

Wayne

Christian School

1201 Patetown Road • Goldsboro, NC 27530 • 919-735-5605 • www.waynechristian.org

Administrator

Lynn Mooring

Dear Prospective Parent,

Administration

Dean of Students

(K5 - 6th grade)

Kathy Sanders

Thank you for the interest you have shown in Wayne Christian School.

As a Christ-centered community school, we recognize that the primary responsibility for nurturing and training children falls upon the parents. Wayne Christian School is dedicated to providing a quality educational program that will support parents as they seek to “train up a child in the way he should go ...”, Proverbs 22:6.

Dean of Students
(7th grade-12th grade)

Reggie Kingsley

Wayne Christian School is committed to developing in its students a proficiency in each subject while establishing a Biblical worldview that teaches students how to pursue and maintain a personal relationship with Jesus Christ.

Dean of Academics

Barbara Sheldon

We believe that each child is a unique creation of God and that each one has been endowed by Him with value, gifts, and talents. We also believe that students have their own unique styles of learning. Wayne Christian School seeks to provide a wide variety of learning experiences that are consistent with those individual learning styles and capabilities.

Athletics
Roger Longwell

Childcare / Preschool

Martha O’Hara

Wayne Christian School exists to complement the teaching in the home and church. Together we will strive to develop moral character, encourage spiritual growth, and provide opportunities for academic excellence. We encourage family involvement in the process through conferences, programs, social events, and other family ministries.

Development

Paul Donica

Fine Arts

Rick Moore

Student Activities

Robin Price

Thank you, again, for your interest in Wayne Christian School. Please prayerfully consider making it your family’s school. Start by completing the student application packet and returning it to Martha O’Hara, Childcare/Preschool Director.

Support Staff

College/Career

Advisor

Susan Ford

Developing Champions for Christ,

Financial Manager

Linda Peacock

Hayley Burt

Registrar

Lynn Mooring, Administrator

NEW STUDENT APPLICATION PROCESS 4 YEAR OLD KINDERGARTEN

- Step One:** All sections of the student application must be completed, signed in all appropriate places (both parents or guardians required in some sections), and returned with the registration fee of \$100.00. This fee is non-refundable.
- Step Two:** An interview for the student(s) and the parents will be scheduled with the Childcare/Preschool Director.
- Step Three:** A Medical Form must be completed and returned within two weeks of the application. The medical form includes a physical form and an immunization record which is a North Carolina requirement.
- Step Four:** A copy of student's birth certificate must be included.
- Step Five:** A Pastor Reference Form will need to be completed and returned within one week to WCS.
- Step Six:** Read the N.C. Childcare Law and Rules information sheet. Sign the acknowledgment form indicating understanding of the N.C. Childcare Law and Rules information sheet.
- Step Seven:** Read and sign the Discipline and Behavior Management Policy.
- Step Eight:** Sign the Field Trip Form granting permission for the children to leave their building for activities.
- Step Nine:** A tuition installment plan (TIP) form must be completed and returned to the Childcare/Preschool Director.

(An application cannot be processed if all information is not complete.)

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STUDENT APPLICATION

General Information

Last Name: _____ First: _____ Middle: _____

Preferred Name: _____ Birth: M ___ D ___ Y _____

Student Social Security Number _____ - _____ - _____

Sex: ___ Male ___ Female Grade Applying to: _____

Street Address: _____

City: _____ County: _____ Zip: _____

Medical Information: (allergies, allergic to medications etc.) _____

OFFICE USE ONLY	
Amt of Check: \$ _____	Ck# _____
Date of Application: _____	
Date of Enrollment: _____	
Test Date: _____	
Date of Interview: _____	
Acceptance Date: _____	
Principal's Approval: _____	

Parent/Guardian and Family Information

Marital Status: Married Widower Separated Divorced Remarried

Custodial Status: NA Sole Joint w/ _____

Father's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: (____) _____ - _____

E-Mail Address: _____

Employer's Name: _____

Occupation: _____

Business Phone: (____) _____ - _____

Cell Phone: (____) _____ - _____

Lives w/Student (Y/N) ___ Receives Mail (Y/N) ___ Receives Bill (Y/N) ___

Marital Status: Married Widower Separated Divorced Remarried

Custodial Status: NA Sole Joint w/ _____

Mother's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: (____) _____ - _____

E-Mail Address: _____

Employer's Name: _____

Occupation: _____

Business Phone: (____) _____ - _____

Cell Phone: (____) _____ - _____

Lives w/Student (Y/N) ___ Receives Mail (Y/N) ___ Receives Bill (Y/N) ___

Paternal Grandparents

Grandparent(s): _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: (____) _____ - _____ E-Mail: _____

