



Grace Fellowship Academy
1300 North Miller Road
Buckeye, AZ 85326
623-393-8883
www.gracefellowshipacademy.org

Dear Parents:

Thank you for your interest in Grace Fellowship Academy. We have enclosed information and several forms to assist you in the application process. The following requirements need to be met before a student may be considered for admission:

1. At least one parent is a believer and will attest to a personal relationship with the Lord Jesus Christ.
2. At least one parent is actively attending a local Bible-believing church with their child.
3. The student being considered for admission has not been expelled from another school for disciplinary reasons.

Unfortunately, at this time we are not funded, staffed or equipped to meet the needs of special needs children. Please direct questions to the school office at 623-393-8883.

Thank you for inquiring about Grace Fellowship Academy for your child's educational needs. It is our vision to come alongside Christian parents and build on the foundation in Christ that you have started. It is our goal to help your children grow in the ways of the Lord and to know who they are in Christ.

Sincerely,

Geri Parker, Principal
Grace Fellowship Academy

Grace Fellowship Academy PreK-8
Financial Commitment Form

1. We understand all tuition fees are due in advance and agree to pay accordingly.

2. Our payment preference is (check one of the following):

_____ *Payment in full by August 1st (for K-8 only) a 5% discount will be given.*

_____ *Payment monthly (August through May) due on the 1st of the month.*

1. We understand that there will be a charge of \$25.00 on any check returned to the school by the bank.

2. We understand that there will be a late fee of \$25.00 applied to payments received after the 10th day of the month.

3. We understand that expenses continue whether or not our child is present. Tuition will not be refunded in the case of absence, illness, or any other reason. Charges will continue until our child is officially withdrawn. A two week notice must be given prior to withdrawal.

4. Should an emergency arise which will prevent prompt payment, we will contact the school Principal immediately to discuss suitable financial arrangement.

6 We understand that in the event payment has not been received by the office within 30 days after the due date, per board policy, our student(s) may be removed from Grace Fellowship Academy.

7. We agree to pay any balance due before requesting school records to be released.

8. In the event that our account should remain delinquent and upon the discretion of Grace Fellowship Academy, our account may be turned over to a professional agency for collection.

9. This document is understood to be legally binding, and we have read and agree to comply with the above commitment.

_____ Date _____
Father/Guardian

_____ Date _____
Mother/Guardian

Grace Fellowship Academy

2011/2012 Fee Schedule

Registration Fee

(Non-Refundable)

- Returning Student - February 17, 2011 - March 31, 2011 - \$50.00
- Returning Student - April 1, 2011 - \$75.00
- New Student - \$75.00

Curriculum Fee

Curriculum fees due at time of registration

- One time Curriculum fee-Kindergarten \$175.00.
- One time Curriculum fee - 1-8th grade \$285.00.

Athletic Fee

Only applies to students playing sports

\$45.00- Due prior to the start of season

Annual Tuition

- K-8 grade- \$450.00 per month or \$4,500 a year.

Tuition Payment & Discount Options

- Payment in full by Friday, July 1, 2011 - a 5% discount will be given.
- Payment monthly, August through May, due on the 1st of every month, delinquent after the 10th.
- Sibling discount of 10% will be given per additional student.
- Discount available to Grace Fellowship Church members.



Academy

How to Enroll (For new students)

1. Submit the completed application along with a \$75.00 registration fee, child's birth certificate and immunization record.
2. Students entering grades first through eighth will be required to take a placement test prior to admission.
3. After we have received your completed application, we will contact you for an interview.
4. A parent/guardian must accompany the student for the interview. The following records **must** be in the student's file prior to the interview:
 - Immunization record
 - Birth Certificate
 - Recommendation forms
 - Teacher from prior school
 - Pastor / Church Leader
 - Father/Mother Testimony
 - Signed Statement of Faith

<i>For Office Use Only</i>	
Date Received _____	
Reg. Fee Paid _____	
Multiple Student Family _____	
Birth Certificate _____	
Shot Record _____	

Grace Fellowship Academy

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Application for New Student Admission

*All information **must** be provided
 and full registration fee submitted for this application to be considered.*

STUDENT INFORMATION (please fill out complete form for each student you wish to enroll)

Student's Name _____
Last First Middle

Date of Application _____ Applying for Grade _____ For Term Beginning _____

Date of Birth _____ Age _____ Place of Birth _____

Male _____ Female _____

Please list schools student previously attended:

School	Address/Zip	Dates	Grades Completed

Please enclose a copy of most recent report card or transcript

PARENT INFORMATION

1. Father's (Or Guardian's) Name _____

Address _____ Home Phone () _____

 City State Zip Code

Employer _____

Occupation _____ Business Phone () _____

E-mail _____ Cell Phone () _____

2. Mother's (or guardian's) Name _____

Address _____ Home Phone () _____

 City State Zip Code

Employer _____

Occupation _____ Business Phone () _____

E-mail _____ Cell Phone () _____

3. Are there other school age children in your family? Yes____ No____ If yes, what are their names & ages?

4. What is the marital relationship in your home? Parents are: __ married & living together
__separated __divorced __one parent deceased
5. Student lives with _____
If other than parent, please indicate who and relationship to student _____

6. If parents are divorced or separated, who has legal custody of the student? (Name of parent or legal guardian if other than parent.) _____

Court Documents Required

7. If coming from a public school, does your child have an IEP? Yes____ No____
8. Please list, if any, child behavior issues or concerns that we need to know about:

Statement of Cooperation

In making application for my child it is my desire to have him/her complete the 2011/2012 school year. It is also my understanding that the policy of the school is to make no refunds on registration fees. I also give permission for my child to take part in all school activities, including sports and school-sponsored trips away from the school premises, and absolve the school from liability to me or my child because of any injury to my child at school or during any school activity.

