

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.

POURTH BAPTIST CHRISTIAN SCHOOL		FOURTH BAPTIST restview Lane N • TEL (763)417-8240	Plymouth, MN	55441-5934	
Student's Na					M F
Address	(first)		(middle)	(last)	(sex-circle)
	(street)			
	(city)			(state)	(9 digit zip!)
Home Phon	e ()	Birthdate	_// Age	eBirth Pl	ace
Parent's Prir	nary Email Addre	255:			
Wishes to er	nroll in grade	of the Fo	urth Baptist Ch	ristian School a	nd wishes to begin
	۱				
	/	(year)			
	y care assistance K/4 children n		ind. s of age by Sep	tember 1st to e	enter school.
day • •	CS does not acce y care assistance K/4 children n K/5 children n	pt scholarships fr funding of any k nust be four year	ind. s of age by Sep s of age by Sep	tember 1st to e tember 1st to e	enter school. enter school.
day • • □ All day K	CS does not acce y care assistance K/4 children n K/5 children n /4, K5 🛛 3 d	pt scholarships fr funding of any k nust be four year nust be five years ay per week K/4, ntly living in:	ind. s of age by Sep s of age by Sep K5 (Monday, N	tember 1st to e tember 1st to e Nednesday, Fri	enter school. Inter school. day)
day • • • • • • • • • • • • • • • • • • •	CS does not acce y care assistance K/4 children n K/5 children n /4, K5 □ 3 d ct you are preser	pt scholarships fr funding of any k nust be four year nust be five years ay per week K/4, ntly living in:(na	ind. s of age by Sep s of age by Sep K5 (Monday, N me)	tember 1st to e tember 1st to e Nednesday, Fri	enter school. enter school. day) (number)
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day • • • • • • • • • • • • • • • • • • •	CS does not accept care assistance K/4 children n K/5 children n /4, K5	pt scholarships fr funding of any k nust be four year nust be five years ay per week K/4, ntly living in: (na s attended, includ I study or home so	ind. s of age by Sep s of age by Sep K5 (Monday, N K5 (Monday, N me) ding preschool chooling, please	tember 1st to e tember 1st to e Wednesday, Fri and kindergarte e describe cours	enter school. enter school. day) (number) en. ses and give dates.)
day • • • • • • • • • • • • • • • • • • •	CS does not accept care assistance K/4 children n K/5 children n /4, K5	pt scholarships fr funding of any k nust be four year nust be five years ay per week K/4, ntly living in: (na s attended, includ I study or home so	ind. s of age by Sep s of age by Sep K5 (Monday, N K5 (Monday, N me) ding preschool chooling, please	tember 1st to e tember 1st to e Wednesday, Fri and kindergarte e describe cours	enter school. enter school. day) (number) en. ses and give dates.)

Family's church:	Address:
Does your family attend church regularly?	Sunday School regularly?
** Please attach a short Christian testimony fro	om one or both of the parents.

Is the child's health such that he is able to participate in a regular school program, including all activities in the curriculum such as physical education, recess and classroom activities of an active nature? ______ If not, please indicate the limitations: ______

Comment on the child's personality traits (well-behaved, poised, congenial, responsible, reticent, temperamental, aggressive, domineering, fearful, etc.)

Family status - PLEASE CIRCLE	: Single Mar	ried Separated Divor	ced
Father		Mother	
(Name)		(Name)	
(Address)	(Phone)	(Address)	(Phone)
(Occupation)		(Occupation)	
(Business Address)	(Phone)	(Business Address)	(Phone)
List other children in the famil <u>Name</u> <u>Birthda</u>	•	<u>School Attene</u>	ling (If not, why?)
Why do you as parents desire	to enter your child	in the Fourth Baptist Christian	n School?
	and unhold the st	dent bandhook and the ideal	of the cohool in
We shall endeavor to support every way. We agree to pay a	•		

(Signature of father) (Signature of mother) Fourth Baptist Christian School accepts students without regard to race, color, sex, or national or ethnic origin.

2013-14 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 CURISTIAN SCHOOL	Fourth Baptist Christian School
	Student Questionnaire
Libee 3	Grades 4 - 6
Name	
Date	Present Grade
The purpose of this qu question as simply and	iestionnaire is to help us get to know you a little better. Please answer each d briefly as possible.
L. Are you a Christian?	P If yes, please tell how and when you became a Christian.
2. Do you attend churc	ch regularly? Do you attend Sunday School regularly?
Nhat church do you a	ttend?
3. What church service	e do you like best?
4. Do you have devotio	ons regularly at home?
5. Do you like the idea	of coming to Fourth Baptist Christian School? Why?
5. Did you like your las	st school? Why?
7. Have you ever had a	any trouble with a teacher or student? If yes, please explain.
3. Do you smoke?	Drink alcohol? Use drugs? Use bad language?