Maternal Grandparents

Grandparent(s): _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: (____) _____ - _____ E-Mail: _____

Emergency Contact Information

Name of Contact: _____

Phone Number: (____) _____ - _____

Contact's Relation to Student:

Relative-Relationship: _____

Friend Guardian Other _____

Student's Doctor: _____

Student's Dentist: _____

Name of Contact: _____

Phone Number: (____) _____ - _____

Contact's Relation to Student:

Relative-Relationship: _____

Friend Guardian Other _____

Doctor's Phone: _____

Dentist's Phone: _____

Complete the following information for all children in your family:

1. _____ Age: _____ Grade: _____ School: _____
2. _____ Age: _____ Grade: _____ School: _____
3. _____ Age: _____ Grade: _____ School: _____

Church Attending: _____ Pastor's Name: _____

Church Member: () Yes () No Attendance: () Regular () Seldom () Never

Family Information

To be completed by a parent or guardian:

1. Who recommended WCS to you? _____
2. What are your goals for your children?

3. Share your reasons for applying to Wayne Christian School.

4. Does your child have any health problems?

5. Other schools your child has attended:

6. Has your child ever repeated a grade? _____ If yes, describe which grade and why.

7. If your child ever had modifications made in the classroom? _____
8. Has your child ever been administered psychological, behavioral, or academic testing to determine if he/she is gifted, has a learning disability, ADD, ADHD, behavioral, neurological, sensory, or emotional disorder? _____
If yes, please provide dates and documentation.

With my signature below, I certify that I have answered the above questions honestly and completely.

Signature of parent: _____

Date: _____

WCS STATEMENT OF COOPERATION

PARENTAL COMMITMENT:

We understand our child(ren) is accepted on a general probationary status for the first quarter. We agree that we will in no case complain to other parents, but will register only necessary complaints with the teacher or administration following the Matthew 18 principle. We understand our responsibility to read the student handbook and agree to abide by its established policies. We are to support the school with our prayers and positive attitude. We understand that if at any time the school determines, in its sole discretion, that our actions do not support the ministry, or reflect a lack of cooperation and commitment to the home and school working together, the school has the right to request the withdrawal of our child(ren). We understand the school reserves the right to dismiss our student for lack of cooperation on the part of the student, parent and/or guardian.

Therefore, the parties to this agreement are Christians and believe that the Bible commands them to make every effort to live at peace and to resolve disputes with each other in private or within the Christian community in conformity with the Biblical injunctions of 1 Corinthians 6: 1-8, Matthew 5:23 & 24, and Matthew 18: 15-20. Therefore, the parties agree that any claim or dispute arising out of, or related to, this agreement or to any aspect of the enrollment relationship, including statutory claims, shall be settled by Biblically based mediation.

If resolution of the dispute and reconciliation do not result from such efforts, the matter shall then be submitted to a panel of three arbitrators for binding arbitration. Each part to the agreement shall have the right to select one arbitrator. The two arbitrators selected by the parties shall jointly select the neutral arbitrator. If there is an impasse in the selection of the third arbitrator, the Association of Christian Conciliation Services shall be asked to provide the name of a qualified person that will serve in that capacity. The arbitration shall be conducted in accordance with the Rules of Procedure for Christian Conciliation of the Association of Christian Conciliation Services. (406-256-1583)

FINANCES:

I will make timely payments of my financial obligations. Further, I understand and agree to the following:

- Tuition rates are established by the WCS school board and are distributed through the Childcare/Preschool Director.
- Accounts are to be paid on Monday morning in advance for the week the child attends childcare/preschool.
- Payments that are over 10 days will be subject to a \$30.00 late fee.
- Monthly payments are due by the 5th of each month, or a \$30.00 late fee will be assessed. Monthly payments are based on the number of Mondays in each month (4 or 5).
- If an account is 30 days past due, the school board will be notified, and the child will not be able to return until the account has been paid in full.
- Wayne Christian Childcare/Preschool reserves the right to cancel the enrollment of a child at any time due to non-payment or excessive late payments.
- Returned checks will be subject to a \$30.00 fee. After two returned checks, the account will be placed on a cash only basis.
- Each family will receive one week of vacation per year for each child after the child has attended Wayne Christian Childcare/Preschool for six months.
- A two week notice must be given before a child is withdrawn from childcare/preschool..

PICTURES:

I authorize Wayne Christian School, or anyone authorized by Wayne Christian School, to use and reproduce all audio tapes and video tapes and photographs which Wayne Christian School takes of our child(ren) or any family member. Such reproductions will be used for school literature, advertisements, and promotional purposes without further compensation. All copies, masters, negatives, pictures and proofs shall constitute Wayne Christian School property, solely and completely.

