

Crawford Christian Academy

543 Randolph Street, Meadville, PA 16335

Student Application

543 Randolph St., Meadville, PA 16335

Phone: 814-724-6606 Fax: 814-337-4357

E-mail: admin.assistant@crawfordchristianacademy.org

Application Date: _____

STUDENT INFORMATION

NAME: First: _____ Middle: _____ Last: _____

Grade Entering: _____ School Year: _____ Gender: M F Birth Date: _____

Address: _____

City: _____ State: _____ Zip: _____ County: _____

Home Phone: _____ Cell Phone: _____

Student E-mail: _____ (if applicable)

Ethnicity: African American Caucasian Native American Asian Hispanic Other

Last School Attended: _____ School Phone: _____

School Address: _____

Has the student been retained? _____ If yes, what grade? _____

Are there special circumstances regarding the student's health or learning abilities? If yes, please explain:

Will the student need bus transportation? _____

Will the student need before or after-school care? _____ If so, please list approximate days/times:

FAMILY INFORMATION

FATHER'S INFO: First Name: _____ Last Name: _____

Address: _____

City: _____ State: _____ Zip: _____ County: _____

Cell Phone: _____ Work Phone: _____

E-mail: _____ Father's Employer: _____

Crawford Christian Academy

Home of the Chargers

MOTHER'S INFO: First Name: _____ Last Name: _____

Address: _____

City: _____ State: _____ Zip: _____ County: _____

Cell Phone: _____ Work Phone: _____

E-mail: _____ Mother's Employer: _____

Legal Guardian: Both Parents Father Mother Other _____

Student Lives With: _____

Home Church: _____ Attendance: Regular Infrequent No Attendance

Siblings: (include name, age and school)

Preferred Emergency Call #: _____ Referred by: _____

To assist in planning for grandparents day please provide Grandparents names and addresses:

Name and Address: _____

EMERGENCY INFORMATION

Student's Doctor: _____ Phone _____

Student's Dentist: _____ Phone _____

Medical Insurance Company: _____ Member ID/Group _____

Preferred Hospital: _____ Policy #: _____

Permission to treat: YES NO

List any ongoing medications and dosages your child takes:

List any health problems your child may have — i.e. seizures, diabetes, food allergies, asthma, etc.

EMERGENCY CONTACTS:

List two responsible adults who will assume responsibility for your child in an emergency if parents/guardians cannot be reached. **(Must be someone other than parents.)**

1st Contact _____ Relationship _____ Phone _____

2nd Contact _____ Relationship _____ Phone _____

PICK-UP INFORMATION — The following individuals have permission to pick up my child from school.

Name _____ Relationship _____ Phone _____ Anytime At my request

Name _____ Relationship _____ Phone _____ Anytime At my request

Crawford Christian Academy

Home of the Chargers

FINANCIAL INFORMATION

- All tuition is handled through the FACTS Tuition Management Program. Please see enclosed form to enroll.
- Please circle how you wish to pay your tuition:

Annual Plan Semester Plan 9 Month Plan 10 Month Plan 12 Month Plan

- A 2% tuition discount applies if full payment is received by August 15 (or at the time of enrollment).

PARENTAL RESPONSIBILITY STATEMENT

1. I am in agreement with the mission and purpose of Crawford Christian Academy and wish to have my children educated accordingly.
2. The school reserves the right to place my child at the appropriate grade level.
3. The school reserves the right to dismiss any student who does not cooperate or who interferes with the educational process.
4. I will support the policies and procedures of CCA as they are stated in the Student/Parent Handbook.
5. I agree to pay all tuition, fees and other financial obligations to Crawford Christian Academy on the established contracted day.
6. If I become dissatisfied with the school in any respect, I will seek to resolve the matter with the appropriate persons involved rather than begin spreading criticism or holding a negative attitude in my heart.
7. If it is determined that information given in this application is inaccurate or incomplete, then the administration reserves the right to dismiss my child.

Signature of Parent/Guardian _____ Date _____

Printed Name _____

BIBLICAL-MORALITY POLICY STATEMENT

Crawford Christian Academy (CCA) is a uniquely religious, educational institution that seeks to provide a quality education in a distinct Christian environment. One of the goals of CCA is to work with parents and guardians to train Christian young men and women to be salt and light in their communities. CCA believes that the Bible is the inspired Word of God and sets forth absolute truth by which Christians are to live. CCA expects and requires that both students and parents will support the school in its distinct mission and in its biblical beliefs. In relying on the teachings of Scripture, CCA believes that the Bible prohibits sexual immorality of any type, including but not limited to pornography, homosexuality, or any other sexual activity outside the marriage of one man and one woman. On those occasions in which a particular home or student is acting counter to or in opposition to the biblical beliefs and lifestyle that the school teaches, the school reserves the right, in its sole discretion, to refuse admission to an applicant or to discontinue enrollment of a current student. This includes, but is not limited to, living in, condoning, or supporting any form of sexual immorality; practicing or promotion a homosexual lifestyle or alternative gender identity; or otherwise having the inability to support the moral principles of the school as stated in the handbook. I have read and understand the school's Biblical-Morality Policy.

