

Employment Information:

Circle One: Father/Stepfather/Guardian

Circle One: Mother/Stepmother/Guardian

Employer _____

Bus. Phone _____

Bus. Address _____

Cell Phone _____

Name of non-custodial parent, if applicable _____

Address _____

Home Phone _____ E-mail _____

Other Children in Family

Name _____ M/F _____ Age _____ Grade _____ School _____

Name _____ M/F _____ Age _____ Grade _____ School _____

Name _____ M/F _____ Age _____ Grade _____ School _____

Name _____ M/F _____ Age _____ Grade _____ School _____

B. Information Concerning Grandparents (If deceased, please indicate)

Note: This information will be used to send newsletters and other correspondence to grandparents, as well as invitations to JCA Grandparents' Day and other school activities.

Paternal Grandfather _____ Phone _____

Address _____
Street City State Zip

E-mail _____

Paternal Grandmother _____ Phone _____

Address _____
Street City State Zip

E-mail _____

Maternal Grandfather _____ Phone _____

Address _____
Street City State Zip

E-mail _____

Maternal Grandmother _____ Phone _____

Address _____
Street City State Zip

E-mail _____

C. Church Information

Father or Guardian

Mother or Guardian

Church Name _____

Attendance Frequent _____ Infrequent _____

Frequent _____ Infrequent _____

Name of Pastor _____

Phone Number _____

Name of Children's/Youth Pastor if applicable _____

Phone _____

Length of time you family has been active at this church _____

List church activities in which your family participates _____

Please write a short statement of your Christian faith

Father or Guardian

Mother or Guardian

Have you and your family read JCA's Statement of Faith and do you agree with it? _____

If 'No' please explain _____

D. Academic Information

If you answer 'yes' to any question below, please give full particulars on a separate sheet of paper and attach.

Has your child...

Yes	No		Yes	No	
___	___	Repeated a grade in school?	___	___	Attended Speech Therapy classes
___	___	Attended summer school?	___	___	Attended Resource Class?
___	___	Had disciplinary difficulties in school?	___	___	Attended Gifted/Talented?
___	___	Had extended absences from school?	___	___	Been expelled from school?
___	___	Been tested for a learning difficulty?			

E. Health Information

Does the child have any physical challenges? Y/N ___ Explain _____

Has the child ever been arrested, taken illegal drugs, received treatment for substance abuse? Y/N _____
Explain _____

F. General Information

Please make a full statement as to why you want to enroll this student in Joshua Christian Academy.

How did you hear about Joshua Christian Academy? _____

Parent Commitment

1. We have read and are in agreement with the Joshua Christian Academy's philosophy of education, mission statement, and Student Handbook.
2. We, as parents, accept the challenge to "train up a child in the way he should be," Proverbs 22:6. We do state that this training will be carried on in the home and place our trust in JCA to extend that training.
3. We do hereby state that we have made a thorough investigation of the school's program, curriculum, behavior standards, dress code, etc., and we agree to make them our glad-hearted choice for the coming school year.
4. We agree to uphold and support the high academic standards of the school and to give our child encouragement in the completion of homework assignments.
5. We will faithfully support the school through our prayers and positive attitude; and in keeping with Matthew 18:15, we are committed to giving a good report by sharing any complaints and negative comments only with the people involved. Unresolved issues will be taken care of by using the school's chain-of-command.
6. We understand that the character and behavior standards of students of JCA do not tolerate profanity, obscenity in word or action, dishonor to the Holy Trinity or the Word of God, disrespect to the personnel of the school, or continued disobedience to the established policies of the school.
7. We believe that discipline is necessary for the benefit of each student as well as for the entire school, and we give permission to the teachers and administration to make and enforce school regulations in a manner consistent with Christian principles and discipline as set forth in the scriptures (Proverbs 13:24, 22:6, 29:15&17, Colossians 3:20, Hebrews 12:6)
8. We pledge that if, for any reason, our child does not respond favorably to the school, we will do everything in our power to cooperate with the school to help our child make the necessary adjustments.
9. We, as parents of the student applicant, do sincerely give our pledge to the above items and we understand that failure of the student to comply with the established regulations and behavior standards, a demonstrated lack of parental commitment, or failure to meet financial obligations will forfeit the student's privilege of attending. JCA accordingly reserves the right to terminate or not renew a student's enrollment if the administration reasonably concludes that the actions of a parent or guarding guardian make a positive and constructive relationship impossible or otherwise seriously interfere with the school's accomplishment of its educational and spiritual goals.
10. We agree that JCA will consider the enrolling family 1) Responsible for all financial obligations incurred by the student(s) 2) the authorized recipient of all school notices.

11. We understand that JCA is a faith driven school which seeks to teach students from Christian homes; therefore, at least one parent must have a credible profession of Christian faith and be actively participating in a local church which will be verified through a Pastoral Reference form each year

Your signature indicates that the information in the enrollment application is correct and that you have read the Mission Statement, Statement of Faith, and Student Handbook. Your signature also indicates that you are in agreement with the stated philosophy and guidelines. You are also indicating that you are under no financial obligation to any former school so that records may be released to JCA.

