

152 Rolling Hills Avenue · Canton, Georgia 30114
770.479.9535

New Student Application

INTE: Dlease carefully road		to school year for			de \$100 per stude
NOTE : Please carefully read and complete this application in its entirety and return it to the school with the non-refundable \$100 per stude application fee. If current transcripts are available, please forward them to the school with the application.					
tudent Information					
Last Name	First Name	Middle Name	1	Name Called	
Street	City	State	Zip Code	County	
Home Phone	Student Cell Phone	Student (7 th -8 th grades) Email A	ddress		
Gender (Male or Female)	Date of Birth	Age on September 1 st			
Name of Present or Last Schoo	ol Attended				
Street	City	State	Zip Code	County	
or Other Pacific Island	er // Non-Hispanic / Latino	slack or African American // C	aucasian // Hi	spanic or Latino /	/ Native Hawaiia
or Other Pacific Island	er // Non-Hispanic / Latino	lack or African American // C	aucasian // Hi	spanic or Latino /	/ Native Hawaiia
or Other Pacific Island not listed, please describe urrent Grade Level (please	er // Non-Hispanic / Latino in the box below:	2 nd 3 rd 4 th 5 th 6 th	aucasian // Hi	spanic or Latino /	/ Native Hawaiia
or Other Pacific Island not listed, please describe urrent Grade Level (please oes your student have an as your student been diag	er // Non-Hispanic / Latino in the box below: circle): K4 K5 1st Individual Education Plan (IEP)	2 nd 3 rd 4 th 5 th 6 th	7 th 8 th		/ Native Hawaiia
or Other Pacific Island not listed, please describe current Grade Level (please	er // Non-Hispanic / Latino in the box below: circle): K4 K5 1st Individual Education Plan (IEP)	2 nd 3 rd 4 th 5 th 6 th ? NO YES	7 th 8 th		/ Native Hawaiia
or Other Pacific Island not listed, please describe urrent Grade Level (please noes your student have an las your student been diag yes, please explain.	er // Non-Hispanic / Latino in the box below: e circle): K4 K5 1st Individual Education Plan (IEP) nosed with a condition such as	2 nd 3 rd 4 th 5 th 6 th ? NO YES autism, Asperger's, dyslexia, A	7 th 8 th		/ Native Hawaiia
or Other Pacific Island not listed, please describe urrent Grade Level (please loes your student have an las your student been diag lyes, please explain.	er // Non-Hispanic / Latino in the box below: e circle): K4 K5 1st Individual Education Plan (IEP) nosed with a condition such as	2 nd 3 rd 4 th 5 th 6 th ? NO YES	7 th 8 th		/ Native Hawaiia
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available to students at the school. It does not discriminate upon the basis of race, sex, or national origin, but upon the student's intellectual, moral, and personal

FEE RECEIVED:

FOR OFFICE USE ONLY

INTERVIEW DATE:

qualifications in administration of its educational policies, scholarship, athletic, and other school administered programs.

DATE RECEIVED:

Student Name:	
Family Information	
Father	Mother
Name:	Name:
Employer:	Employer:
Work Phone:	Work Phone:
Home Phone:	Home Phone:
Cell Phone:	Cell Phone:
Email:	Email:
Church:	Church:
Church Phone:	Church Phone:
Pastor:	Pastor:
Do you regularly attend church?	Do you regularly attend church?
Are you a church member?	Are you a church member?
Stepmother's Full Name:	Stepfather's Full Name:
Person(s) responsible for paying tuition:	
Please list the names and ages of other children in the family:	
Name Age Name Age	Name Age Name Age
How did you learn about or become interested in CCS?	
friend or family website billboard other (please describe):	
Please share why you want your children to attend CCS.	

Signature of person completing this application

Relationship to student



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Statement of Cooperation

Community Christian Cohool and the narroute / avardians	of its students. It is to be read therewally signed	L .
		

Important: This contract is between Community Christian School and the parents / guardians of its students. It is to be read thoroughly, signed by the parents / guardians, and returned to the school.

