



“And all thy children shall be taught of the Lord; and great shall be the peace of thy children.” Isaiah 54:13

**Process for Incoming Students:**

**School Year: 2022 - 2023**

- Parent and Student will be given a tour of the campus ending with an Q and A session
- An option of having the child come to CCS/CCHS for a shadow day will be given
- Parents will meet with Amanda Mathis regarding financial obligations and scholarship opportunities.
- Testing will be set up for the child:
  - The grade level teacher will administer the SAT 10 at the elementary level.
  - Guidance or administration will administer testing to 7<sup>th</sup>-12<sup>th</sup> grade students
  - FSA scores will be accepted if the child received a level 3 or higher
  - Students will be given the opportunity to take the SAT 10 if he/she did not receive a level 3 or higher on the FSA.
  - Students are expected to receive a 60% or higher on the SAT 10 testing but teachers will be permitted to accept students based on his/her professional judgement.
- Administration will set up a meeting with parents to review testing and accept/decline admittance of a student.
- If the student meets academic requirements, parent and student will meet with administration and one member of the Recruitment & Retention Team.
  - The member will review the vision and mission statement closely with the parent and student and explain our expectations with a forty five day Probation Period.
  - Member and administration will answer questions
  - Parent and student will sign handbook acknowledging that they understand expectations of CCS/CCHS

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I \_\_\_\_\_, the parent/legal guardian of \_\_\_\_\_

acknowledge that I have read and understand that my child will be on a 45 day probationary period. The probation includes academic & behavioral actions. If my child falls out of harmony with the guidelines of the Student Honor Code, my child may be expelled from school or asked not to return the following year, at the sole discretion of the administration.

\_\_\_\_\_

Parent/Legal Guardian Signature

\_\_\_\_\_

Date

\_\_\_\_\_

Parent/Legal Guardian Name



Entry Date \_\_\_\_\_

Grade Entering \_\_\_\_\_

(Office use only)

2022-2023

**New Student**

**Application & Registration Form**

**PARENTS: ALL INFORMATION MUST BE PROVIDED FOR THIS FORM TO BE CONSIDERED**

**STUDENT DATA**

<b>SEX</b> <input type="checkbox"/> Male <input type="checkbox"/> Female	<b>Grade Applying For:</b> <input type="checkbox"/> PK3 <input type="checkbox"/> VPK4 <input type="checkbox"/> Kindergarten <input type="checkbox"/> 1 <sup>st</sup> <input type="checkbox"/> 2 <sup>nd</sup> <input type="checkbox"/> 3 <sup>rd</sup> <input type="checkbox"/> 4 <sup>th</sup> <input type="checkbox"/> 5 <sup>th</sup> <input type="checkbox"/> 6 <sup>th</sup> <input type="checkbox"/> 7 <sup>th</sup> <input type="checkbox"/> 8 <sup>th</sup> <input type="checkbox"/> 9 <sup>th</sup> <input type="checkbox"/> 10 <sup>th</sup> <input type="checkbox"/> 11 <sup>th</sup> <input type="checkbox"/> 12 <sup>th</sup>						<b>Desired Entry Date</b> <input type="text"/>
							<b>Students Age</b> <input type="text"/>
<b>STUDENT'S LEGAL NAME</b> <b>FIRST:</b> _____ <b>MIDDLE:</b> _____ <b>LAST:</b> _____			<b>ALSO KNOWN AS</b> <input type="text"/>	<b>STUDENT'S DATE OF BIRTH</b> <b>Month:</b> _____ <b>Day:</b> _____ <b>Year:</b> _____			
			<b>STUDENT'S SOCIAL SECURITY #</b> <input type="text"/>				

<b>STUDENT HOME ADDRESS</b> Street _____ City _____ State _____	<b>MAILING ADDRESS IF DIFFERENT THAN HOME ADDRESS</b> Street _____ City _____ State _____
<b>PLACE OF BIRTH?</b> City _____ State _____ Country _____	<b>UNITED STATES CITIZEN?</b> ↑    Yes <input type="checkbox"/> No <input type="checkbox"/> If no, Citizen of: _____ Country _____ Language Spoken in the home: _____
<b>RACE / ETHNIC ORIGIN</b>	
<input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Bi-racial <input type="checkbox"/> Black or African American – Non Hispanic <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> African <input type="checkbox"/> White – Non Hispanic <input type="checkbox"/> Hispanic or Latino	
<b>Is applicant a sibling of a current CCS student?</b> <input type="checkbox"/> YES <input type="checkbox"/> NO <b>Is applicant a sibling of another new applicant?</b> <input type="checkbox"/> YES <input type="checkbox"/> NO	
Other children in family:	
Name _____ Age _____ Grade _____ School _____	
Name _____ Age _____ Grade _____ School _____	
Name _____ Age _____ Grade _____ School _____	

