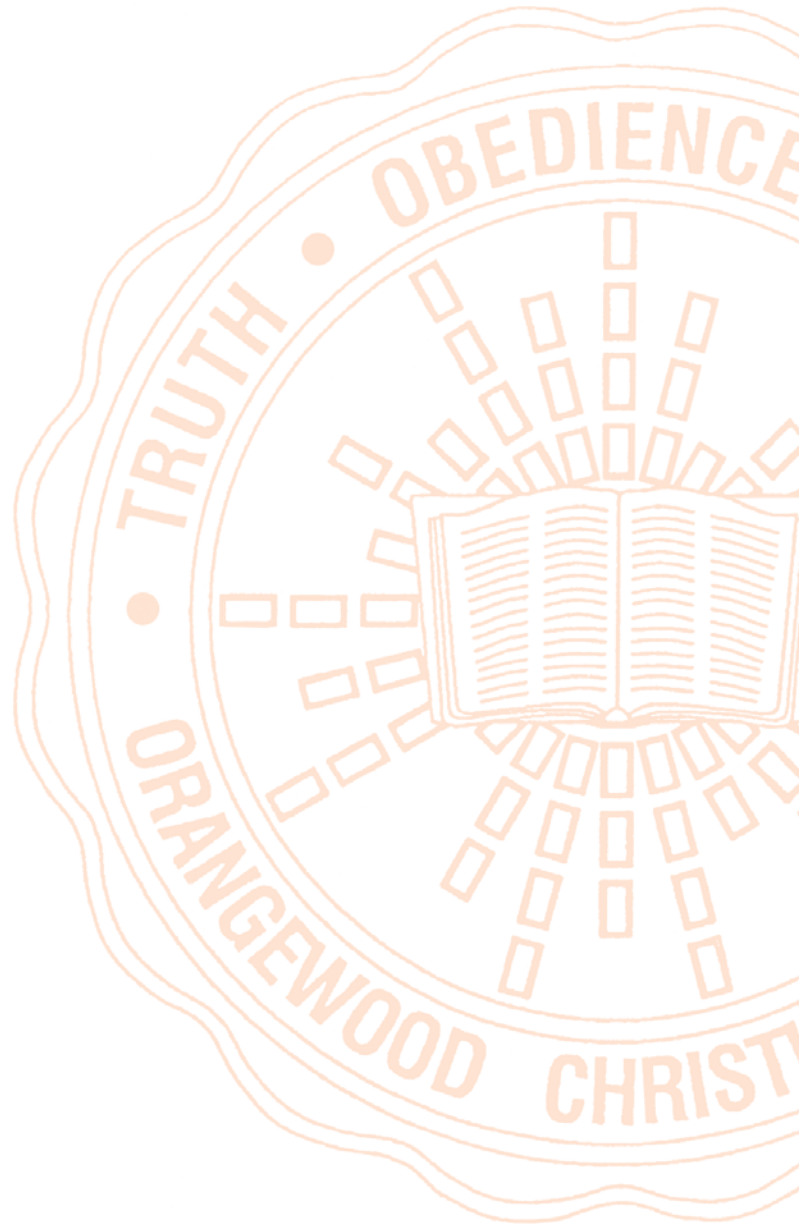


Application

FOR ADMISSION



O!

Orangewood
CHRISTIAN SCHOOL

1221 Trinity Woods Lane, Maitland, FL 32751
P. 407.339.0223 | F. 407.339.4148 | www.orangewoodchristian.org

Application Process

We appreciate your interest in applying to Orangewood Christian School. This packet contains documents needed for every grade level. Please complete those that apply to your child. If at any time during the application process, you have questions, please contact our admissions office (407-339-0223 ext. 222) for assistance.

