

Fourth Baptist Christian School

Student Application Packet

Jr./Sr. High

Grades 7 - 12



900 Forestview Lane N

Plymouth, MN 55441-5934

Phone Number: 763.417.8240

website: www.fourthbaptistchristianschool.org

Fourth Baptist Christian School



Basic Information

Mission Statement

Fourth Baptist Christian School, as a ministry of Fourth Baptist Church, is committed to the development of a student's spiritual life in Jesus Christ, while pursuing academic excellence in a manner which honors and glorifies God, based on the only infallible Word, the Bible.

Purpose Statement

The ultimate goal and purpose of Fourth Baptist Christian School is to lead boys and girls to a personal relationship with Jesus Christ and then train them in the knowledge of God, the Christian way of life, and to offer them an excellent education. It is our desire to work with the parents in bringing the child up in the nurture and admonition of the Lord and thus equipping him/her to identify, evaluate, and relate properly to life's problems. We exist to provide a Christ-based education for students in our church, as well as those in our community who see the need for Christian education.

Statement of Faith

- The Bible is the Word of God, inspired by the Holy Spirit, and our rule of faith and life.
- There is one living and true God, eternally existing in three persons, Father, Son, and Holy Spirit.
- Jesus Christ was conceived by the Holy Spirit, born of the virgin Mary, lived a sinless life, died for our sins, rose bodily from the grave, ascended to heaven, and will be personally and visibly returning to this earth at the end of this age.
- All men are sinful by nature and practice. Thus they must receive Jesus Christ by faith to be delivered from sin and its penalty, to have eternal life, and to become a child of God.
- Everything was created by God, through direct creation in six solar days, without the process of evolution and that the early chapters of Genesis are to be taken as literal and accurate history.
- The Holy Spirit convicts, regenerates, baptizes, indwells, seals and fills the believer at the point of their salvation. The filling of the Spirit is manifested by the fruits of the Spirit rather than by any specific spiritual gift.
- Every child of God should be growing in grace and knowledge of the Lord Jesus Christ, living a life of righteous works, and being a witness of His saving grace to others.

Objectives

- Assist each student to develop his total personality in the biblical pattern: “in Wisdom (academically); in Stature (physically); in Favor with God (spiritually) and with Man (socially).”
- Assist each child in the discovery and development of his God-given talents and abilities.
- Promote self-discipline by training the student to be consistent, respectful, appreciative, responsible, and thorough.
- Assist each child in seeking God’s purpose for his life.
- Help each child learn to overcome failure and strive for success.
- Motivate students to become heavily involved in a local church, either full or part-time.

Procedures for Admission

- Complete the enclosed Student Application (all grades), one copy of the Student Reference (grades 1 – 12), and the Student Questionnaire (grades 4 – 12).
- Return the completed forms with the nonrefundable \$50 application fee.
- Distribute the other Student Reference Forms to the appropriate parties.
- You will be contacted to set up an interview with the Administrator. The purpose of this family interview is two-fold: 1). It gives the Administrator the opportunity to explain the school’s philosophy and policies; 2). It helps the family determine if our educational goals mutually coincide.
- Upon completing the above steps, parents will be asked to complete and return the following forms:
 1. Request for Records (from previous school)
 2. Emergency Contact Information
 3. Authorization to Administer Medicine
 4. Partnership Agreement
 5. Proof of immunization from clinic will be required
- All new incoming students must take the academic entrance test.



APPLICATION FOR ADMISSION

FOURTH BAPTIST CHRISTIAN SCHOOL

900 Forestview Lane N • Plymouth, MN 55441-5934

TEL (763)417-8240 • FAX (763)417-8242

Student's Name _____ M F
(first) (middle) (last) (sex-circle)

Address _____
(street)

_____ (city) (state) (9 digit zip!)

Home Phone (____) _____ Birthdate ____/____/____ Age ____ Birth Place _____

Parent's Primary Email Address: _____

wishes to enroll in grade _____ of the Fourth Baptist Christian School and wishes to begin attending on _____.
(month) (year)

NOTE: FBCS does not accept scholarships from the Early Learning Grant or any government day care assistance funding of any kind.

- K/4 children must be four years of age by September 1st to enter school.
- K/5 children must be five years of age by September 1st to enter school.

All day K/4, K5 3 day per week K/4, K5 (Monday, Wednesday, Friday)

School District you are presently living in: _____
(name) (number)

List chronologically all schools attended, including preschool and kindergarten.
(If any education was tutored study or home schooling, please describe courses and give dates.)