**IMPORTANT!**

**EVERYONE MUST ANSWER THESE QUESTIONS**

**A. Is there a visitation order or other court order barring either parent from removing the student during the school day or coming into contact with the student?**  Yes  NO

If **YES**, provide school with a copy of court order. †

**B. Do Parents share parental responsibility?**  Yes  NO

If **NO** please provide school with a **copy of court order**.

Parents are:  Together  Separated †  Divorced  Mother Deceased ††  Father Deceased

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

Student lives with:  (Mother & Father)  (Mother only)  (Father only)  (Mother & Stepfather)  
 (Father & Stepmother)  (Guardian(s))  (Foster Parents)  (Grandparent(s))

**Provide the parent/legal guardian information**

**Parent/Guardian #1**

Father/  Stepfather/  Guardian /  Foster Father /  Grandfather

Name: \_\_\_\_\_

**Home Address (If not same as student's)**

Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Employment Company: \_\_\_\_\_ Position/Title: \_\_\_\_\_

Level of Education: \_\_\_\_\_ Christian?  YES  NO

**Parent/Guardian #2**

Mother/  Stepmother/  Guardian /  Foster Mother /  Grandmother

Name: \_\_\_\_\_

**Home Address (If not same as student's)**

Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Employment Company: \_\_\_\_\_ Position/Title: \_\_\_\_\_

Level of Education: \_\_\_\_\_ Christian?  YES  NO

Please list the names of the persons allowed to pick up your child. (Please list any additional person(s) on the back of this form.) If their name is not on the list, they will not be able to pick up or check out your child.

NAME	RELATIONSHIP	PHONE NUMBER

Is Student/Applicant a Christian? Yes  No

Name of Church Family attends: \_\_\_\_\_

Why do you want your child to attend Clewiston Christian School? \_\_\_\_\_

Describe student's interests and /or achievements, such as academic, athletic, artistic, etc. \_\_\_\_\_

List any situations which may have affected the student (family deaths, frequent moving, etc.) \_\_\_\_\_

Has the student ever repeated a grade?  YES  NO Skipped a grade?  YES  NO Which grade? \_\_\_\_\_

If YES, Please Explain

Has the student ever been on probation, suspended, or expelled from any school?  YES  NO

If yes, please attach a statement providing the name of the school and relevant details

### Student Screening

If enrolled at our school, we screen our students once a year. Students Screenings may include vision, hearing, scoliosis, height, and weight. These tests may be given individually or in groups. Parents or guardians, however, have the right to request an exemption in writing.

(This exemption will cover all types of screenings.)

If you **DO NOT** want your child to receive the screenings, write the words "**Do not screen**" in the box below.

Receive non-invasive health screenings pursuant to Florida Statute § 381.0056(7)(d). Non-invasive

**SCHOOL DATA**

Does the family have any outstanding debts with other schools?     YES     NO

Is the student receiving exceptional education service?     YES     NO

(i.e. Gifted, Specific Learning Disabilities, Speech, Other)

*If YES, please include copies of the current I.E.P, Academic evaluations, or psycho- educational testing.*

Name of the last school student attended: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ County \_\_\_\_\_ Country \_\_\_\_\_

Last grade level completed? \_\_\_\_\_ Last attendance date? \_\_\_\_\_

Reason for withdrawing from present school? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Parental Consent for Release of Student Information**

I hereby give permission for the school to use my child’s photograph, video image, writing, voice recording, name, grade level, school name, participation in officially recognized activities and sports, weight and height as a member of an athletic team, dates of attendance, diplomas and awards received, date and place of birth, and most recent previous school attended, in annual yearbooks, graduation programs, playbills, school productions, web sites, etc. and/or similar school or in school approved news media interviews and photographs. I understand without my signature my child’s name and photograph cannot and will not be included in any publications or presentations. I also understand and agree that my child’s medical records or other medical information that I provide to the school, and treatment records or other medical records created by health care personnel at the school will be shared with school officials who have a legitimate educational purpose for accessing such medical records and information.

