

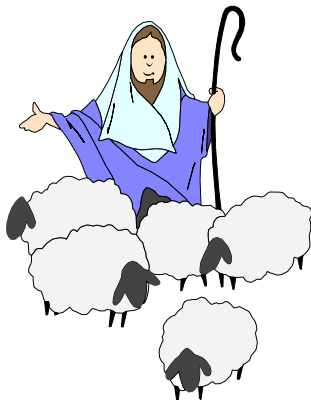
Thank you for your interest in the Hope Christian School's Pre-School/Pre-Kindergarten program. It is our goal to provide the best program possible for your child.

We understand the sacred responsibility to which you have entrusted us. We thank you for the privilege and opportunity to influence children for Jesus Christ and to help them realize their potential.

Please take a moment and look over the information presented in our Pre-School/Pre-Kindergarten Parent/Student Handbook. It will give you a quick overview of our Pre-School and Pre-Kindergarten program, which is designed to be an academic program with an extended enrichment. You will find there are specific times and availability for each age level. We have tried to offer the most flexible schedule we can and still have the quality in our program you want for your child.

Please remember that the Admissions Staff is available to answer your questions and assist you in completing your student's application. We can be reached at (505) 821-2513. We will join you in prayer as you consider Hope the best educational program for your student.

—Sven Hughes, Admissions Director



Pre-School/Pre-Kindergarten ADMISSIONS PACKET 2010-2011



Application

Deadline:

February 9, 2010

(Please note: we will continue to accept applications after this date; however, the likelihood of your student being on the Wait List will greatly increase.)

Play Dates:

A "Play Date" will be scheduled **when the file is complete**. This will be a time of observation and evaluation of your student to determine if he/she is ready for our academic program.

Please contact the Admissions Office if you have a question regarding the status of your student's application.

Applications and fees are applicable for one school year. If a student does not enroll within that time period, a new application and fee are required.

An incomplete application, including related forms, may result in a student not being considered for acceptance.

ADMISSION PROCEDURES

The following is a list of procedures and deadlines that will guide you in applying for enrollment at Hope. Read all information carefully.

CHARACTER REFERENCES

Fill out the top portion and distribute the two Character Reference forms to the following individuals: **(Both references must be on file before the student will be considered for acceptance)**

1. One reference from a **friend or teacher**
2. One reference from a **pastor or Bible teacher**

Please note: References from family members are not accepted.

Have the individual mail or fax the form directly to Hope within five days. (Character references will be matched up with applications on file or held until an application is received. We suggest that you contact the school to verify receipt of all references.)

APPLICATION

Return completed forms and the information listed below to the Admissions Office on or before February 9, 2010.

- ___ 2010-2011 Application for Admission (Completed and signed by Parent/Guardian)
- ___ Copy of current immunization records
- ___ State certified birth certificate (Not a hospital certificate of birth—there is a difference!)
- ___ Recent photograph
- ___ Distribute Character references as required (see above)

PLEASE NOTE: *An incomplete application, including related forms, may result in a student not being considered for acceptance.*

ACCEPTANCE

Letters of acceptance and additional procedures for enrollment will be mailed as soon as possible after selections are made by the Admissions Committee. (The tentative date for letters of acceptance being sent is April 15, with enrollment contracts and fees due by May 1st.)

Hope Christian School admits students of any race, color, and national or ethnic origin.

REGISTRATION FEES:

Once your student has been accepted, there will be a \$250.00 Registration fee due with the Enrollment Contract. This fee is non-refundable and non-transferable.

TUITION

Please contact the Admissions Office for current tuition prices.

DISCOUNTS

There are no early payment discounts. Multi-student discounts apply only when there are two students in a household in Pre-School/Pre-Kindergarten.

Tuition must be paid in full before school starts (according to the date set on the Enrollment Contract) or a F.A.C.T.S. payment program set up as explained below.

