



Official Registration Packet 2017-2018

Southwest Christian
Academy

7400 Eldridge Road
Houston, Texas 77083

www.swcademy.com

Phone: 281 561 7400
Fax: 281 561 9823

Southwest Christian Academy bases its educational philosophy on the fact that the Bible, and only the Bible, is the inspired Word of God.

As a Christian school, we partner with parents to help their children attain academic, spiritual, and physical excellence by using a curriculum that teaches lessons through a Biblical system of values and providing a faculty of dedicated Christian instructors.

We invite you to partner with us in the education of your child.

Train up a child in the way he should go, and when he is old, he will not depart from it. Proverbs 22:6



Admissions Application 2017-2018

This application provides information that we need to properly register your child. Each question should be answered completely. All applications must be typed using this fillable pdf form. After completion, print the typed application, sign, and return the completed application to the school with your registration fee. All parents must include copies of the following with your application: your child's birth certificate, social security card, and documentation of any learning disabilities or health restrictions.

Student Legal Name: _____ Grade to Enter: _____
Last First Middle

Prefers the Name: _____ Social Security No: _____ - _____ - _____ Age: _____ Gender: _____

Date of Birth: _____ - _____ - _____ Place Of Birth: _____
City State

Address: _____ City: _____ State: _____ Zip: _____

Subdivision: _____ School District: _____

Home E-mail Address: _____ Home Phone: _____

Student Resides with: Mother / Father Mother Only Mother / Stepfather
 Guardian(s) Father Only Father / Stepmother Other: _____

Father's Name: _____ Office Phone: _____ Cell: _____

Father's Employer: _____ Office E-mail Address: _____

Mother's Name: _____ Office Phone: _____ Cell: _____

Mother's Employer: _____ Office E-mail Address: _____

Stepparent's Name: _____ Office Phone: _____ Cell: _____

Stepparent's Employer: _____ Office E-mail Address: _____

If Parents Are Divorced or Separated, Which Parent Has Legal Responsibility For:

School Related Decisions: _____ School Fees: _____ Receiving Communications: _____

Names and Ages of Other Children in Family: _____

What Language Other Than English, if any, Is Spoken in the Home? _____ Siblings attending SWCA?: _____

Church You Attend: _____ Both Parents Support Christian Education? _____

Religious Preference of Father: _____ Mother: _____

Reason for Selecting this School: _____ Last School Attended: _____

Has Student Ever Been Retained? _____ What Grade and Why? _____

Has Student Ever Been Suspended or Expelled? _____ On Probation? _____ Comments: _____

Student Grades Have Been: Above Average Average Below Average Failed

Does Student Have Learning Disabilities? _____ Has Student Been Tested? _____ When? _____

Test Results: _____ Comments: _____

| |
|---|
| Full Name of Student: _____ Last Name of Parent: _____ |
|---|

EMERGENCY AUTHORIZATIONS

Names of Persons to Contact in Case of Emergency (Other Than Parents):

| | | |
|------|--------------|-------|
| Name | Relationship | Phone |
| Name | Relationship | Phone |
| Name | Relationship | Phone |

Name of Physician: _____ Phone: _____

Any Illnesses, Allergies or Handicaps? _____ Any Emotional or Mental Conditions?: _____

Any Medication Requirements?: _____ Identify: _____

AUTHORIZATIONS TO PICK UP YOUR CHILD

Names of Persons Authorized to Pick Up Student (Other Than Parents):

| | | |
|------|--------------|-------|
| Name | Relationship | Phone |
| Name | Relationship | Phone |
| Name | Relationship | Phone |

ACKNOWLEDGMENT

I Hereby Acknowledge and Affirm That All of the Information Contained in this Registration is True and Accurate. I affirm my faith exclusively in one Lord, Jesus Christ, the only son of God, the Father Almighty, through whom salvation is secure. Further, I Acknowledge My Responsibility to Read, Understand, and Support All Policies, Beliefs, and Procedures as Written in this Admissions Application and in the Southwest Christian Handbook, available on Parent Night prior to the start of school.

| | | |
|---------------------|---------------------|------|
| Signature of Father | Signature of Mother | Date |
|---------------------|---------------------|------|

OFFICE USE ONLY

- | | |
|--|---|
| Enrollment <input type="checkbox"/> Admissions Application <input type="checkbox"/> Registration Fee <input type="checkbox"/> Health Record and Emergency Care <input type="checkbox"/> Statement of Understanding | New Enrollment <input type="checkbox"/> Copy of birth certificate <input type="checkbox"/> Copy of social security card <input type="checkbox"/> Request for Records |
|--|---|

SOUTHWEST CHRISTIAN ACADEMY ADMISSIONS POLICY

SPIRITUAL

Southwest Christian Academy is a Christian school whose outreach is to families who are committed personally and exclusively to Christ, Christian values and to the Word of God as our source for truth.