\_\_\_\_\_  
SIGNATURE OF PARENT/LEGAL GUARDIAN

\_\_\_\_\_  
DATE

**Verification of Student Registration Information**

I verify that the information given on this student registration application is true and accurate to the best of my knowledge.

\_\_\_\_\_  
SIGNATURE OF PARENT/GUARDIAN

\_\_\_\_\_  
DATE

# Financial Aid

*Admissions Office*

## FINANCIAL AID OPTIONS

### Option 1: The Clewiston Christian School Financial Aid Program

Financial Aid at CCS is funded by the gifts of the faithful patrons of the Clewiston Christian School. Financial aid is awarded for those families who demonstrate financial need as evaluated by the **FACTS Grant & Aid Assessment Program**.

Clewiston Christian School seeks to assist families in affording a quality Christian education to the greatest extent possible. In seeking financial aid awards, families should follow the following steps:

Apply online at <https://online.factsmgt.com/ga/aid/inst/3TSWQ>  
\$40.00 fee to be paid online to complete process for FACTS Financial Aid Application

### *You will need*

- **District\_Code:** CLEWIS-FL
- **User Name & Password.** *(if you do not have one you will have to create one. Then follow prompts)*

Despite a strong commitment to our financial aid program, each year the number of students who qualify for financial aid will be more than we can fully support. CCS seeks to distribute financial aid to all those who show a need.

Once all steps have been completed, FACTS will notify Clewiston Christian School of the family's need level. Clewiston Christian School will then make an award based on availability of financial aid funds. Financial need is determined by taking into account many factors including income, net worth, expenses, family size, and the number of children attending tuition-charging schools.

### Option 2: Step Up for Students: CCS school code is **4899**

Step Up for Students offers financial assistance to families who demonstrate financial need.

Step Up for Students seeks to assist families in affording a private education through Florida tax credit scholarships. Individual scholarships in the amount of \$4,880 are given to eligible students. In seeking the Step Up for Students Scholarship awards, families should follow the following steps:

- Apply online at [www.stepupforstudents.org](http://www.stepupforstudents.org) (follow prompts) & Submit all supporting documents  
Step Up for Students will contact you. Then you will follow up by contacting Amanda Mathis in CCS Admissions.

### Option 3: VPK Accepted for students entering K-4 only.

For VPK VOUCHERS parents must complete VPK application on line at: <https://elcofswfl.org/>

### Option 4: Other Options

- Contact your church to see if they might be interested in setting up a financial assistance program for their parishioners whose children attend CCS.
- Contact your business to see if they might be interested in setting up a financial assistance program for their employees whose children attend CCS.
- Contact your local bank to see what lending options they might have to assist you in funding your child's education.
- Contact family members (particularly grand-parents) to see if they might assist.

Please call us at (863) 983-5388, (Option #4) or e-mail us at [amathis@clewistonchristian.org](mailto:amathis@clewistonchristian.org) if you have any questions, would like an appointment, or would like to explore ways to assist in providing financial assistance at Clewiston Christian School.



### The Lewiston Christian School Parent Pledge

I, who have the responsibility to “train up a child in the way he should go” (Proverbs 22:6), recognize that the standards for this training are set forth in God’s Word, the Holy Bible. Knowing also that this training comes by what children learn both at home and school, I pledge to avoid any obvious contradictions in our home by upholding, and never teaching against, the lessons in Godly morality taught at Lewiston Christian School.

I have made enough investigation to be satisfied with the philosophies and policies of the school and do pledge to make them my glad-hearted choice for my child. I have read and will comply with the current Parent-Student Handbook. I understand that one of the school’s objectives is to lead students to a saving knowledge of Christ (Matthew 16:26).

I pledge that if, for any reason, I or my child become dissatisfied with the school, I will withdraw him quietly and without delay. I understand that all students are accepted on a trial basis and a forty-five day Probationary Period.

I hereby invest authority in the school to discipline my child as necessary. I further agree that I will cooperate and discipline my child in the home, as needed.