Your child's application is complete when the following has been turned in:

IF APPLYING FOR PRE-K–1st GRADE

- | | |
|---|--|
| <input type="checkbox"/> Completed Student Application | <input type="checkbox"/> Copy of Report Card |
| <input type="checkbox"/> Application Fee (\$100) – Non-refundable | <input type="checkbox"/> Teacher Reference Form (if previously enrolled in a school program) |
| <input type="checkbox"/> Church Reference Form | <input type="checkbox"/> Test Results (Kindergarten, 1st grade only) |
| <input type="checkbox"/> Birth Certificate | |

IF APPLYING FOR 2nd–5th GRADE

- | | |
|---|--|
| <input type="checkbox"/> Completed Student Application | <input type="checkbox"/> Previous Two Years Report Cards |
| <input type="checkbox"/> Application Fee (\$100) – Non-refundable | <input type="checkbox"/> Teacher Reference Form |
| <input type="checkbox"/> Church Reference Form | <input type="checkbox"/> Standardized Test Results |

IF APPLYING FOR 6th–12th GRADE

- | | |
|---|--|
| <input type="checkbox"/> Completed Student Application | <input type="checkbox"/> Previous Two Years Report Cards |
| <input type="checkbox"/> Application Fee (\$100) – Non-refundable | <input type="checkbox"/> Math Teacher Reference Form |
| <input type="checkbox"/> Church Reference Form | <input type="checkbox"/> English Teacher Reference Form |
| <input type="checkbox"/> Student Questionnaire | <input type="checkbox"/> Standardized Test Results |

**The Admissions Office must receive these before testing or the family conference is scheduled.
Double check for signatures where applicable.**

Family Interview: After you have submitted the above items, you will be contacted to schedule a parent interview (student must attend interview in grades 6-12) with the principal. You will be asked to share about your personal faith and current level of involvement in your church. The principal will briefly explain the purpose of Christian education; provide an overview of our program, and give you time to ask whatever questions you may have concerning the school.

Testing: Entrance testing is administered to assist in determining if OCS can meet the academic needs of your child. The testing fee is non-refundable and payable at the time of testing.

Admissions: After completion of all of the above, you will be notified in writing as to your child's enrollment status. If your child meets the admission requirements, but there are no spaces currently available in the class, you will be given an opportunity to keep your application active in the waiting pool.

Enrollment: Upon acceptance, you will be sent a packet, which must be completed and returned to the Admissions Office, with all applicable fees, before your student is officially enrolled.

Application for Admission



Application Date _____ Application for Admission to Grade _____ In Academic Year _____

APPLICANT

For Pre-K (please check one): 3 day MWF 5 day M-F

Applicant Name _____

Preferred First Name _____

Date of Birth ____/____/____ Gender _____ Social Security # _____ - _____ - _____

Address _____

Home Phone _____ Fax Number _____

Home E-Mail Address _____ Student E-Mail Address _____

FAMILY INFORMATION

Applicant lives with (check all that apply):

- Father Stepfather Other
 Mother Stepmother Other

Check any that apply:

- Father has custody Parents are separated
 Mother has custody Parents are divorced Joint custody

FATHER

Title/Name _____

Address _____

City _____ State _____ Zip _____

Home Telephone _____

Cellular Phone _____

Home E-Mail _____

Occupation/Title _____

Employer _____

Business Telephone _____

Business Fax _____

Business E-Mail _____

MOTHER

Title/Name _____

Address _____

City _____ State _____ Zip _____

Home Telephone _____

Cellular Phone _____

Home E-Mail _____

Occupation/Title _____

Employer _____

Business Telephone _____

Business Fax _____

Business E-Mail _____

Please submit this application as soon as possible, with a non-refundable application fee of \$100.00