EDUCATIONAL

Southwest Christian Academy does not administer entrance exams. Evaluation for entrance and grade placement is based on parent interview, student interview, and previous school records. Falsifying information is considered a serious offense and can result in possible dismissal of the student or subsequent required testing and evaluation of the student. The parents and the school must make an honest evaluation of the student to assure optimal learning in the classroom. The foundational skills required in the early grades (K-3), are essential before moving to the more independent skills expected from grade 4 and up. Parents must be willing to support their children with necessary individual help in evening studies, and/or private tutoring when deemed necessary. Southwest Christian Academy does not consider the repeating of a grade to be a failure on the part of the student. It is our policy to retain a student only once at the elementary level. Students who are two years behind may need an alternate program with special services to address learning needs.

BEHAVIORAL

All students are expected to comply with behavioral guidelines. Students in grades 6-12 are asked to personally sign a Statement of Cooperation. In addition to the expected parental support, we expect our Middle and High School students to accept accountability for their own conduct. Students must be willing to align themselves with our philosophy of education and promote the standards deemed characteristic of our school.

SUPPORT

Attending Southwest Christian Academy is a privilege and not a right. This privilege is conditioned upon all family members showing support toward the administration and faculty of the school.

ADMISSION

All students must qualify for entry each year, whether seeking admission for the first time or re-admission for an upcoming year. Southwest Christian Academy admits students of any race, color, national and ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to all students at the Academy. We do not discriminate on the basis of race, color, national or ethnic origin in the administration of our educational policies, admissions policies, and all athletic and other school-administered programs.

**SOUTHWEST CHRISTIAN ACADEMY
COST SUMMARY
ACADEMIC YEAR 2017-2018**

REGISTRATION FEE

This fee includes: Registration Fee and Student Accident Insurance premiums.
Payable at time of enrollment for each student.

| | |
|--|-----------|
| Re-enrollment Fee K-12, before March 1 | \$ 195.00 |
| Enrollment Fee K-12 | \$ 295.00 |

BOOKS

Book fees are a one-time fee. Payable on June 1.

| | |
|---------------------------------|-----------|
| Books-Grades K | \$ 575.00 |
| Books-Grades 1-5 | \$ 615.00 |
| Books-Grades 6-8 | \$ 685.00 |
| Books and Lab Fees-Grades 9-10 | \$ 705.00 |
| Books and Lab Fees-Grades 11-12 | \$ 725.00 |

TUITION

Tuition is payable in 11 monthly installments. Tuition is due on the first day of each month, beginning July 1 and ending with the final installment on May 1. A \$25 discount is allowed on tuition for each additional child within the same family.

| | |
|----------------------|-----------|
| Tuition-Grades K | \$ 575.00 |
| Tuition-Grades 1-5 | \$ 615.00 |
| Tuition-Grades 6-8 | \$ 685.00 |
| Tuition-Grades 9-10 | \$ 705.00 |
| Tuition-Grades 11-12 | \$ 725.00 |

All fees are non-refundable and non-transferable. Withdrawals shall forfeit all fees and books. A \$ 10 per month fee is due on all late payments and a \$ 25 fee is due on all returned checks.

**SOUTHWEST CHRISTIAN ACADEMY
MEDICAL INFORMATION
ACADEMIC YEAR 2017-2018**

AUTHORIZATION FOR EMERGENCY MEDICAL CARE

In the event of an emergency, I hereby authorize Southwest Christian Academy and its representatives to administer first aid in the best interests of my child whose name is _____ and whose birthdate is _____.

Further, in an emergency, I authorize Southwest Christian Academy and its representatives to transport my child to the nearest doctor or hospital and I give my consent for any and all necessary emergency medical care and treatment while my child is in the custody of SOUTHWEST CHRISTIAN ACADEMY, and agree to be financially responsible for such care and treatment.

