced Widowed

Mother/Guardian _____	Father/Guardian _____
Address _____	Address _____
Home Ph# (____) _____	Home Ph# (____) _____
Cell Ph# (____) _____	Cell Ph# (____) _____
Email _____	Email _____
Occupation/Title _____	Occupation/Title _____
Employer _____	Employer _____
Work Ph# (____) _____	Work Ph# (____) _____
Soc. Sec. # _____	Soc. Sec. # _____
DL# _____	DL# _____

Is the mother a Christian? Yes No Is the father a Christian? Yes No

Siblings also registering for The Church Academy:

Name: _____ Age: _____ Grade: _____

Name: _____ Age: _____ Grade: _____

Name: _____ Age: _____ Grade: _____

Siblings who are not enrolling here for this year:

Name: _____ Birthdate: _____ Grade: _____ School: _____

Name: _____ Birthdate: _____ Grade: _____ School: _____

Name: _____ Birthdate: _____ Grade: _____ School: _____

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Previous Schooling Information

Christian Private Public Homeschool

Grades Attended: _____ Dates Attended: _____

School Name: _____

School Address: _____

City: _____ State: _____ Zip: _____

Phone Number: (_____) _____-_____ Fax Number: (_____) _____-_____

Is this the first time your child has attended any school including homeschool? Yes No

Has your child received testing/counseling by a psychologist, psychiatrist, or family counselor? Yes No

If yes, explain: _____

Has your child ever been diagnosed or in a program for a learning disability? Yes No

If yes, explain: _____

Has your child ever been bilingual, ESL, or LEP program? Yes No

If yes, explain: _____

Has your child ever been in a 504 or IEP program (Individual Education Plan) with or without ARD (Admissions, Review, and Dismissal)? Yes No

If yes, explain: _____

Has your child ever been diagnosed with ADD or ADHD? Yes No

If yes, explain: _____

Does your child take any medication for ADD or ADHD? Yes No

If yes, name of medication: _____

Emergency Contacts

The following people are authorized to pick my child up in the event that I am unable to:

Name: _____ Relationship _____ Home: (____) ____-____ Cell: (____) ____-____

Name: _____ Relationship _____ Home: (____) ____-____ Cell: (____) ____-____

Name: _____ Relationship _____ Home: (____) ____-____ Cell: (____) ____-____

Name: _____ Relationship _____ Home: (____) ____-____ Cell: (____) ____-____

Name: _____ Relationship _____ Home: (____) ____-____ Cell: (____) ____-____

Or may we release your child to any school family member? Yes No

Identification must be presented at the time of check out.

We know that in certain situations you may have people that you **do not** allow to visit your child. Please list them below:

Name: _____

Name: _____

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Medical Information (Confidential)

Family Doctor: _____ Main #: (____) ____ - _____

Email (optional) _____ Fax #: (____) ____ - _____

Family Dentist: _____ Main #: (____) ____ - _____

Email (optional) _____ Fax #: (____) ____ - _____

Insurance Company: _____ No insurance

Insurance Policy #: _____

Hospital Preference: _____

Any physical difficulties: _____

Allergies/Medical Conditions: _____

Does your child take any medication(s) on a regular basis? Yes No

If yes, name of medicine: _____

Will your child have to be given medication during school hours? Yes No

Is child's immunization current? Yes No (All students must provide a copy of their current immunization record)

I realize that TCA does not provide student insurance; therefore, I am responsible to provide accident insurance for my child if I so desire. I do not hold TCA or any individual liable for injury or death of my child sustained at school or on any school related outing or function. This will apply not only to school staff, but also to any other sponsor involved with my child.

I give TCA permission to transport my child to the nearest medical facility in the event of an emergency

Photographic Release

I authorize The Church Academy, or anyone authorized by TCA, to use and reproduce any and all audio, video, and photographs which TCA takes of my children or any family members produced for school literature and website, advertisements and promotional purposes, without further compensation. This includes the school yearbook. All copies, masters, negatives, and positives, together with the release dubs and proofs, shall constitute TCA property, solely and completely. Yes No

Statement of Faith

The Church accepts the bible as the revealed will of God, as the all-sufficient rule of faith and practice, and for the purpose of fulfilling God's mission.

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Student/Parent Pledge of Excellence and Acceptance

I will pray earnestly for TCA.

I will faithfully attend a Bible-believing Christian church realizing that scripture guides us in this very matter: *“not forsaking our own assembling together, as is the habit of some, but encouraging one another; and all the more as you see the day drawing near.” (Hebrews 10:25).*

I will cooperate fully in the educational functions of TCA, faithfully attending the parent meetings, and corresponding quickly to requests from teachers for conference.

I understand that my child will be taught Christianity as defined in the TCA Statement of Faith. *“Train up a child in the way he should go, Even when he is old he will not depart from it.” (Proverbs 22:6).*

I will pay all of my financial obligations and understand that no progress reports, report cards, transcripts, or other such services will be provided unless all tuition and fees are current. I also understand that dismissal from school will occur if financial obligations are not met.