STEPFATHER

Title/Name _____

Address _____

City _____ State _____ Zip _____

Home Telephone _____

Cellular Phone _____

Home E-Mail _____

Occupation/Title _____

Employer _____

Business Telephone _____

Business Fax _____

Business E-Mail _____

STEPMOTHER

Title/Name _____

Address _____

City _____ State _____ Zip _____

Home Telephone _____

Cellular Phone _____

Home E-Mail _____

Occupation/Title _____

Employer _____

Business Telephone _____

Business Fax _____

Business E-Mail _____

EDUCATIONAL / BACKGROUND INFORMATION

Applicant's current school _____

School address _____

Telephone _____ Parochial _____ Private _____ Public _____ Years attended _____

Has this student previously attended Orangewood Christian School? _____ Grade(s) _____

Has your child ever repeated a grade? _____ If so, state grade and date: _____

Has your child ever been suspended, expelled or asked to withdraw from school? _____

If yes, please give name of the school and details: _____

Has your child, to your knowledge, been involved with alcohol, drugs, tobacco products, or sexual immorality? _____

If yes, please be prepared to discuss this during your admittance interview.

Why is your child withdrawing from his/her present school? _____

Is your child eligible to re-enter his/her present school? ____yes ____no

Why have you selected Orangewood Christian School for your child's education? _____

Has this child ever been evaluated for academic, behavior, emotional or attention difficulties by a school official, psychologist, physician or other professional? _____

If yes, please attach a copy of the evaluation report and /or diagnostic results to this application.

Does your child take any prescription medication daily? _____ If yes, please describe: _____

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

Name _____ Age/Grade _____ School _____

Name _____ Age/Grade _____ School _____

Name _____ Age/Grade _____ School _____

Statement of Faith

My signature on the last page signifies that our home meets the following criteria:

1. At least one parent is a professing follower of Jesus Christ. If one parent is not a professing follower of Christ, he or she understands, accepts, and supports the school's Christian philosophy of education and will participate whenever possible.
2. At least one parent is an active member and weekly church attendee of a local Christian church which teaches and subscribes to the following:
 - a. God is a Triune God – the Father, Son and Holy Spirit.
 - b. The Bible is God's infallible and authoritative Word to man. It is the standard by which faith and practice are to be measured.
 - c. The chief end of man is to glorify God and enjoy Him forever.
 - d. Man is created in the image of God. Through his relationship to Adam, man is a sinner by nature and thus, is alienated from God.
 - e. Jesus Christ is the only Savior of sinners, the only way to the Father. He died as a substitute for sinners and was raised from the dead so that they might be reconciled to God.
 - f. Eternal life is a free gift that is received through faith in Jesus Christ alone. Eternal life is neither deserved by anyone, nor can it be earned by good deeds.
3. We affirm a commitment to a biblical view of parenting.
4. We affirm our ultimate responsibility to educate our children.
5. We affirm our commitment to the educational philosophy of OCS.
6. We affirm our commitment to biblical communication: following Matthew 18 principles for solving conflicts and refraining from gossip.

Name of Church _____ Denomination _____

Address _____ Minister's Name _____

_____ Telephone _____

Family Devotions: Yes No

Frequency: daily 2-3 a week weekly less

Church Membership: Yes No

Attendance: weekly frequent infrequent

How long have you been attending this church? _____

List the churches your family has previously attended and whether or not you were members.

Name of Church _____ Member? _____

Name of Church _____ Member? _____

Please be certain that your Church Reference Form is completed by your church and returned to the school.

Parent Statement of Faith

Orangewood Christian School is a community of Christian families with common beliefs and goals. At least one parent must profess to be a Christian and give expression to that profession by active membership in a local church. Please describe your profession of faith, including your conversion experience. You may use another page if necessary.