I pledge my fullest cooperation to keep doctrinal controversy and denominationalism out of the school at all times.

I pledge to assume the responsibility for my child’s education by supervising assigned homework, being an encourager, and initiating regular contact with my child’s teacher.

I give permission for my child to participate in field trips considered part of the normal educational process.

I understand that assessments will be made to cover damage to school property (including breakage of windows, abuse of books, etc.).

I, as a parent of the student, do sincerely give my pledge to all items stated above. I understand that if my child breaks the *CCS Student Honor Code*, my child may be dismissed or expelled from school or asked not to return the following year if my child is out of harmony with the Student Honor Code, the spirit, or the policies of the school whether on or off property as determined at the sole discretion of the administration. Readmission considerations following dismissal will be determined on a case by case basis.

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**Parent Signature**

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**Date**

***Parent or Legal Guardian Must Sign Before Registration is complete.  
I am also enclosing a registration fee.***



## The Clewiston Christian School Student's Honor Code

Because I want to be a person of integrity and honorable character, and I want to be a member of Clewiston Christian School community, I will choose to model my life, both on and off campus, after the example of Jesus Christ.

I make a personal commitment to:

- ❖ Cooperate respectfully with those in authority. Hebrews 13:17
- ❖ Strive for excellence as a student. I Corinthians 10:31, 32, Col. 3:23-24
- ❖ Seek to build relationships with people of high moral character. I Corinthians 15:33, Proverbs 13:20
- ❖ Care for and respect others and their property. Philippians 2:3-4
- ❖ Be truthful, trustworthy, and appropriate in my words and actions. Proverbs 4:24-27, Philippians 4:8
- ❖ Be pure and upright in my relationships, not involving myself in sexual misconduct. I Corinthians 6:18, Romans 13:12-14, Romans 1:24-28, Leviticus 18:21-22, Genesis 2:24, I Corinthians 6:9, I Thessalonians 4:1-8, Hebrews 13:4
- ❖ Choose modes of entertainment that are Christ honoring, avoiding the appearance of evil. Philippians 1:27, Ephesians 5:3-4
- ❖ Refrain from any form of cheating. Proverbs 11:1
- ❖ Totally abstain from the use or possession of tobacco, drugs, or alcohol. I Corinthians 6:19-20, Romans 13:1-2

On my word of honor, I will respect the **CCS Student Honor Code** and I will actively work to uphold its high standards. I shall do my best to be a good citizen of Clewiston Christian School.

I realize that I may be dismissed or expelled from school or asked not to return the following year if I am out of harmony with the Student Honor Code, the spirit, or the policies of the school whether on or off property as determined at the sole discretion of the administration. Readmission considerations following dismissal will be determined on a case by case basis.

\_\_\_\_\_  
Student Signature (Grades K –12)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date

Note: The CCS Student Honor Code is signed by students and their parents in grades K – 12 upon admission to Clewiston Christian School and at the beginning of each year.

Clewiston 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 students at the school. It does not discriminate on the basis of race, color, national and ethnic origin in administration of its educational policies, admission policies, scholarship programs, and athletic and other school-administered programs.





**ADMISSION CHECK LIST FOR NEW PARENTS**

**Registration is NOT valid without a Verification Signature with Date & PAID Registration Fee**

**Please check the box when each has been completed.**

- All items on application have been answered
- Parent Pledge and Student Honor Code have been signed and dated
- Medical Consent form filled out, signed and dated
- Recommendation forms have been submitted to previous school personnel to be mailed directly to CCS
- Double check that Student/Applicant’s Social Security Number is on application

**The following items are attached to the application when returning to Amanda Mathis in Admissions:**

- Registration fee
- I.D. for Parent / Guardian
- Birth Certificate for student (Copy is fine)
- Proper School Entry Health Exam and Immunization forms (HRS 680) and (HRS 3040)
- Current report card (applying for grades 1 – 12)
- Most recent test scores (applying for grades 1 – 12) If scores are not available, testing is required (applying for grades K – 12)
- If testing is required, testing date set? \_\_\_\_\_

**Return all documents to:**

Amanda Mathis, Admissions  
 amathis@clewistonchristian.org  
 601 Caribbean Ave.  
 Clewiston, FL 33440  
 863-983-5388, Option #4 - Phone  
 863-983-5027 - Fax