Child Name: _____

Parent Signature: _____ Date: _____

Grace Fellowship Academy

MISSION STATEMENT

To nurture students and to help develop their talents and spiritual gifts in order to live a life of service, impacting the world for Christ.

PHILOSOPHY

We, the Board of Directors, administration, and faculty of Grace Fellowship Academy believe the school to be an extension of the home and the Christian Church for the purpose of educating any student who has a desire to be educated in a Christian-oriented atmosphere and whose educational needs the school is prepared to meet. Grace Fellowship Academy's view of life is based upon the *Bible* as God's only infallible written revelation to man.

The student at Grace Fellowship Academy is taught to live a disciplined life under the Lordship of Jesus Christ. Discipline based on God's Word is prayer-fully administered in Christian love and firmness.

STATEMENT OF FAITH

We believe the Bible to be the only inspired, infallible, authoritative Word of God.

We believe that there is one God, eternally existent in three persons: Father, Son and Holy Spirit.

We believe in the deity of our Lord Jesus Christ, in His virgin birth, in His sinless life, in His miracles, in His vicarious and atoning death through His shed blood, in His bodily resurrection, in His ascension to the right hand of the Father, and in His personal return in power and glory.

We believe that repentance and rebirth of lost and sinful man, by the Holy Spirit, is essential for salvation.

We believe in the spiritual unity of believers in our Lord Jesus Christ.

PARENT'S (OR LEGAL GUARDIAN'S) STATEMENT:

I/we hereby certify that I/we have read and agree with the above Philosophy and Statement of Faith of Grace Fellowship Academy and do affirm that my/our beliefs are consistent with those stated.

Father's Signature _____ Date _____

Mother's Signature _____ Date _____

Guardian's Signature _____ Date _____

Grace Fellowship Academy

1300 North Miller Rd. Buckeye, Arizona 85326 Phone 623/393-8883 FAX 623/393-8389

Pastor / Church Leader Recommendation Form

Parents: Please have your Pastor/Church Leader complete this form, as part of your application.

Parent(s) Names _____

Student(s) Name(s) - first and last names

_____ Grade _____

_____ Grade _____

Dear Pastor,

Your name has been given as a reference, by the above, who are seeking to enroll their child(ren) at Grace Fellowship Academy. We would appreciate your cooperation in taking a few minutes to answer these questions.

1. How long have you known this family? _____

2. Are the parents members of your church? _____

3. Does the family attend worship services every Sunday? _____

4. Is the family active in church ministries? i.e. Bible Studies, Leadership, Sunday School, Youth Group, etc.

5. As far as you know, is the family's lifestyle consistent with belief in Jesus Christ as Lord and Savior? Please elaborate.

6. Other comments _____

Pastor's Church _____

Church Address _____

Pastor's name (please print) _____

Pastor's signature _____

Church Phone Number _____ Date _____

Since enrollment is restricted to children of Christian parents, the Grace Fellowship Academy Board reserves the right to make follow up inquiries regarding church attendance.

The completed form may be mailed or faxed to the respective school at the address below. Thank you for your time and cooperation.

Grace Fellowship Academy

Attn: Geri Parker, Principal

1300 N. Miller Road

Buckeye, AZ 85326

Phone: (623) 393-8883

Fax: 623-393-8389

principal@graceinbuckeye.com

Grace Fellowship Academy

1300 North Miller Rd. Buckeye, Arizona 85326 Phone 623/393-8883 FAX 623/393-8389

Principal / Counselor Recommendation Form

TO THE FAMILY:

Please complete this section and submit the form to your principal/counselor to complete and return directly to the school via mail or fax.

Student /Applicant Name _____

Family Name _____

Family Address _____

Telephone () _____ Email _____

II. DEAR PRINCIPAL/COUNSELOR:

As part of the application process at Grace Fellowship Academy,, we ask our parents to obtain their principal/counselor reference. We do this because we believe the Christian training of our students can be most effective when the home has the support systems of both the Christian day school and the church family and programs. By answering the following questions, you enable us to give direction to families seeking entrance into Grace Fellowship Academy. Therefore, please complete the following section and return the form in the envelope provided or via telefacsimile. Thank you for your assistance.