Person filling out form: Father Mother

Parent-School Cooperation Agreement

I agree to fulfill the following expectations:

1. To support the standards of the school in every area of its philosophy and policies – academic, behavioral, spiritual, dress, moral and disciplinary as outlined in the Parent-Student Handbook.
2. To support the school in its attempt to train my child in the Christian faith by example, prayerful encouragement, and weekly attendance at our church.
3. To assume the responsibility for my student’s education by supervising assigned homework, being an encourager, and initiating regular contact with my child’s teachers.
4. To be involved in my child’s education through attendance and participation in the various activities of the school, including all meetings held for parents.
5. To support, to the best of my ability, the school’s entire program through prayer, volunteering time, and participation in the annual fund drive. I support OCS by hereby granting permission for my child to participate in all school-sponsored field trips including transportation to and from these activities.
6. I understand that a completed Church Reference Form is a required part of this application and will cooperate with my church leaders to fulfill this obligation.
7. I understand and agree to substance abuse testing for my child upon the school’s request, and will cover all costs associated with such testing.

I understand that all OCS students are first admitted on probationary status for one hundred and eighty (180) days.

Financial Obligations

- I understand that this contract cannot be considered complete without the application fee (\$100.00 per student).
- Registration and matriculation fees are due upon acceptance to OCS.
- I understand that if I withdraw my student after June 1st, I am responsible to pay the full tuition to the end of that semester, and if withdrawal is after November 1st tuition will be owed through the end of the academic year. In addition, a letter will be sent to those families whose tuition is in arrears after 30 days stating that all past due tuition, late charges and current month’s tuition will be due within 30 days. If an account becomes 60 days delinquent, the school reserves the right to dismiss the student from school.
- Orangewood Christian School reserves the right to refuse any application or dismiss any student, at any time, for any reason. Neither this contract nor payment of fees is considered to be binding upon Orangewood Christian School.
- Please indicate below which payment plan you would like to use:
 - Plan A** Total tuition will be paid in twelve (12) equal payments, **June through May**.
 - Plan B** A 4% discount on tuition will be given if the entire tuition is paid by **June 1st**.

I understand that the testing, application, registration and matriculation fees are non-refundable and non-transferable. Should I withdraw my child from Orangewood Christian School for any reason, none of these fees will be refunded and I am responsible to pay the full tuition to the end of that semester.

Name of person responsible for payment: _____
First Last

Parent Signatures

My signature verifies that I have read and accept all terms of this contract.

Date

Father’s Signature

Date

Mother’s Signature

OCS admits children of believers of any race, color, national or ethnic origin.

Student Questionnaire

This form is only for students entering 6th–12th grade

Student's Name: _____ Grade Entering: _____

1. Why would you like to attend Orangewood Christian School? _____

2. Which academic subjects are of greatest interest to you and why? _____

3. Which academic subjects are of least interest to you and why? _____

4. Describe any creative activities (musical, artistic, literary, dramatic) in which you are involved. _____

5. Describe any athletic activities in which you are involved. _____

6. Describe any church activities in which you are involved. _____

7. Describe any jobs in which you are involved either in or outside of the family. _____

(Continued on next page)

Church Reference Form



Please complete the top portion for your family and give to your pastor or church office to return to Orangewood Christian School.

Church Name _____ Date _____

Parent's Names _____ Phone _____

Address _____

Name(s) & Grade(s) of Children _____

Pastor's Name _____

Our family affirms our commitment to the above named church by attending weekly:

Morning Worship Sunday School Small Groups Youth Group

Please check or list ministries that your family members participate in.

- | | | | |
|-------------------------------------|--|--|---|
| <input type="checkbox"/> Teacher | <input type="checkbox"/> Mission Trips | <input type="checkbox"/> Church Officer | <input type="checkbox"/> Youth Group |
| <input type="checkbox"/> Visitation | <input type="checkbox"/> Nursery | <input type="checkbox"/> Office Assistance | <input type="checkbox"/> Drive Bus or Van |
| <input type="checkbox"/> Usher | <input type="checkbox"/> Parking | <input type="checkbox"/> Music Ministry | <input type="checkbox"/> Church Work Day |
| <input type="checkbox"/> Other | | | |

Does your family attend worship services weekly, 70% of the time? Yes No

CHURCH OFFICE USE ONLY

Dear Pastor,

The forenamed student(s) is a member or weekly attends the church in which you serve. This student is seeking enrollment at Orangewood Christian School, a ministry of Orangewood Presbyterian Church, PCA. OCS serves Christian families who worship the Lord in local Bible believing churches. The school exists to teach students "to know Christ and to make Him known." In order to achieve our purpose, it is essential for each OCS family to be active participants of their church.

