Wayne
Christian School

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

Administrator
Lynn Mooring

Administration

Dean of Students
(K5 - 6th grade)
Kathy Sanders

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

Dean of Academics
Barbara Sheldon

Athletics
Roger Longwell

Childcare / Preschool
Martha O'Hara

Fine Arts
Rick Moore

Support Staff

College/Career
Advisor
Susan Ford

Financial Manager
Linda Peacock

Hayley Burt
Registrar

Dear Prospective Parent,

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.

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.

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.

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.

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 the school office.

Developing Champions for Christ,

Lynn Mooring, Administrator
Wayne Christian School

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NEW STUDENT APPLICATION PROCESS
5 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 one attached check for the processing fee of $100.00 and the registration fee of $200.00 for a total of $300.00. These fees are non-refundable.

☐ **Step Two:** The secretary will set up an interview for the student(s) and the parents with the elementary principal.

☐ **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:** Once your child has been accepted a tuition installment plan (TIP) form must be completed and returned to the secretary.

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

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STUDENT APPLICATION

General Information

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

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.)_____

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 _____

Name of Contact: _____

Phone Number: (__ __ __) __ __ __ - __ __ __ __
Contact's Relation to Student:
( )Relative-Relationship: _____
( )Friend ( )Guardian ( )Other _____

Student's Doctor: _____ **Doctor's Phone:** _____

Student's Dentist: _____ **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. Has 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 (**located at www.waynechristian.org**) 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:

- Students with outstanding account balances will not be allowed to attend class until the account has been brought up to date. The account will be referred to the WCS School Board.
- If I withdraw my child from school for any reason, the school will exercise its prerogative by not releasing any records or report card if the account is not current.
- High school students will not be allowed to take mid-semester exams if their accounts are not paid through December or final exams if their accounts are not paid through May.
- Returned checks will incur a $30.00 charge.
- Late payments will be assessed a fee of $30.00 per month until account is paid in full.
- If I withdraw my child from school after classes have begun, I am responsible to pay tuition through the end of that month.
- Parents enrolling students in any given school month will be responsible for that month's tuition payment.

PICTURES:

We authorize Wayne Christian School, or anyone authorized by Wayne Christian School, to use and reproduce all tapes and photographs which Wayne Christian School takes of our child(ren) or any family member. Such reproductions of audio tapes and video 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, we give authorization to WCS. □ No, we do not give authorization to WCS.

ACTIVITIES:

We give permission for our child(ren) to take part in any and all school activities, class field trips, including sports and school-sponsored trips away from the school premises, and absolve the school from liability to us or our child because of any injury to us or our child at school or during any school activity. In case of emergency or serious illness, we request the school contact us first. If we are not available, please contact the designated emergency contact. If the emergency contact cannot be reached, the school has my permission to make whatever arrangements deemed necessary for our child(ren)'s treatment. If the emergency is life-threatening and we cannot be reached, the physician has permission to act accordingly absolving the school of any liability. This statement of cooperation will serve as a blanket permission slip from August 1, 2012 to July 30, 2013.

□ Yes, we give permission to WCS. □ No, we do not give permission to WCS.

INTERNET:

The school has taken precautions to restrict access to inappropriate materials through filtering and monitoring systems. However, it is impossible on a global internet to control access to all data that a user may discover. It is the user's responsibility not to initiate access to such material. Any site or material that is deemed controversial should be reported immediately to the appropriate personnel. WCS expressly disclaims any obligation to discover all violations of inappropriate internet access. Specific guidelines for on campus usage are detailed in the Student Handbook.

I have read all the Statement of Cooperation and marked my intentions for the school year 2012-2013.

_____ _____

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 persons: 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.	☐ Church ☐ 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 b 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:_____

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Wayne Christian School
K5 – 12th Grade
2012 – 2013 RATES

Tuition & Extended Care

Annual Tuition Fees not included. See chart below.	With Yearly Extended Care (Afternoon ONLY or Morning & Afternoon) Year based on school year not calendar year.	With Yearly Extended Care (Morning ONLY) Year based on school year not calendar year.
$4,300	$5,700	$5,140

Discounts – School Tuition Only

Second Student	15%
Third Student	15%

Fees (All fees are nonrefundable)

Registration (Paid at time of registration)	$200
Late Registration (For returning students not registered by March 1, 2012)	$100
New Student Processing	$100
Books: Invoice will **NOT** be sent. 1 installment $400 due by July 15, 2012 2 installments $200 due by June 15, 2012 $200 due by July 15, 2012	$400

Drop-In Extended Care

Morning Only (7 – 7:45 am)	$7.00
Afternoon Only (3 – 6 pm)	$12.00

Policies

Financial Policy: Returned Checks – Fee for returned checks is $30. After receiving two returned checks, accounts will be notified by letter that they have been placed on a cash payment basis for the remainder of the current school year and thereafter, the school will accept only cashiers checks, money orders, or cash as payment for the school bills.

If a student is withdrawn from school after classes have begun, the parents are responsible to pay tuition through the end of that month.

Extended Care: If a student has not been picked up by 3:00 pm. The student will be sent to extended care and charged accordingly.

Payments: Payments are due by the 5th of each month. Any account not paid in full by the 5th will be assessed a $30 late fee.

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K5 – 12th Grade
Tuition Installment Plan (TIP)

To complete the registration process for the 2012-2013 school year, please select an Enrollment Option and Tuition Installment Plan. **Return this form with your registration packet.**

Tuition Installment Options:

- ❒ 1 Installment Pay in Full (On or before August 1, 2012)
- ❒ 2 Installments Pay by Semester (On or before August 1, 2012 and January 1, 2013)
- ❒ 10 Installments August 2012 through May 2013

Once your Tuition Installment Plan has been processed by the finance office, any change will incur a $25 reprocessing fee.

Tuition Installments will be due on the 5th of each month. And a late fee of $30 will be assessed on the 6th of each month.

Annual Extended Care Options:

- ❒ Mornings Only . . . . . $ 840.00
- ❒ Afternoons Only $1,400.00
- ❒ Mornings & Afternoons $1,400.00

Please list all other WCS students (including childcare) for discount purposes

Student Name:	*2012-2013 Grade*

_____ _____
Parent or Guardian Signature **Date**