PHYSICAL STATUS

List any physical problems or disabilities: _____
List any allergies or allergic reactions to medicine: _____
List any medication requirements and dosage: _____
Please list side effects of any medication requirements: _____
Does your child run temperature easily? _____ May your child take Tylenol? _____
Is your child subject to high temperature? _____ Subject to convulsions? _____
List the date of your child's last tetanus booster: _____

EMERGENCY CONTACTS AND SIGNATURES

Parent Names: _____

Home Address: _____ Phone: _____

Father Employer : _____ Phone: _____

Mother Employer: _____ Phone: _____

Other Contact: _____ Relationship: _____ Phone: _____

Name of Your Doctor: _____ Phone: _____

Personal Insurance Company: _____ Policy No. _____

FATHER SIGNATURE: _____ **Date:** _____

MOTHER SIGNATURE: _____ **Date:** _____

BOTH PARENTS MUST SIGN THIS FORM

**SOUTHWEST CHRISTIAN ACADEMY
STUDENT HEALTH RECORD
ACADEMIC YEAR 2017-2018**

NEW STUDENTS: This form must be fully completed and signed by your physician in order to comply with state requirements.

FORMER STUDENTS: You must provide an update on immunizations only.

Student Name: _____ Birthdate: _____

Parent Names: _____
Father Mother

Address: _____
Street City State Zip

IMMUNIZATION RECORD

| | | | |
|------------|-------|---------------|-------|
| MMR: | _____ | DTP: | _____ |
| Measles: | _____ | Diphtheria: | _____ |
| Mumps: | _____ | Tetanus: | _____ |
| Rubella: | _____ | Pertussis: | _____ |
| Polio: | _____ | Hepatitis A: | _____ |
| Varicella: | _____ | Hepatitis B: | _____ |
| | | Meningococcal | _____ |
| TB Tests: | _____ | Results: | _____ |
| Allergies: | _____ | | |
| Other: | _____ | | |

This is to certify that the above-named student is free of communicable disease and able to participate in school activities. Please state if you recommend any modification in school routine for this student, or if you find any evidence of allergies, such as eczema or allergic rhinitis.

Physician Recommendations: _____

Physician Name and Address:

Physician Signature:

Date: _____
Phone: _____

**SOUTHWEST CHRISTIAN ACADEMY
STATEMENT OF UNDERSTANDING
ACADEMIC YEAR 2017-2018**

PARENTAL AGREEMENT

- ▶ Attendance of all parents at our Parent Night Orientation is strongly encouraged. New parents must attend. This is necessary for your orientation to our campus, teachers, classrooms, and curriculum. Additionally, you will become familiar with our Christian philosophy of operation and meet many new Christian families.
- ▶ It is understood that sending your children to Southwest Christian Academy is a privilege and not a right. This privilege is conditioned upon parental support of the Academy, the staff, and all policies of operation. Our goal is to disciple students in a relationship with Christ to reflect character traits in keeping with Biblical teachings.
- ▶ Tuition payments are due by the first of each month. A \$ 10 per month fee is due on all late payments and a \$ 25 fee is due on all returned checks. There are no refunds on any fee and all fees are non-transferable.
- ▶ Your submission of registration forms and payment of a registration fee shall be deemed as your acceptance of a binding contract with Southwest Christian Academy. Our school agrees to hold and reserve a position exclusively for your child and you agree that if you should withdraw from the school at any time after registration, you remain fully liable for all book and tuition fees for the school year. Withdrawals shall forfeit all books. Because we are a private school, we depend on consistent tuition payments in our planning.
- ▶ It is understood that all parents shall read and support the policies in the Southwest Christian Academy Handbook.

Signature of Father

Signature of Mother

**MIDDLE AND HIGH SCHOOL STUDENT AGREEMENT
ALL STUDENTS IN GRADES 6 12 MUST SIGN THIS FORM**

I understand that Southwest Christian Academy recognizes me, a Middle or High School student, as having reached a milestone in my maturity and accountability. Therefore, by my signature, I agree to:

- ▶ Uphold the Christian standards and policies which set my school apart from secular philosophies.
- ▶ Read the Academy Handbook in order to be familiar with school standards and policies, including courtesy, kindness, morality, honesty, integrity, and dress code.
- ▶ Treat my fellow students with respect and consideration, promote unity, and refrain from indecent language, cheating, stealing, drugs, violence, or immoral behavior.
- ▶ Honor my teachers with the respect due them in their place of authority.
- ▶ Cooperate fully and cheerfully with the administration, and work in harmony with the decisions that are handed down to me, the student.