Please take a moment and complete this form.

I would like to discuss this family personally rather than complete this form.

Family participation is: Exceptional Good Average Needs Improvement Unsatisfactory Not Known

Parents are members in good standing. Yes No

If no, are they under church discipline? Yes No Years of acquaintance: _____

Pastor's Signature

Phone

Date

Call 407.339.0223 with questions. Thank you for your time. **Please send this completed form to:
Orangewood Christian School, 1221 Trinity Woods Lane, Maitland, FL 32751, Attention: Admissions Office**

Preschool/School Recommendation Form

This form is only for students entering Pre-K–1st grade



Permission is given to release the information below.

Parent's Signature Date

Student's Name: _____ Current Grade: _____

DEAR TEACHER:

The above student has applied to Orangewood Christian School. Please fill out this form and return it by mail to Orangewood Christian School. Thank you for your help.

Please rate the student in the following areas according to this scale:

E—Excellent G—Good S—Satisfactory N—Needs Improvement P—Poor

- | | | |
|------------------------|------------------------------------|------------------------------|
| _____ General attitude | _____ Ability to work on task | _____ Cooperation |
| _____ Effort | _____ Ability to follow directions | _____ Respect for teacher |
| _____ Self help skills | _____ Respect for other students | _____ Language development |
| _____ Math skills | _____ Large motor development | _____ Fine motor development |

Does this student appear to have any learning problems? Yes No I don't know

Does this student appear to have ADHD or ADD? Yes No I don't know

Describe any factors that might affect the student's academic progress.

Describe any factors or discipline problems that affect the student's ability to function well in the classroom.

For what grade or grades did you teach this student? _____

Will this student be ready for kindergarten next fall? Yes No I don't know

School Phone _____ Attendance record: ___Satisfactory ___Unsatisfactory

School Name _____

School Address/City/State/Zip _____

Dates the child attended this school _____

Teacher's Name _____

This information may or may not be discussed with parents.

Teacher's Signature Date

Call 407.339.0223 with questions. Thank you for your time. **Please send this completed form to:
Orangewood Christian School, 1221 Trinity Woods Lane, Maitland, FL 32751, Attention: Admissions Office**

School Recommendation Form

This form is only for students entering 2nd–6th grade.



Permission is given to release the information below.

Parent's Signature Date

Student's Name: _____ Current Grade: _____

DEAR TEACHER:

The above student has applied to Orangewood Christian School. Please fill out this form and return it by mail to Orangewood Christian School. Thank you for your help.

Please rate the student in the following areas according to this scale:

E—Excellent G—Good S—Satisfactory N—Needs Improvement P—Poor

_____ General attitude	_____ Ability to work on task	_____ Effort
_____ Ability to follow directions	_____ Study habits	_____ Cooperation
_____ Respect for teacher	_____ Conduct in class	_____ Respect for other students
_____ Reading	_____ Mathematics	_____ Science
_____ Spelling	_____ Writing	_____ Social Studies

Does this student appear to have any learning problems? Yes No I don't know

Does this student appear to have ADHD or ADD? Yes No I don't know

Describe any factors that might affect the student's academic progress.

Describe any factors or discipline problems that affect the student's ability to function well in the classroom.

For what grade or grades did you teach this student? _____

Will this student be promoted to the next grade? Yes No I don't know

School Phone _____ Attendance record: ___Satisfactory ___Unsatisfactory

School Name _____

School Address/City/State/Zip _____

Dates the child attended this school _____

Teacher's Name _____

This information may or may not be discussed with parents.

