



Providence Christian School

701 Mohawk Parkway, Cape Coral, Florida 33914

(239) 549-8024 * FAX: (239) 549-4465

e-mail: providence@pcslions.org

Dear Applicant:

Thank you for the interest you have expressed in our school. It is always a delight to share who we are and what we have to offer educationally for children. Providence Christian School has a strong and unique program both academically and spiritually. It is a program that recognizes God to be at the center of all our learning, and it is a program that recognizes the important influences of a child's life to be those of the home, school, and church. We provide a rigorous academic program that addresses children as uniquely gifted beings, who need training as discerning servants in a culture that they are called to transform under the rule of Jesus Christ.

Because God has given you, as parents, the responsibility of educating your children, Providence wants to work cooperatively with you in the educational process. Our application process reflects this philosophy. The following procedures will introduce you to the Providence school community and will need to be completed before a student's admission into the educational program:

- Complete the enclosed *Application for Admission* form.
- Submit the registration fee of \$200
- Schedule an appointment to meet with the school administrator for information regarding the complete school program and for a tour of the facility.
- Schedule testing for the student applicant. Pre-K and Kindergartners will participate in a readiness test. Other students will be given a math test and reading inventory. Evaluation of the testing will determine admission and placement in the correct grade level.
- Submit last report card and records from any schools previously attended.
- Submit a current Florida Certificate of Immunization, a physical examination performed within one year prior to entrance in a Florida school, and a copy of the child's birth certificate. This must be submitted before the student can begin school.

We are engaged in important work at Providence Christian School, for your children are precious. If you would like to be a part of this process and this community, please don't hesitate to call. We want to work together in raising up children who love God and serve His world.

PROVIDENCE CHRISTIAN SCHOOL
701 Mohawk Parkway * Cape Coral, FL 33914 * (239) 549-8024

Application for Admission

Student Information

Student's Name _____ Birthdate: _____
(Last) (First) (Middle)

Address: _____ City _____ St _____ Zip _____

Phone Number _____ SS# _____ Birthplace: _____

Race: (circle) Caucasian Black Asian Hispanic Other _____ Sex: _____ Adopted? Yes No

Grade Entering: _____ Starting Date: _____

Family Background

Father's Name _____
Address _____
Phone _____ Date of Birth _____
Employer _____
Occupation _____
Business Phone _____
Education: <input type="checkbox"/> High School <input type="checkbox"/> 2 yr college <input type="checkbox"/> 4 yr college <input type="checkbox"/> graduate
E-Mail Address: _____

Mother's Name _____
Address _____
Phone _____ Date of Birth _____
Employer _____
Occupation _____
Business Phone _____
Education: <input type="checkbox"/> High School <input type="checkbox"/> 2 yr college <input type="checkbox"/> 4 yr college <input type="checkbox"/> graduate
E-Mail Address: _____

Natural parents are: together at home separated divorced widow

If parents are divorced or separated, who has legal custody? _____

Name of parent or guardian if other than parent _____ Relationship _____

Can your address, home phone number and occupation be listed in the School Directory? Y N

Name and address of living grandparents:

Name Address City St Zip

Name Address City St Zip

If there are other children in your family please complete the following:

Name _____ Birthdate _____ School _____

Name _____ Birthdate _____ School _____

Name _____ Birthdate _____ School _____

Academic Information

Previous school attended: _____
Name of School

Address: _____
Street City State Zip

Grades attended: _____ Dates: _____

Reason for leaving: _____

Has student ever repeated a grade? _____ Which grade(s)? _____

Has student ever attended summer school? Y N When? _____ Where? _____

Has student ever been in difficulty with civil authorities? _____ If so, explain: _____

Any physical or emotional problems? _____

Describe the student's interests, talents, abilities: _____

Where did you receive information about Providence?

Phone book Church Newspaper Radio Other _____

Friend (If the friend who recommended the school is already a PCS family, please give us their name

Please include student's last report card and standardized test.

Spiritual Information

Does your family attend church? Yes ___ No ___

Church _____ Pastor: _____ Phone: _____

Member? Y N How Long? _____ Regular Attendance? _____ How Long? _____

Parents, please answer the following questions:

1. How do you describe your relationship with Jesus Christ?

2. Do you as a family read the Bible and pray?

3. Please explain your reasons for desiring to enroll your child at Providence Christian School.

4. Has your child already made a commitment to become a follower of Jesus Christ?

Parents' (or legal guardians') Statement

Parents of first-time enrolled students will be required to interview with the administration or Board of the school.

In making application for my child to attend Providence Christian School:

- I agree to support the spiritual, moral, dress, and disciplinary standards of the school as outlined in the Parent Handbook.