Signature of Parent/Guardian _____ Date _____

Printed Name _____

Crawford Christian Academy

Home of the Chargers

STATEMENT OF FAITH

- WE BELIEVE one God eternally exists in three persons: Father, Son, and Holy Spirit (John 1:1; Acts 5:3-4; Matthew 3:16, 28:18, 20)
- WE BELIEVE the deity and virgin birth of Jesus Christ (Luke 1:30-35)
- WE BELIEVE the Creation and subsequent fall of man (Romans 3:10-12, 23; 5:12)
- WE BELIEVE the redemptive work of Christ: His efficacious blood, His death, His burial, bodily resurrection, and ascension (Mark 15:15 – 16:20; Romans 3:24-25)
- WE BELIEVE all who receive by faith alone the Lord Jesus Christ are born again of the Holy Spirit and thereby become children of God (Romans 10:9-10; John 1:12-13; Ephesians 2:1)
- WE BELIEVE the local church was established by Jesus Christ and entrance is based on a public confession of faith and water baptism by immersion (Acts 2:41-47)
- WE BELIEVE the second coming: the pretribulation rapture of the church and the premillennial return of Christ (I Thessalonians 4:13-18; Matthew 24:29-30)
- WE BELIEVE the bodily resurrection of the just and unjust: the everlasting blessedness of the saved and the everlasting, conscious punishment of the lost (Revelation 20:13-15)
- WE BELIEVE God has ordained the family as the foundational institution of human society. It is composed of persons related to one another by marriage, blood, or adoption. Marriage is the uniting of one man and one woman in covenant commitment for a lifetime. (Genesis 2:18-25) It is God's unique gift to reveal the union between Christ and His church and to provide for the man and the woman in marriage the framework for intimate companionship, the channel of sexual expression according to biblical standards, and the means for procreation of the human race. (I Corinthians 6:18, 7:2-5; Hebrews 13:4)
- WE BELIEVE that God wonderfully foreordained and immutably created each person as either male or female in conformity with their biological sex. These two distinct yet complementary genders together reflect the image and nature of God (Genesis 1:26-27). Rejection of one's biological sex is a rejection of the image of God within that person.
- WE BELIEVE the verbal plenary inspiration and inerrancy of Scripture (II Timothy 3:16)

Our Statement of Faith is not exhaustive of all of our beliefs. The Bible, as the inspired and infallible Word of God, speaks with absolute authority regarding the proper conduct of mankind as is the unchanging foundation for all belief and behavior. The Elders of Calvary Baptist Church hold the final interpretive authority on biblical meaning and application with regard to faith, doctrine, policy, practice, and discipline. I have read and understand the above Statement of Faith of Crawford Christian Academy.

Signature of Parent/Guardian _____ Date _____

Printed Name _____

PHOTO RELEASE

I hereby grant permission for CCA to photograph my son/daughter for possible use in promotional materials. In addition, I grant CCA, its employees and staff, the irrevocable right and license to use the likeness of my son/daughter on photographs; to crop such photographs at their discretion; to incorporate such photographs in promotional projects at their discretion; and to use such photographs or any portion thereof in any manner, including posting on the CCA website as a part of, or connected with any promotional materials. I agree to hold CCA, its employees and staff, harmless against any liability, loss or damage resulting from the use of my child's likeness, and I hereby release and discharge any claims whatsoever in connection with such use of my child's likeness in the above projects. I am signing this release freely and voluntarily, and I am not relying on any inducements, promises, or representations made by CCA. This photo release will be in effect as long as my child is attending CCA

Please select only one:

- _____ YES picture may be used on social media sites, and our school website
- _____ YES picture, but NO name attached with it
- _____ NO Picture or Name listed (social media/newsprint—exception made for yearbook)

_____ Other _____

Crawford Christian Academy

543 Randolph Street, Meadville, PA 16335

Tuition Calculation

FAMILY NAME: _____

School Year: _____

	Kindergarten	Elementary	High School (7-12)
Grade: ____ (K-12) 1 st Child Tuition: _____/yr.	\$2,814	\$4,682	\$4,849
Grade: ____ (K-12) 2 nd Child Tuition: _____/yr.	\$1,695	\$2,760	\$2,902
Grade: ____ (K-12) 3 rd Child Tuition: _____/yr.	\$1,381	\$2,294	\$2,475
Grade: ____ (K-12) 4 th Child Tuition: _____/yr.	\$1,229	\$1,948	\$2,057

* "Minus" any applicable discounts: _____/yr. Total Tuition owed: _____

***Available scholarships will be assessed on a "need" basis and will be determined by June 1st.**

Choose your Payment Plan:

1. **Full payment before August 15th** Total: _____ x 98% (.98) = _____.

(Payment is made either through automatic withdrawal by FACTS or payment to the school directly.)

2. **10 Month Payment Plan** (August through May): \$43.00 Facts **FAMILY** enrollment fee applies

(This fee is taken out of your savings/checking account by FACTS Tuition Management Co.)

Total Tuition: _____/10 = Monthly Payment: _____

3. **12 Month Payment Plan** (July through June): \$43.00 Facts **FAMILY** enrollment fee applies

(This fee is taken out of your savings/checking account by FACTS Tuition Management Co.)

Total Tuition: _____/12 = Monthly Payment: _____

4. Using FACTS Management

- Go to **factsmgmt.com** and click on "Parent Log in."
- Click on "Payment Plans/Financial Aid" from within the drop down box.
- **Current Users**- "Sign in" into your account and submit any changes or updates.
- **NEW USERS** -click on the gray "Register" button, and highlight the "Search for my Institution" box
- Search **area code 814**. Our school name should be the first on the list for you to select.
- Click on our School to be Redirected to the next page.
- Toward the bottom of the next page click on the red selections for **applying for financial aid or setting up a payment plan.**
- **Fill out the Form and submit - CCA Finance office will complete the set up and you will receive a follow up email.**

***** The deadline to apply for financial aid is May 15th*****

***Please also note:** FACTS charges \$25.00 for each unsuccessful payment attempt due to insufficient funds.

PARENT/GUARDIAN AGREEMENT: We (I) understand the investment in our child's/children's education, and are committed to meeting our above obligation to Crawford Christian Academy. We also agree to abide by the financial policies as outlined in the CCA Student and Parent Handbook.

Father or Guardian

Mother or Co-Guardian

Date

Date