Teacher's Signature Date

Call 407.339.0223 with questions. Thank you for your time. **Please send this completed form to:
Orangewood Christian School, 1221 Trinity Woods Lane, Maitland, FL 32751, Attention: Admissions Office**

English Teacher Recommendation Form

This form is only for students entering 7th–12th grade.



Permission is given to release the information below.

Parent's Signature

Date

Student's Name: _____ Current Grade: _____

DEAR ENGLISH TEACHER:

Please complete this form as completely as possible. The applicant's file will not be complete without the return of this form. We appreciate your time and comments.

How long have you known the student? _____

What is your teaching relationship to the student? _____

Based on your personal experience and knowledge of this student, what is your assessment of his/her strengths and inclinations? Please comment on any number marked below 3. Please circle the appropriate response:

	Below Average	Average	Above Average	Outstanding	
Academic Potential	1	2	3	4	_____
Academic Achievement	1	2	3	4	_____
Initiative/Motivation	1	2	3	4	_____
Self-discipline	1	2	3	4	_____
Leadership Potential	1	2	3	4	_____
Personal Integrity	1	2	3	4	_____
Conduct and Discipline	1	2	3	4	_____
Respect for Adults	1	2	3	4	_____
Concern for Others	1	2	3	4	_____
Dependability	1	2	3	4	_____
Overall Recommendation	1	2	3	4	_____

Is this recommendation consistent with his/her report card? Yes No

Please describe this student's strengths and inclinations, including any unique challenges in meeting the needs of this student.

School Name _____ School Phone _____

School Address/City/State/Zip _____

Dates the child attended this school _____

Teacher's Name _____

This information may or may not be discussed with parents.

Teacher's Signature

Date

Call 407.339.0223 with questions. Thank you for your time. **Please send this completed form to:**

Orangewood Christian School, 1221 Trinity Woods Lane, Maitland, FL 32751, Attention: Admissions Office

Math Teacher Recommendation Form

This form is only for students entering 7th–12th grade.



Permission is given to release the information below.

Parent's Signature _____
Date

Student's Name: _____ Current Grade: _____

DEAR MATH TEACHER:

Please complete this form as completely as possible. The applicant's file will not be complete without the return of this form. We appreciate your time and comments.

How long have you known the student? _____

What is your teaching relationship to the student? _____

Based on your personal experience and knowledge of this student, what is your assessment of his/her strengths and inclinations? Please comment on any number marked below 3. Please circle the appropriate response:

	Below Average	Average	Above Average	Outstanding	
Academic Potential	1	2	3	4	_____
Academic Achievement	1	2	3	4	_____
Initiative/Motivation	1	2	3	4	_____
Self-discipline	1	2	3	4	_____
Leadership Potential	1	2	3	4	_____
Personal Integrity	1	2	3	4	_____
Conduct and Discipline	1	2	3	4	_____
Respect for Adults	1	2	3	4	_____
Concern for Others	1	2	3	4	_____
Dependability	1	2	3	4	_____
Overall Recommendation	1	2	3	4	_____

Is this recommendation consistent with his/her report card? Yes No

Please describe this student's strengths and inclinations, including any unique challenges in meeting the needs of this student.

School Name _____ School Phone _____

School Address/City/State/Zip _____

Dates the child attended this school _____

Teacher's Name _____

This information may or may not be discussed with parents.

Teacher's Signature _____
Date

Call 407.339.0223 with questions. Thank you for your time. **Please send this completed form to:
Orangewood Christian School, 1221 Trinity Woods Lane, Maitland, FL 32751, Attention: Admissions Office**



Oranewood
CHRISTIAN SCHOOL

1221 Trinity Woods Lane, Maitland, FL 32751
P. 407.339.0223 | F. 407.339.4148 | www.oranewoodchristian.org