

Thank you for your interest in Hope Christian School. We appreciate the opportunity to introduce you to our academically challenging, Christ-centered school. Admission is open to students of any race, color, and national or ethnic origin who are looking for a Christian environment with an emphasis on teaching Biblical principles and truths along with strong academics.

Hope's accreditation in grades K-12 is through the Association of Christian Schools, International (ACSI), the International Christian Accrediting Association (ICAA), AdvancED—Global Standards for Excellence in Education, and the New Mexico Public Education Department. Hope received ICAA's highest status of accreditation, and was privately commended as being one of the largest and overall best Christian schools in the country. This approval means Hope Christian School's credits are recognized by secular and Christian schools across the country, and our graduates have confidence that their diploma will continue to be accepted by those colleges requiring graduation from an accredited secondary institution.

This admission packet has been prepared to answer many of your questions and provide a convenient means to complete your student's application. We regret that we are unable to provide a position for every qualified applicant. Therefore, careful attention to dates and procedures listed in this packet will help to secure a position for your child in next year's class.

The student handbook is a valuable tool in evaluating our school. Curriculum, policies, procedures, and information regarding the daily operations of the school are included. Read it carefully and use it to assist you in making your decision.

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.

—*Gwen Hughes, Admissions Director*

# Admissions Packet 2012-2013



# ADMISSION PROCEDURES

## Testing Dates

**February 11, 2012**

**8:15 – 11:00 AM**

**February 25, 2012**

**8:15 – 11:00 AM**

*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.*

## **STEP 1—DISTRIBUTE CHARACTER REFERENCES**

Character references are included in this packet or may be obtained from our website, [www.hcsnm.org](http://www.hcsnm.org).

Fill out the top portion and distribute the Character Reference forms to the following individuals:

### **Kindergarten through 6th grade - Three references:**

1. **Current teacher**
2. **Additional current teacher (Art, Music, PE) or Recent Teacher**
3. **Pastor or Bible teacher (preferred, but can also be extra-curricular sponsor/instructor)**

### **7th - 12th grade - Four references:**

1. **Current English Teacher**
2. **Current Math Teacher**
3. **Current Science Teacher**
4. **Pastor or Youth Pastor (preferred, but can also be extra-curricular sponsor/instructor)**

**Have the individuals mail, fax or email 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.) **All references must be on file before the interview will be conducted.** We suggest that you contact the school well in advance of the interview date to verify receipt of all references.

## **STEP 2—COMPLETE APPLICATION**

Return the information listed below to the Admissions Office on or before February 7, 2012.

- \_\_\_ 2012-2013 Application for Admission (Completed and signed by Student and Parent/Guardian)
- \_\_\_ Copy of standardized test scores
- \_\_\_ **Students applying for grades 1-9:** current report card from the previous grading period.
- \_\_\_ **Students applying for grades 10-12:** an unofficial transcript showing all high school credits previously received.
- \_\_\_ **Students applying for grades 6-12th:** Read, sign and return Honor Code.
- \_\_\_ Copy of current immunization records
- \_\_\_ State certified birth certificate (Not a hospital certificate of birth—there is a difference!)
- \_\_\_ Recent photograph or snapshot
- \_\_\_ \$75 non-refundable application fee
- \_\_\_ Distribute Character references as required (see above)

Continued



### **STEP 3—TESTING**

A parent/guardian will be contacted for testing and an interview after a completed application and all character references have been received. These interviews are scheduled for January, February, or March.

For grades 2 through 12, mark on the application the desired testing date. Receipt of a completed application and \$75.00 fee (at least four days in advance) will reserve a student's place for testing. Instructions on time and location will be emailed prior to the testing. (Testing dates may be scheduled after February, but the likelihood of being placed on a Wait List may increase. Contact the Admissions Office regarding testing date availability.)

### **STEP 4—INTERVIEW**

A copy of a recent report card and/or credits, standardized test scores, and all necessary character references are **required** to be on file before an interview can be conducted. A **parent or guardian must be present with the student at the time of the interview**. Interviews will be as follows:

#### Grades K-1:

A parent/guardian will be contacted for testing and an interview after a completed application and all character references have been received. These interviews are scheduled for January, February, or March.

#### Grades 2-12:

The opportunity to sign up for an interview is provided on the day of testing and will be conducted at a later date, and only when all character references, report cards and/or credits, and standardized test scores have been received.

NOTE: Testing and an interview are required to complete the application process.

### **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.**

## Tuition and Fees

**Application fee:** \$75

*Due with new student's application. Covers cost of testing. **Non-refundable.***

**New Student Enrollment Fee:** \$200

*Due with tuition contract after student is accepted.*

*One-time fee.  
**Non-refundable.***

*Additional students in same household, \$100.00 each.*

**Yearly Registration Fee:** \$250

*Due with contract after student is accepted.*

***Non-refundable.***

### **Tuition**

Contact the Admissions Office for Tuition rates, discounts and payment policies.