If my child is accepted:

- I agree to assume the responsibility for my child's education by supervising homework and keeping in regular contact with my child's teachers.
- I understand that until such time as PCS has adequate facilities and staffing to service students with learning disabilities or special physical/emotional needs, the school reserves the right to refuse admission for such students. Upon screening and detection of such needs in any enrolled student, Providence will evaluate on an individual basis its ability to provide adequate instruction for that student.
- I agree to support to the best of my ability, through attendance and participation, the various activities of the school.
- I agree to allow my child to go on scheduled field trips and other school activities.
- I agree to support, to the best of my ability, the school's entire program through prayer, time, and financial gifts.
- I understand that this application cannot be considered without the Registration Fee and that, if my child is accepted, I agree to the payment and/or refund policies listed on the school's tuition worksheet.
- I will attend meetings and parent functions of the school regularly.
- I will recommend Providence Christian School to others as opportunities arise.
- I understand that Providence Christian School reserves the right to refuse any application, or dismiss any student, at any time, for unacceptable work or conduct, or any other reason it deems necessary. Neither this application nor payment of fees is considered to be binding upon Providence Christian School. If a student is dismissed from the school, the parents are still responsible to pay the full tuition for that quarter.

Father's Signature

Date

Mother's Signature

Date

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

**PROVIDENCE CHRISTIAN SCHOOL
2010-11 TUITION SCHEDULE**

Please fill in and **return top portion** with your enrollment forms

Bill to: _____ 1) _____
 _____ 2) _____
 _____ 3) _____

	TUITION FOR THE YEAR	12 MONTHLY PAYMENTS JUNE 1 THRU MAY 1
PRE K3 - THREE HALF DAYS M,W,F 8:15 TO 12:30	\$2,580	\$215
PRE K3 - THREE FULL DAYS M THRU F 8:15 TO 3:15	\$3,480	\$290
PRE K3 - FIVE HALF DAYS M THRU F 8:15 TO 12:30	\$4,296	\$358
PRE K3 - FIVE FULL DAYS M THRU F 8:15 TO 3:15	\$5,820	\$485
PRE K-4 VPK (ONLY) M THRU F 8:15 TO 11:40	\$2,562 (subject to changes from VPK)	Paid by VPK if child is eligible No other fees apply
PRE K-4 FULL TIME M thru F 8:15 TO 3:15	\$5,820 less VPK = \$3,258	\$485 less VPK = \$271.50
KINDERGARTEN	\$5,820	\$485
ELEMENTARY GRADES	\$6,096	\$508
MIDDLE SCHOOL GRADES	\$6,288	\$524

You may be eligible for one of the following discounts. Please check any that apply:

- PAY IN FULL - \$100 discount off total tuition for the year - total tuition must be paid JUNE 1
- MULTIPLE STUDENTS - \$100 discount off each additional child enrolled at PCS or in another Christian school grade that PCS does not offer

List child & school _____

- FULL TIME PASTOR - 20% off tuition (no other discounts apply)

OTHER FEES (Fees apply to all students except VPK ONLY students):

Registration: \$200 for first student, \$125 for each additional student in same family
 Technology Fee: \$100 for one child, \$125 for two children, \$150 for 3 or more children
 Student Fee: \$175 per year, due June 1
 Testing Fee: \$50 per student, payable at time of testing

- * All monthly payments are due on the 1st of the month, June through May.
- * Any payment not received by the 10th of the month will incur a late charge of \$25
- * All accounts which are 60 days past due will result in immediate expulsion of the student(s) in question
- * Parents who withdraw their child from school during the school year are responsible to pay the full tuition for that quarter.

SCHOLARSHIPS:

Application can be made online at <http://www.tuitionaid.com/>. The non-refundable scholarship application fee is \$29 per family and due at the time of application (by credit card). **A student registration form and fee of \$200 must be turned in to the school office before you can apply for scholarship.** (Student registration fees may be returned to scholarship applicants receiving inadequate awards toward tuition.)

PLEASE FILL OUT AND RETURN THIS FORM WITH YOUR ENROLLMENT FORM

All students must have the following forms on file in our office before the first day of school:

1. **A current Florida Certificate of Immunization** (which you may obtain from your doctor or the health department or your child's previous school. We need to have an original blue copy.)
2. **A physical examination**, performed within one year prior to entrance in a Florida school.
3. A copy of the child's **Birth Certificate and Social Security Card**.
4. A copy of one **parent's driver's license**.
5. A copy of the **last report card** from the previous school.

STUDENT RECORDS RELEASE

Providence Christian School

701 Mohawk Parkway, Cape Coral, FL 33914

239-549-8024, FAX: 239-549-4465

**Parents: Please complete this form including the complete address of previous school
Return the completed form to Providence Christian School with application.**

Student's Name: _____ Birth date: _____
Last First Middle

School: _____

Mailing Address: _____
Street/PO Box City State Zip

I give my permission for the release of the following records concerning my child to Providence Christian School.

Parent Signature: _____ Date: _____

FOR OFFICE USE ONLY

Attention Student Records Administrator:

The student listed above has enrolled in grade _____ at Providence Christian School, as of _____.
Please send the following information as soon as possible.

1. Transcript—listing all subjects taken and grades received (including summer school).
2. Withdrawal Grades—if any.
3. Standardized test scores.
4. Psychological reports and discipline/conduct records, including any suspensions.
5. Copy of Birth Certificate.
6. Immunization and Health Records.

Thank you!

Student Records, Providence Christian School