MONTHLY PAYMENT PROGRAM**

Hope has a monthly payment program that is processed through a company called F.A.C.T.S. and requires automatic withdrawal from a checking or savings account. Payments are divided into twelve (12) monthly installments payable on the 5th or 20th of the month. The first payment is in June and all payments are completed by May 20th. F.A.C.T.S. contracts initiated after May 1st may require a prepayment of one to four months.

F.A.C.T.S. charges a \$38.00 non-refundable enrollment fee to be automatically withdrawn from the account when the payment agreement form is received.

** Hope Christian School reserves the right to deny tuition payment through the use of the F.A.C.T.S. program.

Hope accepts Visa, MasterCard, or Discover as a method of payment; however there is an additional 2.04% charge for this.

Note: Application forms may be mailed to:

**Admissions Office
Hope Christian School
8005 Louisiana Blvd., NE
Albuquerque, NM 87109**

or brought directly to the Admissions Office between 7:30 AM and 4:00 PM.
(Admissions/Business Office is located on southwest corner of Paseo Del Norte and Louisiana Boulevard.)

HOPE CHRISTIAN SCHOOLS, INC.

**Admissions
(505) 821-2513**

Mailing Address:
8005 Louisiana Blvd., NE
Albuquerque, NM 87109



Hope Christian School
8005 Louisiana Blvd., NE
Albuquerque, NM 87109



For Office Use Only			
New	Ret	Bk	C
ID# _____			
Pd.Reg. _____		Ck# _____	
Contract completed _____			

Pre-School/Pre-Kindergarten Admissions Application 2010-2011

Please type or print ALL information requested.

Pre-School	(must be 3 years old by 9/1/10)
M/W/F ___ full day	OR T/Th ___ full day
___ 1/2 day	___ 1/2 day

Pre-Kindergarten	(must be 4 years old by 9/1/10)
MF ___ full day	
___ half day	

STUDENT'S FULL LEGAL NAME _____ Student Prefers to be called: _____

Last: _____ First: _____ Middle: _____

Student's Home Address _____

Mailing Address (if different) _____

City _____ State _____ Zip _____

Home Phone: _____ Gender: M _____ F _____ Date of Birth _____

Place of Birth (City, County, State) _____

Church Home _____ Pastor _____

Previous School (if applicable) _____ Reason for transfer/leaving _____

Is this student a previous Hope Student? ___yes___no If yes, last year attended _____ Grade _____

If enrolled, what phone number should be listed in the Student Directory? _____

Is this student toilet-trained (no pull-ups?) ___yes___ ___no___

SIBLING INFORMATION

Names of Siblings	As of August, 2010		Current Applicant?	Current Hope Student?	Former Hope Student?	Last Year Attended Hope?
	Age	Grade				
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

PARENT or GUARDIAN INFORMATION

Please check all appropriate boxes: ___parents married ___parents divorced ___parents separated
 ___father deceased ___mother deceased ___father remarried ___mother remarried

FATHER'S NAME _____ Spouse _____ Home Phone _____
 Cell Phone _____
 Employer _____ Occupation _____ Work phone _____
 Mailing Address (if different from student) _____ City, State, Zip _____
 E-mail address #1: _____ E-mail address #2: _____

MOTHER'S NAME _____ Spouse _____ Home Phone _____
 Cell Phone _____
 Employer _____ Occupation _____ Work Phone _____
 Mailing Address (if different from student) _____ City, State, Zip _____
 E-mail address #1: _____ E-mail address #2: _____

Answer ONLY if parents not together:

	Father	Mother	Other	Please List
Applicant lives PRIMARILY with?	_____	_____	_____	_____
Who has legal custody of the student?	_____	_____	_____	_____
Who accepts financial responsibility for this student?	_____	_____	_____	_____
Who should receive correspondence?	_____	_____	_____	_____
Who should have access to review info on-line?	_____	_____	_____	_____



EMERGENCY CONTACTS:

PERSONS, OTHER THAN PARENTS/LEGAL GUARDIANS, TO BE CONTACTED IN CASE OF EMERGENCY: List at least two; must be local and from separate households. Additional contacts may be listed on separate sheet.