Signed: Mr. _____ Date _____
Mrs. _____ Date _____

Your signature indicates that you reviewed the Financial Information located in the Student Handbook and are in agreement to its terms.

Signed: Mr. _____ Date _____
Mrs. _____ Date _____

Your signature indicates authorization for JCA to take photograph during school hours and functions for use in the yearbook, bulletin boards, and advertising as needed.

Signed: Mr. _____ Date _____
Mrs. _____ Date _____

Joshua Christian Academy admits students of any race, color, national and ethnic origin to all their rights, privileges, programs, and activities generally made available to students at the school. JCA does not discriminate on the basis of race, color, national or ethnic origin in the administration of its student financial assistance, educational or athletic programs, and other school-administered programs.

Joshua Christian Academy
PO Box 1379
510 N. Broadway
Joshua, TX 76058
817-295-7377 Fax 817-484-2415

Teacher/Administrator Recommendation Form
(To be completed by student's previous teacher or administrator)

Student's Last Name First Middle

Present School Grade

School Address City State Zip

Parent or Guardian: Please read and sign the following statement before forwarding this form to your child's previous teacher or administrator. If, for any reason you would prefer us not to contact a previous teacher or administrator, please explain the reasons hers and return to JCA.

If you have no objection to contacting a previous teacher, please sign the statement below:

"I understand the information supplied by previous teachers or administrators will be used only in the selection of applications to Joshua Christian Academy. I also understand the completed form will not be made available to me or to anyone outside of Joshua Christian Academy."

Parent of Guardian

Teacher of Administrator you want to use as a reference:

School Name _____

TO THE TEACHER: This form is used by the administration of Joshua Christian Academy to help in decisions regarding admission to JCA. Please mail to PO Box 1379 Joshua, TX 76058 or Fax to 817-484-2415

DIRECTIONS: Please give us your assessment of the student in each of the following areas:

Academic Ability	5	4	3	2	1
Study Skills	5	4	3	2	1
Desire to Learn	5	4	3	2	1
Classroom Behavior	5	4	3	2	1
Accepts Responsibility	5	4	3	2	1
Controls Feelings	5	4	3	2	1
Respectful of Others	5	4	3	2	1
Cooperates with Others	5	4	3	2	1
Self-Confidence	5	4	3	2	1
Completes Tasks	5	4	3	2	1
Practices Good Character	5	4	3	2	1
Overall, would you recommend this student for enrolment?	5	4	3	2	1

Comments _____

Teacher/Administrator Signature

Title

JOSHUA CHRISTIAN ACADEMY
2009-2010 RELEASE FORM

STUDENTS NAME: _____

I hereby grant permission for my child to use all of the play equipment and participate in all of the activities at Joshua Christian Academy.

I hereby grant permission for my child to attend fieldtrips planned throughout the school year as a motivational and educational supplement to the curriculum. (Parents will be informed of dates, times, destinations and purposes of all field trips.)

I hereby grant permission for my child to be included in evaluations, pictures and videos connected with the school program.

I hereby grant permission for the Administrator to take whatever steps necessary to obtain emergency medical care if warranted. These steps may include, but are not limited to, the following:

1. Attempt to contact a parent or guardian.
2. Attempt to contact the child's physician.
3. Attempt to contact the parents through any of the persons listed on the emergency information form provided by parents at registration).
4. If we cannot contact parents or child's physician, the following actions will be takes:
 - a. Call another physician or paramedics;
 - b. Call an ambulance;
 - c. Have the child taken to an emergency hospital in the company of a staff member.
5. Any expenses incurred under item 4 will be the responsibility of the child's family.
6. The school will not be responsible for anything that may happen as a result of false information or lack of information given at the time of enrollment.
7. The school will not assume responsibility for a child who has not been officially received or has been dismissed for the day.
- 8.

EMERGENCY CONTACTS

Parent/Guardian _____ Home Phone _____

Work Phone _____ Cell Phone _____

Emergency Contact #1 Name _____

Relationship _____ Phone _____

Emergency Contact #2 Name _____

Relationship _____ Phone _____

Parent/Legal Guardian Signature _____ Date _____

HEALTH INFORMATION

Primary Physician _____

Address _____

Phone _____ Hospital Preference _____

Does the child regularly take any prescription medicine? YES NO

Explain _____

Does the child have any allergies? YES NO

Explain _____

Does the child have any health problems? YES NO

Explain _____

JOSHUA CHRISTIAN ACADEMY
MEDICATION ADMINISTRATION RELEASE FORM

I hereby grant Joshua Christian Academy staff permission to administer non-aspirin pain reliever to my child in case of pain. I understand that I will be notified prior to the medication being administered.