If I become dissatisfied with the school in any respect, I will seek to resolve the matter with the person or persons involved, rather than begin to spread criticism, listen to criticism, or hold a negative attitude in my heart. *“If your brother sins, go and show him his fault in private; if he listens to you, you have won your brother. But if he does not listen to you, take one or two more with you, so that BY THE MOUTH OF TWO OR THREE WITNESSES EVERY FACT MAY BE CONFIRMED. If he refuses to listen to them, tell it to the church; and if he refuses to listen even to the church, let him be to you as a Gentile and a tax collector. (Matthew 18:15-17).*

I pledge that, if for any reason, my child does not respond favorably to the school, I will not try to change the school to fit his needs, but will withdraw him quietly and without delay. (Six weeks are adequate for most students. The one who has not adjusted by the end of nine weeks should be withdrawn.)

I will seek for the excellence and advancement of TCA in all areas, spiritually, academically, and physically.

I will abide by all the rules of classroom behavior and school standards as stated in TCA Student/Parent Handbook.

I hereby invest authority in The Church Academy to discipline my child as necessary. I further agree that I will cooperate and discipline my child in the home as needed.

The student will show respect for those in authority over them, even when he/she disagrees with the authority. *Obey your leaders and submit to them, for they keep watch over your souls as those who will give an account. Let them do this with joy and not with grief, for this would be unprofitable for you (Hebrews 13:17).*

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Worship Information

Church Family Attends: _____

Name of Pastor: _____ Denomination: _____

How often do you attend: _____ Are you a member: Yes No

Has the student been baptized? Yes No Has the student had a salvation experience? Yes No

Agreement of Enrollment

To complete the admissions process, I agree to provide the following for my child:

- ❖ Birth Certificate
- ❖ Social Security Card
- ❖ Updated Immunization Records
- ❖ Most recent standardized test scores
- ❖ Most recent transcript/report card
- ❖ Registration Fee
- ❖ Completed Application with signatures

I agree and will comply with Federal law, that no information shall be released to anyone other than the parent or legal guardian, unless otherwise authorized by law except with written direction by the student and with consent of a parent or legal guardian. Every person is to be in subjection to the governing authorities. For there is no authority except from God, and those which exist are established by God (Romans 13:1).

I understand that my child and I are bound by the rules and regulations of TCA and a violation of such will result in a review of possible suspension or dismissal. I realize that attending TCA is a privilege and not a right. It is my intention to abide by the decision and support the discipline of the administration. Obey your leaders and submit to them, for they keep watch over your souls as those who will give an account. Let them do this with joy and not with grief, for this would be unprofitable for you (Hebrews 13:17).

I uphold that I am a Christian parent who desires a Christian education for my child/children. I also uphold that I attend a biblically-based church. I understand that from time to time, TCA will contact a family's church pastor to verify their membership and attendance.

By signing below, I agree to fully and faithfully comply with the guidelines and policy contained in TCA's Student/Parent Handbook and Application Package which includes the following: Medical Liability Clause, Insurance Clause, Transportation of Child Clause, Statement of Faith, Student/Parent Pledge of Excellence, and Agreement of Enrollment.

Once accepted by TCA, this constitutes a binding contract.

Father/Guardian Print Name

Signature

Date

Mother/Guardian Print Name

Signature

Date

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Parent Questionnaire

(Only one parent will need to fill out the parent questionnaire.)

Student Name _____ Parent's Name _____

1. What phrases come to mind when describing your child?

2. Please describe your child's greatest strengths, both cognitive (intellectual) and social.

3. Please describe any behavior, social and/or cognitive special needs of your child that The Church Academy should be aware.

4. Has your child been enrolled in a special needs program? Yes No

5. Has your child ever been suspended from school or subject to any other serious disciplinary actions? Yes No If yes, please explain:

6. Does your family attend The Church? If yes, please describe your family's involvement. If no, give the name of the church in which you attend, and describe your family's involvement. Yes No

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7. Please share any major events that have occurred during your child's life that The Church Academy should be aware. (relocation, death in family, major illness, divorce, etc.)

Please use this space for any other information you wish to share about your child.

Kindergarten Questionnaire

(please complete if your child is entering Kindergarten)

Please answer yes or not to the following questions

- Follows Directions? _____ Is imaginative? _____ Independent? _____
Is cooperative? _____ Considerate of others? _____ Cries easily, sulks? _____
Excited about school? _____ Plays well with others? _____
_____ Does your child attend or has ever attended daycare or Mother's Day Out?
_____ Does your child attend children's church?
_____ Does your child know their colors?
_____ Does your child know how to count numbers?
_____ Can your child say A, B, C's?
_____ Does your child recognize their name when written?
_____ Does your child participate in any extra-curricular activities?
_____ Are you concerned with your child's speech?

Please describe any medical problem your child may have:

- Attention _____
Hearing _____
Vision _____
Speech _____
Physical Handicap _____
Anxieties _____
Serious Injuries _____
Bladder/Bowel _____
Hyperactivity _____