Name	Relationship	Home	Cell	Work
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

ACCIDENT INSURANCE COVERAGE/MEDICAL INFORMATION:

AROUND-THE-CLOCK (24-HOUR) ACCIDENT INSURANCE COVERAGE IS REQUIRED FOR ALL GRADES. (Student insurance is available through the school if needed.)

Name of Insurance Company _____ Policy # _____ Patient # _____

Doctor's Name _____ Phone # _____ Recommended Hospital _____

Does this student have any medical problems? _____ If yes, please list: _____

Does this student take any medication on a regular basis? _____ If yes, please list name and reason: _____

Does this student have any allergies? _____ Please list: _____

PARENT'S STATEMENT:

Parents/Guardians of Student: Please give a brief, but comprehensive, statement of your reasons for sending your student(s) to a Christian School.

Parent/Guardian Signature

I, the parent or guardian of the above named student, give permission for him/her to participate in school-sponsored activities away from Hope Christian School premises. I will inform the school by written request should I choose to keep him/her from an activity or trip.

I hereby release Hope Christian School and any representatives of the school from any liability or responsibility for injuries, damages or expenses that may occur to the above named student arising from any school activity and I agree to indemnify and save harmless Hope Christian School and any representatives of the school against any such claim for injuries, damages or expenses made by or on behalf of said student.

By signing this form, I am giving permission for my child to ride to class activities during school hours with a parent volunteer driver. I understand that each parent volunteer driver must fill out a form acknowledging that they have automobile liability insurance and that they are responsible for each child in their vehicle.

I understand in signing this statement that I agree to accept the rules and regulations of the school as stated in the current Pre-School/Pre-Kindergarten Parent/Student Handbook, including the **Standards of Conduct** and **dress code**, and will carefully review these rules, regulations, and standards with my student as needed.

I, the parent or guardian of the above-named student, give my permission for a Hope Christian Schools, Inc., employee or designee to transport my student to a medical facility for emergency treatment.

_____ Date _____
Signature of Parent or Guardian

Please print name

**Hope Christian School
Pre-School/Pre-Kindergarten
Discipline Agreement**

Discipline is an essential teaching part of the classroom and is not viewed as punishment. Discipline is used to help children learn self-control, to help develop their self-esteem and a regard for and acceptance of others in the classroom.

- Discipline will be consistent and age appropriate.
- Discipline will include positive guidance, redirection, and clear limits that encourage the child's ability to become self-disciplined. When redirection is not working at a particular time for a child, time out will be employed. (Time out is a non-solitary separation of one child from the group.)
- Discipline will guide the children to resolve conflicts and will model skills that help children to solve their own problems.
- Physical punishment, humiliation, fright or other coercive strategies are not permitted. Withdrawal of food, rest or bathroom privileges are not permitted. Any type of emotional manipulation is also strictly prohibited.

I, the parent/guardian of the child named in this application, have read the above and agree to support Hope Christian School's Pre-School and Pre-Kindergarten program in its disciplinary policies.

Signature of Parent/Guardian _____ Date _____

PARENT'S PERSONAL TESTIMONY: (FROM EACH PARENT WHERE APPLICABLE) Use separate sheet if necessary. Please give a brief, but comprehensive, personal TESTIMONY (your relationship with Jesus Christ).

Father: _____

Mother: _____

CHECKLIST:

Enclose or attach the following:

1. State certified birth certificate
2. Copy of current shot records
4. Recent Photograph or snapshot

Give character reference forms to individuals indicated in Admissions Procedures, with instructions to return the forms directly to the Admissions Office.

Please make sure your application is complete! An incomplete application may result in a student not being considered for acceptance.

Attach photo of student here
(may be a snapshot)

Please do not leave any items blank!