Yes, I give authorization to WCS.

No, I do not give authorization to WCS.

I have read all the Statement of Cooperation and marked my intentions for the school year 2010-2011.

Parent or Guardian Signature

Date

WCS STATEMENT OF FAITH

- *The BIBLE is the ONLY verbally inspired Word of God*, inerrant in the original writings and the final authority in faith and life.
- GOD is one God, eternally existing in three personalities: Father, Son, and the Holy Spirit.
- JESUS CHRIST is the unique Son of the Father, virgin born, sinless, died an atoning death, physically resurrected, ascended, exalted, presently the believer's High Priest, coming to receive His own, the church, and coming again literally and personally to establish the millennial kingdom.
- The HOLY SPIRIT indwells every believer, and instructs, corrects, and guides them in all truth and the Christian life. It is His *office* work not to direct attention to Himself, but to the Lord Jesus Christ. He fills, controls, and empowers those yielded to Jesus Christ as Lord of their lives, the evidence being the fruit of the Spirit.
- MAN is sinful through and through and everlastingly separated from God apart from personal faith in the gospel of Jesus Christ for salvation.
- The CHURCH is the Body of Christ that manifests itself locally through believers united for mutual edification and propagation of the gospel while awaiting God's Son from heaven. There are two ordinances: baptism and the Lord's Table. The Lord's Table is celebrated as a memorial until He comes, and baptism by immersion is a public confession of the believer's identification with Jesus Christ.
- SALVATION provided through the gospel of Jesus Christ as a gift is by grace through faith. All who receive Jesus Christ as Savior are born again into the family of God, sealed by the Holy Spirit and thereby possess eternal life.
- The RESURRECTION of the body will be physical: the saved unto eternal fellowship with God and the unsaved unto everlasting punishment and separation from God in the lake of fire.

I have read the Statement of Faith and I am willing for my child to receive training in these historic doctrines, and will support the school in its endeavors to encourage and to guide my child in applying these doctrines to life.

Parent or Guardian Signature

Date

Wayne Christian School admits students of any race, color or national or ethnic origin and makes available to them all rights, privileges, programs, and activities generally accorded or made available to students at the School. The School does not discriminate on the basis of race, color, or national and ethnic origin in administration of its educational policies, admission policies, scholarship and loan programs and athletic or other school administered programs.

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Confidential Pastor Reference Form

To the Pastor:

The student named below is a candidate for Wayne Christian School. Please complete this form and return within one week to the address above (Admission Office), or Fax to (919)735-5229.

Name of applicant _____ Candidate for grade _____

How would you evaluate the parents in the following areas:

	Poor	Average	Good	Excellent
1. Their church relationship, attendance and loyalty				
2. Their personal relationship to Jesus Christ				
3. Their interest in having their child know and walk with the Lord				
4. Their command for respect and obedience from their children				
5. Their support of their children's spiritual development				
6. Their level of involvement in your church				

7. How well do you know the family? _____

8. Are you currently their pastor or associate pastor? _____

9. To your knowledge, has this applicant accepted Jesus Christ as Savior? _____

10. What are the first words that come to mind to describe this applicant? _____

11. I recommend this student: without reservation with reservation could not recommend

12. Please use this space to give any additional information from above questions or other information which is pertinent.

Church (full name and affiliation):	
Church Telephone:	Home Telephone:
Signature:	Date:
If there is further information you feel we should know but would prefer not to give in writing, please indicate the number and time to call you. <input type="checkbox"/> Church <input type="checkbox"/> Home Time of day:	

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Student Medical Form

Name of Student: _____ Birth Date: _____

Name of Parent or Guardian: _____

Address _____ City _____ State _____ Zip _____

A. Medical History: (To be completed by the parent)

- a. Is your child allergic to anything? ____ Yes ____ No If yes, what?

- b. Is your child under a doctor's care? ____ Yes ____ No If yes, why?

- c. Any previous hospitalizations or operations? ____ Yes ____ No If yes, what?

- d. Is your child on any continuous medication? ____ Yes ____ No If yes, what?

- e. Any history of diseases or recurrent illness? ____ Yes ____ No If yes, what are they (diabetes, convulsions, heart trouble, etc.)?