1. How long have you known applicant? _____ In what capacity? _____

2. Description of applicant (*circle all that are applicable*)

Behavior well-behaved, needs discipline, respects authority, does not respect authority
ambitious, over aggressive, retiring

Peer Influence very good, good, indifferent, bad, very bad

Attitude emotionally stable, emotionally erratic, optimistic, pessimistic, self-centered, considerate

Characteristics studious, athletic, social, musical, mechanical, artistic

Leadership leader, follower *If a leader, what evidence has been demonstrated?*

3. Has the applicant ever been suspended or dropped from school? ___ yes ___no If yes, explain:

4. How would you rate this applicant academically?

Above average average below average capable of better work

5. Have you known this applicant to use illegal drugs, tobacco, or alcohol? If so, please explain.

6. Would you recommend admitting this student to a Christian school?

___ yes ___no ___ with reservations

7. Please use back of form for any additional information, which you feel, might help us in our evaluation.

Printed Name/Signature/Position _____

Date _____

School _____ Address _____ Phone _____

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Teacher Recommendation Form

TO THE FAMILY:

Please complete this section and submit the form to your principal/counselor to complete and return directly to the school via mail or fax.

Student /Applicant Name _____

Family Name _____

Family Address _____

Telephone () _____ Email _____

II. DEAR TEACHER:

As part of the application process at Grace Fellowship Academy,, we ask our parents to obtain their teacher's reference. We do this because we believe the Christian training of our students can be most effective when the home has the support systems of both the Christian day school and the church family and programs. By answering the following questions, you enable us to give direction to families seeking entrance into Grace Fellowship Academy. Therefore, please complete the following section and return the form in the envelope provided or via telefacsimile. Thank you for your assistance.

1. How long have you known applicant? _____ In what capacity? _____

2. Description of applicant (*circle all that are applicable*)

Behavior well-behaved, needs discipline, respects authority, does not respect authority
ambitious, over aggressive, retiring

Peer Influence very good, good, indifferent, bad, very bad

Attitude emotionally stable, emotionally erratic, optimistic, pessimistic, self-centered, considerate

Characteristics studious, athletic, social, musical, mechanical, artistic

Leadership leader, follower *If a leader, what evidence has been demonstrated?*

3. Describe student's academic effort including following instructions, attentiveness, etc.

4. How would you rate this applicant academically?

Above average average below average capable of better work

5. Have you known this applicant to use illegal drugs, tobacco, or alcohol? If so, please explain.

6. Would you recommend admitting this student to a Christian school?

___ yes ___no ___ with reservations

7. Please use back of form for any additional information, which you feel, might help us in our evaluation.

Printed Name/Signature/Position _____

Date _____

School _____ Address _____ Phone _____

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Mother's Personal Testimony

Grace Fellowship Academy requires that at least one of the parents be a Christian and provide his/her testimony. The student's application is not complete without the parent testimony. Please answer the following questions.

- 1 What is a Christian and how does one become a Christian?
2. In what way are you actively involved in a local Bible believing church?
3. Write your own personal testimony telling when and how you received Christ as your personal Savior and His meaning in your life.

DRESS CODE POLICY

Students are expected to live and conduct themselves in a manner that is pleasing to God, glorifying to the name of Jesus Christ (11 Thess. 1:11-12). To accomplish these purposes, careful consideration has been given to factors such as comfort, safety, modesty, appropriateness, and ease of enforcement. The cooperation of students, parents, and teachers is necessary in maintaining the dress code. (It is especially important to be mindful of this when school clothes are purchased.)

Enforcing the dress code is NOT the sole responsibility of the school. We expect parents to cooperate in monitoring their student's daily attire to assure compliance with the dress code.

While on campus, students must be in dress code. The school administration reserves the right to make modifications to the dress code for special occasions such as field trips, spirit days, or other fun/reward situations.

Shorts/Pants/Capris: Solid color Khaki, Navy, or Black. Pants must be worn at the waist or hips. Clothing that exposes midriffs or underwear is not acceptable and may not be frayed or torn.

Shirts: Any solid color polo. Standard uniform dress shirts may also be worn. Shirts must be plain with no adornments.

Skirts/Skorts/Jumpers: Skirts, including slits, are to be no shorter than 3 inches above the knee cap. Girls are encouraged to wear shorts under jumpers and skirts for modesty. No dresses are allowed.

Outerwear: In order to maintain a safe environment during the cooler months, all jackets, sweaters, sweatshirts and vests must be worn with standard uniform. No adornments on outerwear.

Footwear: Tennis shoes, dress shoes, and sandals with a back strap are acceptable. Laces must be tied securely. No heels higher than 1 inch. No flip-flops, slippers, or shoes with wheels.

Personal Grooming: Hair is to be neat and clean. Extreme styles are to be avoided.

Hats/Caps/Beanies/Bandanas/Kerchiefs: May not be worn on campus during regular school hours.

Girls- No cosmetics are allowed (includes face glitter). Jewelry should be kept to a minimum (small post earrings only).

Boys- No earrings, chains or studded bracelets.

No Tattoos (permanent or temporary) are allowed.

Book bags, hats, notebooks, or other paraphernalia with inappropriate messages or pictures are not allowed.

Students are expected to be in compliance with the dress standards Monday through Friday each week.

***Each Friday students may wear jeans with a uniform shirt or they may choose to wear jeans with a GFA t-shirt. No frayed, embellished, or jeans with holes are allowed.**