<u>Dates</u>	<u>Grade</u>	<u>Name of School</u>	<u>Mailing Address</u>

The child's scholastic grades have been:
Superior _____ Above Average _____ Average _____ Below Average _____

Has the child ever failed to be promoted to the next grade? _____

If so, explain: _____

The primary language spoken at home is: _____

Fourth Baptist Christian School

PARENT/ADMINISTRATION PARTNERSHIP AGREEMENT



I authorize FBCS to instruct my child both spiritually and academically with biblical truth as the foundation, Christ as the model, and Christ-likeness the goal.

I recognize FBCS as an extension of my home and my parental responsibilities.

1. I agree with the philosophy, purpose, and goals of FBCS.
2. I agree with the policies in the student handbook of FBCS and will support the teachers and administrators in their modeling, teaching, and implementing of these policies. In case of minor differences, I am content to defer to the school administration.
3. I will, in my home, diligently work with and consistently support the administration, faculty, and staff of FBCS in the training and discipline of my child.
4. If I have questions, concerns, or points of difference with the administration, faculty, or staff of FBCS, I will speak directly and exclusively to those involved, beginning with the teacher, and I will do so in a spirit of humility and cooperation, with the goal of settling all differences biblically and selflessly. If I cannot settle such differences in a Christ-like way to the satisfaction of all parties involved, I will voluntarily remove my child from FBCS and transfer them to a school whose philosophy and standards are more in keeping with the philosophy and standards of my home. (Matthew 18)
5. I view my child's enrollment at FBCS as a privilege and not a right, and I will endeavor as a parent to support consistently and pray diligently for the personnel and ministry of FBCS that, together, we might train young men and women who are equipped to model truth and excel mentally, socially, and spiritually in a world of great spiritual need.

The Administration, Faculty and Staff of FBCS Agree To:

1. Strive to give students of FBCS the best possible academic instruction in the context of a biblical world view, personal faith in Christ, and deep Christian love.
2. Apply the standards of FBCS to all students as stated in the student handbook lovingly, equitably, firmly, and consistently in order to create an environment that is well-ordered and conducive to learning, to assist students in the process of growing in Christ, and to aid parents in the raising of their children for God's glory.
3. Contact parents directly when their child evidences a pattern of unconcern, disrespect, or disobedience toward the scholastics, standards, or authorities of FBCS or toward fellow students at FBCS.
4. Remember that FBCS is an extension of the homes we serve and to strive to keep communication open between home and school as well as school to home.

Signed: _____ Date: _____
FBCS Administrator

Signed: _____ Date: _____
Parent/Guardian

Please Print Name: _____



Fourth Baptist Christian School

Student Questionnaire Grades 7 - 12

Name _____

Date _____ Present Grade _____

The purpose of this questionnaire is to help us get to know you a little better. Please answer each question as simply and briefly as possible.

1. Are you a Christian? _____ If yes, please tell how and when you became a Christian.

2. Do you attend church regularly? _____ Do you attend Sunday School regularly? _____

What church do you attend? _____

3. What church service do you like best? _____

4. Do you have devotions regularly at home? _____

5. Do you like the idea of coming to Fourth Baptist Christian School? _____ Why? _____

6. Did you like your last school? _____ Why? _____

7. Have you ever had any trouble with a teacher or student? _____ If yes, please explain.

8. Do you smoke? _____ Drink alcohol? _____ Use drugs? _____ Use bad language? _____

9. Have you ever been suspended or expelled from school? _____ If yes, please explain.

10. Are you willing to obey all of the rules of Fourth Baptist Christian School? _____

11. Name three people whom you greatly admire (whether they are alive or not). _____

12. List your 3 favorite TV programs. _____

13. About how much TV do you watch daily? _____

14. List your favorite magazines. _____

15. List any experiences you have had in leadership, such as team captain, class president, etc.

16. List any musical talent you may have (singing, playing an instrument [list instrument], etc.

17. What things do you like to do best? _____

18. What things do you like to do least? _____

19. List any interscholastic sports you have played. _____

20. What hobbies do you have? _____



Fourth Baptist Christian School

Student Reference Grades 7 - 12

Teacher's Name

Date

Student Name

Grade

School Name

Tel. Number

Parent: Write the student's name and grade entering on all four forms. Send them to two of his/ her most recent teachers, one form to the most recent principal and complete the third form yourself.