- f. Does your child have any physical disabilities? ____ Yes ____ No If yes, please describe:

- g. Does your child have any mental disabilities? ____ Yes ____ No If yes, please describe:

B. Physical Examination: (To be completed by a licensed physician, a certified nurse practitioner, or a public health nurse)

Height ____ % Weight ____ % Head ____ Eyes ____ Ears ____ Nose ____ Teeth ____

Throat ____ Neck ____ Heart ____ Chest ____ Abd/GU ____ Ext ____ Skin ____

Neurological System _____ Should activities be limited? ____ Yes ____ No If yes, please explain:

Results of Tuberculin Test, if given: Type ____ Date ____ Normal ____ Abnormal ____

Any other recommendations?

Examiner's signature/title

Date _____

C. Immunization History: A copy of the student's immunization record must be attached.

WCS has permission to seek medical care if necessary.

Parent Signature: _____ Date: _____

Discipline and Behavior Management Policy

Praise and positive reinforcement are effective methods of the behavior management of children. When children receive positive, non-violent, and understanding interactions from adults and others, they develop good self concepts, problem solving abilities, and self discipline. Based on this belief of how children learn and develop values, our employees use the following guidelines for discipline.

We:

1. Do praise, reward, and encourage the children.
2. Do reason and set limits for the children.
3. Do model appropriate behavior for the children.
4. Do modify the classroom environment to attempt to prevent problems before they occur.
5. Do listen to the children.
6. Do provide the children with positive alternative choices of behavior.
7. Do provide the children with natural and logical consequences of their behavior.
8. Do respect the children's needs, desires, and feelings.
9. Do ignore minor behavior.
10. Do explain to children on their level.
11. Do use short supervised periods of "time-out". (Time out is described below.)
12. Do stay consistent in our behavior management program.
13. Do not use any form of corporal punishment.

Time Out

"Time Out" is the removal of a child for a short period of time (3-5 minutes) from a situation in which the child is misbehaving and has not responded to other discipline techniques. The "time out" space, usually a chair, is located away from the classroom activity but within the teacher's sight. During "time out", the child has time to think about the misbehavior which led to his/her removal from the group. After a brief interval of no more than 5 minutes, the teacher discusses the incident and appropriate behavior with the child. When the child returns to the group, the incident is over and the child is treated with the same affection and respect show to the other children.

I, the undersigned parent or guardian of _____ (child's full name), do hereby state that I have read and received a copy of the facility's Discipline and Behavior Management Policy and that the facility's director/coordinator (or other designated staff member) has discussed the facility's Discipline and Behavior Management Policy with me.

Signature of Parent or Guardian

Date

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Letter of Acknowledgment and Understanding of the N.C. Child Care Law and Rules

I, _____ have received a copy of the North Carolina Child Care Law and Rules from Wayne Christian School. I understand the information enclosed in the above brochure to the best of my knowledge. If I should have questions regarding any of the information, I am aware that I can call the Division of Child Development. I understand that I have the right to receive a copy of this agreement for my records.

Signature of Parent or Guardian: _____

Date Signed: _____

Signature of Facility Representative: _____

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Field Trip Form

My child, _____, has my permission to attend Wayne
Christian School activities on the school grounds.

Parent's Signature _____

Date _____

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Preschool (4 year old Kindergarten) 2010 – 2011 RATES

Tuition

\$140 / week

*Lunch included for students

Discounts – School Tuition Only

Second Student	15%
Third Student	15%

Fees (All fees are nonrefundable)

Registration (Paid at time of registration)	\$100
Late Registration (For returning students not registered by March 1, 2010)	\$100
Books & Supply Fee (Due by July 15, 2009) NOTE: Invoice will <u>NOT</u> be sent.	\$200

Policies

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Payments that are over 10 days will be subject to a \$30.00 late fee.

Monthly payments are due by the 5th of each month, or a \$30.00 late fee will be assessed. Monthly payments are based on the number of Mondays in each month (4 or 5).

If an account is 30 days past due, the school board will be notified, and the child will not be able to return until the account has been paid in full.

Wayne Christian Childcare/Preschool reserves the right to cancel the enrollment of a child at any time due to non-payment or excessive late payments.

Returned checks will be subject to a \$30.00 fee. After two returned checks, the account will be placed on a cash only basis.

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Preschool (4 year old Kindergarten) Tuition Installment Plan (TIP)

To complete the registration process for the 2010-2011 school year, please select an Enrollment Option and Tuition Installment Plan. **Return this form with your registration packet.**

Pre-School Enrollment Option : (4 yr. old kindergarten)

Full Day Student – 10 month

Full Day Student – 12 month

Tuition Installment Options:

Monthly Installment (Paid on or Before the 5th of each month)

Weekly Installments (Paid on Monday each week)

Any account with a balance at the end of the month will be assessed a \$30 late fee.

Please list other WCS students for discount purposes

<i>Student Name:</i>	<i>2010-2011 Grade</i>

Parent or Guardian

Signature: _____ Date _____