Student Signature: _____ Grade: _____



SOUTHWEST CHRISTIAN ACADEMY

7400 Eldridge Rd
Houston, Texas 77083-3442
(281) 561-7400
Email: info@swcacademy.com
Fax: (281) 561-9823

TO THE REGISTRAR OF:

School Name: _____

Address: _____

City, State, Zip: _____

Date: _____

Phone: _____

**NOTE TO PARENTS:
PLEASE PROVIDE THE NAME,
ADDRESS, AND PHONE NUMBER OF
THE SCHOOL HOLDING YOUR CHILD'S
RECORDS. ENTER YOUR CHILD'S FULL
LEGAL NAME ON THE FIRST LINE OF
THE LETTER. BE SURE TO SIGN YOUR
NAME AT THE BOTTOM.**

A student, whose name is _____, is a
former student at your school and has applied for admission to:

SOUTHWEST CHRISTIAN ACADEMY

Please send the results of their standardized tests, scholastic evaluations,
attendance records, health records, report cards, transcripts, discipline records,
and any analysis concerning emotional and social development.

Thank you for forwarding these records as soon as possible.

Sincerely,

ADMISSIONS
SOUTHWEST CHRISTIAN ACADEMY
Email: info@swcacademy.com
Fax: 281-561-9823

PARENT AUTHORIZATION

I hereby give my permission for the release of all school records and any pertinent
information regarding proper placement or evaluation of my child to:

SOUTHWEST CHRISTIAN ACADEMY

Parent Signature

**SOUTHWEST CHRISTIAN ACADEMY
EXTENDED DAY SCHOOL COST SUMMARY
ACADEMIC YEAR 2017-2018**

REGISTRATION FEE

This fee is payable at time of enrollment for each student and includes all supplies.

| | |
|------------------|----------|
| Registration Fee | \$ 75.00 |
|------------------|----------|

EXTENDED DAY FEES

These fees are payable weekly and are calculated on a per child basis. There is no discount for children within the same family.

| | |
|---|-----------------|
| Before and After Care for Grades K-12 | \$ 65.00 Weekly |
| Before--or--After Care for Grades K-12 | \$ 45.00 Weekly |
| Drop-In Rate, depending on availability | \$ 30.00 Daily |

POLICIES AND PROCEDURES

- Extended Day program: Our Before and After Care program begins at 7:00 AM in the morning and ends at 4:50 PM in the afternoon. Parents must agree to pay a late pickup fee of \$20 per child for each 15 minute period beyond 5:00 PM pickup time.
- Parents must accompany any children to the proper care location and sign the In/Out Register in order to comply with state law.
- Parents are required to pick up any child without delay should the child become ill while in Extended Day. A child must be clear of fever and vomiting for 24 hours before returning.
- Payment is due on the Monday of each week for which extended care is provided. Weekly checks should be written to Southwest Christian Academy with a notation of the dates for which the payment covers written on the check. Cash payments should be in an envelope with the dates noted. A receipt should be obtained for all cash payments. No receipts are issued for payments made by check. Please do not write checks for Extended Day and school tuition together. There is no discount for absences.
- Care will not be provided when school is not in session. We offer an extended school program only. A nourishing drink and snack for late afternoon should be sent with your child for use in the Extended Day program.

**SOUTHWEST CHRISTIAN ACADEMY
EXTENDED DAY SCHOOL REGISTRATION FORM
ACADEMIC YEAR: 2017-2018**

STUDENT #1 NAME: _____ GRADE: _____

STUDENT #2 NAME: _____ GRADE: _____

STUDENT #3 NAME: _____ GRADE: _____

FATHER'S NAME: _____ PHONE: _____

MOTHER'S NAME: _____ PHONE: _____

I AM INTERESTED IN THE FOLLOWING PROGRAM:

___ Before and After Care for Grades K-12, 7:00 AM- 5:00 PM \$ 65 Weekly

___ Before--or--After Care for Grades K-12, 7:00 AM- 5:00 PM \$ 45 Weekly

APPROXIMATE TIMES FOR DROP-OFF AND PICK-UP:

_____ **AM** _____ **PM**

PERSONS AUTHORIZED TO PICK-UP STUDENT:

NAME: _____ PHONE: _____

NAME: _____ PHONE: _____

SPECIAL INSTRUCTIONS

Our program is in operation only when the school is open. The registration fee for any of the above programs is \$ 75 per student. Enrollment is limited: first come, first served. This form, along with the registration fee, **MUST BE RETURNED TO THE SCHOOL WITH YOUR REGISTRATION PACKET TO ASSURE A POSITION.** Fees are due and payable on the first day of the week on checks separate from tuition checks.