Evaluator: We would appreciate your impressions of the applicant. Please complete the following information below, and mail the form directly to **Fourth Baptist Christian School, 900 Forestview Lane N, Plymouth, MN 55441-5934**. This information will be kept confidential and will be used to help determine whether or not Fourth Baptist Christian School is a suitable school for the applicant. Thank you for your cooperation.

Please Check One	Never	Sometimes	Often	Always	Not Known
Is responsible					
Is reliable					
Is orderly					
Demonstrates cooperation					
Has a good attitude towards the opposite sex					
Shows honesty/integrity					
Demonstrates humility					
Has a good attitude					
Adheres to the dress code					
Respects authority					
Is emotionally stable					

Additional comments:

Do you know of any specific problem the student has which would hinder learning?

In what capacity have you known the student? _____

Name (please print)

Phone Number

Signature

Occupation



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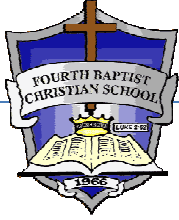
In what capacity have you known the student? _____

Name (please print)

Phone Number

Signature

Occupation



Fourth Baptist Christian School

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Name (please print)

Phone Number

Signature

Occupation



Fourth Baptist Christian School

AUTHORITY TO RELEASE SCHOOL AND/OR EDUCATIONAL RECORDS

TO: _____ RE: _____

BIRTHDATE: _____ SS#: _____

YOU ARE AUTHORIZED to release to Fourth Baptist Christian School, 900 Forestview Lane N, Plymouth, MN 55441-5934, all information from the school/education and disciplinary records maintained while my child was a student at the above educational facility. I give my permission for the above educational facility to speak with the Administrator of Fourth Baptist Christian School about my child's educational/behavioral history.

I specifically request copies of the following documents to be provided to Fourth Baptist Christian School:

- | | |
|---------------------------------|---|
| _____ Grades/Transcripts | _____ Grade Standard Test Results (Minnesota) |
| _____ PSAT/SAT/ACT Tests Taken | _____ Achievement Test Scores |
| _____ Special Education Reports | _____ Discipline Records |
| _____ Psychological Evaluations | _____ Immunization Records/Physicals |
| _____ Other, specify: _____ | |

The information is needed for consideration of my child's admission into Fourth Baptist Christian School.

I understand that I may revoke this consent at any time and that this consent will continue in force for one year from the date of my signature, or, until specifically revoked by me in writing. I do not authorize further release to any third party.

A photocopy of this authorization shall have the same legal effect as the original signed copy.

Dated: _____

 Signature of Parent/Guardian

Fourth Baptist Christian School



Principal's Information Request Form

Regarding: _____
Student Name

Dear Principal:

Please, answer the following questions on the above applicant as part of our admission process.

1. Has the student ever been suspended for any reason from school? _____

If yes, please explain. _____

2. Has the student been expelled from your program? _____

If yes, please explain. _____

3. Has the student been involved in repeated disciplinary situations? _____

if yes, please explain. _____

Thank you for your help.

Sincerely,

Alan J. Hodak
Administrator

Fourth Baptist Christian School



Home Language Survey

Dear Parent/Guardian:

Please complete the Home Language Survey below. Responses to these statements will be used to determine whether the student will be assessed for English Language Proficiency. Thank you for your assistance.

Student's Name _____ Date _____ Grade _____

1. English is the *only* language spoken in your home Yes No (if yes, please skip down to #10)

Please check the correct response to each of the following questions and indicate other language if appropriate	Language		
	ENGLISH <i>check if primary</i>	OTHER LANGUAGE	OTHER LANGUAGE(S)
LANGUAGE QUESTIONS			
2. What language did the child learn when he/she first began to talk?			
3. What language does the family speak at home most of the time?			
4. What language does the parent(s) speak to his/her child most of the time?			
5. What language does the child speak to his/her brothers/sisters most of the time?			
6. What language does the child hear and understand at home?			
SCHOOL COMMUNICATION WITH PARENTS			
7. Can an adult family member or extended family member speak English?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
8. Can an adult family member or extended family member read English?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
9. Can the parents/guardians understand oral and/or written communication from the school?	Oral <input type="checkbox"/> Yes <input type="checkbox"/> No Written <input type="checkbox"/> Yes <input type="checkbox"/> No		

10. Signature of person completing survey _____

Please print name _____ Date _____

RELATIONSHIP TO STUDENT

Father Mother Guardian Other _____