9. Have you ever been susp	ended or expelled from	school?	If yes, please explain.
10. Are you willing to obey a	all of the rules of Fourth	n Baptist Christian Sc	hool?
11. Do you get upset when	a teacher does not give	you permission to ta	alk?
12. List your 3 favorite TV p	rograms.		
13. About how much TV do	you watch daily?		
14. What is the difference b	etween a lie and a mist	ake?	
15. What kind of work do yo	วน want to do when yoเ	u grow up?	
16. What things do you like	to do best?		
17. What things do you like	to do least?		
18. What would you like to	be known for in school	? (Circle one).	
Best in Music	Best Grades	Best Christian	

Other _____ Best Athlete



Student Reference Grades 4 - 6

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
Stays seated when asked					
Is quiet when asked					
Is neat and organized					
Follows directions well					
Has a reasonable attention span					
Can work well without supervision					
Meets deadlines					
Relates well with peers					
Has a balanced temperament					
Respects authority					
ls courteous					

Additional comments:

Do you know of any specific problem the student has which would hinde	r learning?
---	-------------

In what capacity have you known the student?		
Name (please print)	Phone N	lumber
Signature	Occupat	tion



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Tel. Number

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ls courteous					

Additional comments:______

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Name (please print)	Phone N	lumber
Signature	Occupat	tion



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Student Name	Grade Entering
School Name	Tel. Number

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Signature	Occupat	tion



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Additional comments:______

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

In what capacity have you known the student?		
Name (please print)	Phone N	lumber
Signature	Occupat	tion



AUTHORITY TO RELEASE SCHOOL AND/OR EDUCATIONAL RECORDS

TO:	RE:	
BIRTHDATE:		

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:_____

Princip	al's Informat	tion Reque	est Form		
Regarding					
	Student Name				
Dear Princ	ipal:				
Please, an process.	swer the following	questions on tl	he above applica	nt as part of our	admission
	e student ever bee se explain	•	•		
	e student been exp se explain.	-			
	e student been invo se explain				

Alan J. Hodak Administrator

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 _____

FOURTH BAPTIST CHRISTIAN SCHOOL

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

Please check the correct response to each of the	Language			
following questions and indicate other language if appropriate	ENGLISH check if primary	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 r	nember speak E	nglish?	🛛 Yes 🖓 No	
8. Can an adult family member or extended family r	nember read En	glish?	🗖 Yes 🗖 No	
9. Can the parents/guardians understand oral and/o	or written comm	unication from the school?	Oral □Yes □No Written □Yes □No	

10. Signature of person completing survey _____

Please print name _			Date
RELATIONSHIP TO S	 Guardian	Other	

Authorization to Administer Medication

FOURTH BAPTIST CHRISTIAN SCHOOL	
S 2	

Name of Stu	ident:			
Name of Stu	aent.			
Name of Me	dication:			
Tylenol	Ibuprofen	Tums	Cough Drops	NONE
Other				
(please	check appropriate box(es). We keep Jr.	Chewable Tylenol and Jr. 1	ums on hand for elementary.)
			ring any medications, plo	ease circle: CALL FIRST
If you reque	st that we call first be	efore administer	ring any medications, plo	
If you reques	st that we call first be	efore administer n reactions to a	ring any medications, plands any medications? Yes _	ease circle: CALL FIRST
If you reques Does the Stu If so, which r	st that we call first be ident have any know medications, and wha	efore administer n reactions to a t type of reactio	ring any medications, plo ny medications? Yes _ on?	ease circle: CALL FIRST
If you request Does the Stu If so, which r Medication	st that we call first be ident have any know nedications, and wha	efore administer n reactions to a t type of reactio	ring any medications, plo ny medications? Yes on? Reaction:	ease circle: CALL FIRST

medications. I understand that Fourth Baptist Christian school is only administering medication at my request and will not be responsible for any adverse reactions.

Parent Signature	
------------------	--

Date

Any other medications for a Student, prescription or otherwise, to be administered during the school day must be turned into the office in the morning. The dosages will be recorded below, and the medication will be sent home with the student at the end of the day.

MEDICATION LOG:			
Medication	Date & Time	Amount	Staff Initials

Medication	Date & Time	Amount	Staff Initials