I hereby grant JCA staff permission to administer medication brought from home. The medication must be accompanied with a note from the parent of the child's physician stating the dosage information, the time that the medication is to be administered, and any other pertinent information. All medications must be turned in to the school office at the beginning of the school day and will be held in the office.

Child's Name _____

Special Instructions _____

Parent/Guardian Signature _____

Date _____

JOSHUA CHRISTIAN ACADEMY
CHILD PICK-UP RELEASE FORM

I hereby grant JCA to release my child to the following people:

Child's Name _____

Names _____

Parent/Guardian Signature _____

Date _____

NOTE: It is your responsibility to notify the office if this list changes.

Joshua Christian Academy
PO Box 1379
Joshua, TX 76058
817-295-7377 FAX 817-484-2415

Pastoral Reference

To be completed by Pastor

Family Name _____ School Year _____
Student(s): _____ Grade _____
_____ Grade _____
_____ Grade _____
_____ Grade _____

This family has applied for their child(ren)'s admission to JCA. We would appreciate the following information about this student and family. Your prompt attention is appreciated. Please mail to PO Box 1379 Joshua, TX 76058 or Fax to 817-484-2415. Thank you.

Family church Attendance:

Father: _____ Weekly _____ 1-3 times/month _____ Less than 1 time/month
Mother: _____ Weekly _____ 1-3 times/month _____ Less than 1 time/month
Student(s): _____ Weekly _____ 1-3 times/month _____ Less than 1 time/month

To the best of your knowledge has the student(s) professed faith in Christ?

_____ Yes _____ No _____ Unsure

Comment _____

Which best describes the student(s) relationship with their parents? (Obedient, loving, etc.)

_____ Excellent, seldom any problems _____ Occasional problems
_____ Many problems _____ Unknown

Comment _____

Which best describes the student(s) choice of friends?

_____ Supportive, Christian friends _____ Some friends not helpful
_____ Unselective, troublesome _____ Unknown

Comment _____

Which best describes the student(s) behavior? (Moral, language, amusements, etc.)

_____ None or few problems _____ Occasional problems
_____ Serious problems _____ Unknown

Comment _____

How would you best describe student(s) Christian character?

_____ Strong and positive _____ Poor
_____ Average and growing _____ Unknown
_____ Sometimes questionable

Comment _____

DOCTRINAL POSITION

Joshua Christian Academy adheres to the doctrinal position of Joshua Baptist Church and all religious instruction falls within the teaching of the Church. Our primary goal at Joshua Christian Academy is to train young people to better serve and experience the love of the Lord Jesus Christ.

We believe in and teach these basic principles:

The Bible to be the inspired, infallible, authoritative, inherent Word of God. (II Timothy 3:15, II Peter 1:21)

We believe there is only one God, eternally existent in three persons-Father, Son and Holy Spirit. (Genesis 1:1, Matthew 28:19, John 10:30)We believe in the deity of Christ (John 10:33); His virgin birth (Isaiah 7:14, Matthew 1:23, Luke 1:35); His sinless life (Hebrews 4:14, 7:26); His miracles (John 2:11); His vicarious and atoning death (I Corinthians 15:3, Ephesians 1:7, Hebrews 2:9); His resurrection (John 11:25, I Corinthians 15:4); His ascension to the right hand of the Father (Mark 16:19); His personal return in power and glory (Acts 1:11, Revelation 19:11).

We believe in the absolute necessity of regeneration by the Holy Spirit for salvation because of the exceeding sinfulness of human nature; that men are justified on the single ground of faith in the shed blood of Christ; and that only by God’s grace and through faith alone we are saved (John 3:16-19, 5:24, Romans 3:23, 5; 8-9; Ephesians 2:8-10, Titus 3:5).

We believe in the resurrection of both the saved and the lost; they that are saved unto the resurrection of life, and they that are lost unto the resurrection of damnation (John 5:28-29).

We believe in the spiritual unity of true Biblical believers in our Lord Jesus Christ (I Corinthians 12:12-13).

We believe in the present ministry of the Holy Spirit by whose indwelling the Christian is enabled to live a godly life (Romans 8:13-14, I Corinthians 3:16, 6:19-20, Ephesians 4:30, 5:18).

MISSION STATEMENT

Joshua Christian Academy exists to impact the lives of this generation of young people. Our goals for every student are:

- To know the love of Jesus Christ through example and teaching; to learn the importance of showing this love to others.
- To acquire a lifestyle of Christian character, morality, respect, and responsibility.
- To participate in acquiring the finest education attainable in a school whose expectations are constantly being increased.
- To be provided with a variety of co-curricular opportunities conducted in an atmosphere and with attitudes and behavior that exalt Jesus Christ.
- To find daily at JCA an atmosphere of love, joy, righteousness, and respect.

If you wish to comment further regarding this family, please use the space below or feel free to contact the Administrator, Mary Zornes, at 817-295-7377 or mary@joshuabaptist.com.

Signature/Position

Date

Church