I / We understand that:

- (1) The non-refundable application fee of one hundred dollars (\$100) per student, is to be paid before my child is considered for admission;
- (2) The tuition is due on the first day of each month;
- (3) No discounts are given due to absences;
- (4) The full school year's tuition is payable unless the family is transferred out-of-town;

Student's Name:

- (5) Community Christian School has the right to dismiss any student who fails to cooperate with the educational program or whose attitude and cooperation does not comply with the spirit of the school;
- (6) The school may discipline* students when deemed necessary by the administration and/or faculty;
- (7) All applications are subject to the approval of the Board of Directors;
- (8) A personal interview with parent and child will be conducted before admission is granted;
- (9) A health record including immunization and any known illnesses or disabilities must be submitted to the school;
- (10) The doctrinal convictions of Community Christian School are expressed in the Statement of Faith (below). By signing this document I am in agreement with their content.

Agreement

I agree to allow my child to participate in all school activities (on and off campus) and agree to absolve the school from liability to me or my child because of injury to my child at school or during any school activity.

I agree to pay all costs incurred by Community Christian School or its personnel in the event that legal action is brought against Community Christian School or its personnel on behalf of me or my child if Community Christian School or its personnel is found not guilty.

I will properly address any questions and concerns directly to the administration of the school in a prompt manner.

Signature of Parent / Guardian	Date
Signature of Parent / Guardian	Date

^{*}CCS does not administer any means of corporal punishment.

Statement of Faith

- 1. **We believe** the Bible to be the inspired, only infallible, authoritative, inerrant Word of God (2 Timothy 3:16: 2 Peter 1:21; John 10:30).
- 2. **We believe** that there is one God, eternally existent in three Persons: Father, Son, and Holy Spirit. He is omnipotent; that is, He can do all things. He is omnipresent; that is, He is present to all creation and has under His immediate authority all things which are in Heaven, in the earth, and under the earth. He is omniscient; that is, He knows all things. He readily exercises His power which is present everywhere, and to Him, there is nothing that is impossible or unknown, that is, He knows what has been from eternity, what now takes place everywhere, and what will be to all eternity (Genesis 1:1; Matthew 28:19; John 10:30).
- 3. **We believe** in the deity of Christ, His virgin birth, His sinless life, His miracles, His vicarious and atoning death through His shed blood, His bodily resurrection, His ascension to the right hand of the Father, and His personal return in power and glory (Isaiah 7:14; Matthew 1:23; Mark 16:19; Luke 1:35; John 2:11, 10:33, 11:25; Acts 1:11; I Corinthians 15:3-4; Ephesians 1:7; Hebrews 2:9, 4:15, 7:26; Revelation 19:11).
- 4. **We believe** in the absolute necessity of regeneration by the Holy Spirit for salvation because of the exceeding sinfulness of human nature; men are justified by the shed blood of Christ; and we are saved by God's grace through faith alone (John 3:16-21, 5:24; Romans 3:23, 5:8-9; Ephesians 2:8-10, Titus 3:5).
- 5. **We believe** in the resurrection of both the saved and the lost; the saved unto the resurrection of life, and the lost to the resurrection of damnation (John 5:28-29).
- 6. We believe in the spiritual unity of all believers in our Lord Jesus Christ (Romans 8:9; I Corinthians 12:12-13; Galatians 3:26-28).
- 7. **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).
- 8. **We believe** that all human life is sacred and created by God in His image. Human life is of inestimable worth in all its dimensions, including pre-born babies, the aged, the physically or mentally challenged, and every other stage or condition from conception through natural death. We are therefore called to defend, protect, and value all human life. (Job 12:10; Psalm 139; Isaiah 49:5; Jeremiah 1:5; Ephesians 2:10.).
- 9. We believe that every believer should strive to walk by the Spirit and engage in a lifestyle that stimulates a Christ-centered maturation in their lives as well as the lives of those around them. Christians should strive to both identify and flee from influences and practices which hinder an individual from maturing in their relationship with Christ. The Bible warns that immorality of any type, including but not limited to sexual immorality in any form, idolatry, theft, greed, and drunkenness may disqualify us from inheriting the kingdom of God. Moreover, all believers are to engage in gospel conversations, to live Christ-honoring lives, and to work continuously towards the spread of the gospel to all nations (Matthew 5:16, 28:19-20; Mark 16:15; John 20:21; Acts 1:8; Romans 6:1-14, 12:1-2; 1 Corinthians 6:9-20; 2 Corinthians 5:20, 6:14-7:1; Galatians 5:16-25; Colossians 3:1-17; James 4:4; 1 John 2:15-17).

Final Authority for Matters of Belief and Conduct

This statement of faith does not exhaust the extent of our beliefs. The Bible itself, as the inspired and infallible Word of God that speaks with final authority concerning truth, morality, and the proper conduct of mankind, is the sole and final source of all that we believe. For purposes of Community Christian School's faith, doctrine, practice, policy, and discipline, our board of directors and administrative faculty are our final interpretive authority on the Bible's meaning and application.

Mission Statement

The mission of Community Christian School is to glorify God by partnering with Christian families to provide an academically excellent education that approaches every discipline from a Christ-centered, biblical worldview.

Vision Statement

The vision of Community Christian School is to be an instrument in the intellectual, physical, social, and spiritual growth of each student.



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Emergency Information

Important: In order of priority, please list the contact information of the persons you would like for the school to contact in the event a parent / guardian cannot be reached in the event of an emergency or illness. This list will also be used if your child has not been picked up from school on time.

Student's Name:	Cell Phone:		
Father / Guardian's Cell Phone:	Mother / Guardian's Cell Phone:		
FIRST EMERGENCY CONTACT			
Name:	Relationship to Student:		
Address:			
Home Phone:	Cell Phone:		
SECOND EMERGENCY CONTACT			
Name:	Relationship to Student:		
Address:			
Home Phone:	Cell Phone:		
THIRD EMERGENCY CONTACT			
Name:	Relationship to Student:		
Address:			
Home Phone:	Cell Phone:		
FOURTH EMERGENCY CONTACT			
Name:	Relationship to Student:		
Address:			
Home Phone:	Cell Phone:		
Paternal Grandparents			
Name:	Phone:		
Address:			
Maternal Grandparents			
Name:	Phone:		
Address:			



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Student Health Statement

Student's Name:_____

Important: Please notify the school of any changes to this information during the course of the school year.					
Current	Health Status:				
(1)	Does the student have any chronic health problems?	YES	NO		
	If yes, please describe:				
(2)	Does the student use any medication on a regular basis?	YES	NO		
	If yes, please describe:				
(3)	Does the student have: (Circle all that apply)				
	Asthma // Hay Fever // Diabetes // Migraines // Allergies // Heart Problems // Seizures // Hypoglycemia				
(4)	Does the student have any physical limitations?	YES	NO		
	If yes, please describe:				
(5)	Does the student have difficulty hearing?	YES	NO		
	If yes, please describe:				
(6)	Does the student have difficulty seeing?	YES	NO		
	If yes, please describe:				
Consent					
I hereby give consent to Community Christian School to obtain medical attention for my child in the event of an emergency.					
I hereby give consent for my child to attend school sponsored field trips.					
	Signature of Parent / Guardian Date				
	Circusture of Derect / Counding				
	Signature of Parent / Guardian Date				



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Authorization to Release Educational Records

To the Applicant:

Please complete the authorization below and deliver this form to your guidance counselor or principal.				
Last Name	First Name	Middle Name	Current Grade Level	
In accordance with federal regulations regarding the privacy rights of parents and students under The Family Educational and Privacy Act of 1974, the undersigned hereby consent to the release to Community Christian School of all educational records about the above-named individual who is applying to Community Christian School, including such other information that may be requested.				
Signature of Parent	: / Guardian	Date		
Signature of Parent	: / Guardian	Date		
To the Principal, Guidance C	ounselor, or Registrar	;		
The student named above has made application for admission to Community Christian School. We would appreciate the prompt submission of the documents checked below to our office:				
A transcript of the studer	nt's record to date, inc	luding grades for courses in prog	gress;	
A copy of the student's complete test profile;				
All health records, including immunizations, vision and hearing tests;				
A copy of all psychological reports;				
A copy of the student's Individual Education Plan (IEP);				
A copy of special education placement forms;				
A copy of any discipline re	ecords.			
If this student is admitted to Community Christian School, at the termination of this school year we shall request a final transcript of the student's record. Please hold this authorization form on file so that a second form will not be necessary at that time.				

This information should be mailed to:

or emailed to:

COMMUNITY CHRISTIAN SCHOOL 152 ROLLING HILLS AVENUE CANTON, GA 30114 Sharon Robertson, Administrative Assistant Office@ccscanton.org