*See Tuition Refund Policy in Student Handbook.*

### **Additional Fees:**

*Incidental fees vary by grade, class, and activity and may include lab fees, special workbooks and some extra-curricular activities. Before and after school supervision*

## **PAYMENT OPTIONS:**

- Pay in full by June 15, 2012 and receive discount (see below)
- Pay in full by August 1, 2012 (no discount)
- Monthly Payment Program (see below)

## **DISCOUNTS**

A **Pre-Payment Discount\*** is offered for tuition paid in full and early.

Please Note: To receive the Pre-Payment Discount, tuition must be paid in full by 4:00 PM in the Business Office on or before deadline date (or by midnight on deadline date if paid online). There are no exceptions. Tuition payments mailed, but not received in the Business Office on or before the indicated date, will be computed at the full rate.

\*Pre-payment discounts apply per student and only if tuition is paid in full before the date indicated on the 2012-2013 Tuition and Fees sheet.

A **Multi-Student Discount** is available to families with more than one child, *living in the same household*.

*Please see the 2012-2013 Tuition and Fees sheet for details regarding these discounts.*

## **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, or an automatic charge to a debit/charge card (MasterCard, Discover, or American Express) with additional fee. Payments are divided into twelve (12) monthly installments payable on the 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 approximately a \$38.00 non-refundable enrollment fee to be automatically withdrawn from the account when the payment agreement is completed.

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

## **FINANCIAL AID**

Financial aid is available through our Hope Foundation. Forms are available after January 1st and applications (with all required supplemental information) must be turned into the Admissions Office NO LATER than April 1st. Disbursements are made in late May. Please contact the Admissions Office for additional information or forms.

**Note: Application forms, along with the \$75 non-refundable application fee, may be mailed to the address listed below or brought directly to the Admissions Office between 7:30 AM and 4:00 PM.**

**(Admissions/Business Office is located one block south of Paseo Del Norte off Louisiana Boulevard in the small brown building located on the south side of the Mid-School Building.)**

## **HOPE CHRISTIAN SCHOOLS, INC.**

**Admissions Office  
(505) 821-2513**

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



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

Testing Date: **2nd—12th grade\*** (Check one)

**February 11, 2012**     **February 25, 2012**

\*Kindergarten-1st grade done individually when all three references are returned.

**Admissions Application 2012-2013**

Applying for what grade in 2012-13: \_\_\_\_\_

**STUDENT'S FULL LEGAL NAME**

Student prefers to be called

Last: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_

Student's Home Address \_\_\_\_\_ City \_\_\_\_\_ State/Zip \_\_\_\_\_

Mailing Address (if different) \_\_\_\_\_ City \_\_\_\_\_ State/Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Student's Cell Phone \_\_\_\_\_ Gender: M \_\_\_ F \_\_\_ **Date of Birth** \_\_\_/\_\_\_/\_\_\_

Place of Birth: City \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_

Church Home \_\_\_\_\_ Pastor \_\_\_\_\_

Previous School \_\_\_\_\_ Reason for transfer/leaving \_\_\_\_\_

Student's Interests \_\_\_\_\_ Student email (9th-12th) \_\_\_\_\_

**Has this student ever been a previous :**

Hope Applicant:  yes  no

Hope Student:  yes  no If yes, year/grade attended \_\_\_\_\_

**Sibling Information:**

As of August, 2012

<u>Names of Siblings</u>	<u>Age</u>	<u>Grade</u>	<u>Current Applicant?</u>	<u>Current Hope Student?</u>	<u>Former Hope Student?</u>
_____	_____	_____	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no
_____	_____	_____	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no
_____	_____	_____	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no

**Household 1 defined as the PRIMARY residence of the student. This parent's address should match student's address above.**

**PRIMARY (Household One) INFORMATION:**

**Parent/Guardian One** Relationship to Applicant:  Father  Mother  Grandparent  Guardian  Other: \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_  Mr.  Mrs.  Miss  Ms.  Other: \_\_\_

Custodial rights?  yes  no Financially Responsible?  yes  no Receive Correspondence?  yes  no

Marital Status:  Married  Divorced  Separated  Not Married Church Home:  Same as student Other: \_\_\_\_\_

Email 1: \_\_\_\_\_ Email 2: \_\_\_\_\_

Occupation: \_\_\_\_\_ Job Title: \_\_\_\_\_ Employer: \_\_\_\_\_

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

Highest Level of Education:  HS Graduate  Some College  Degree: \_\_\_\_\_ School Name: \_\_\_\_\_

**Additional Parent/Guardian at student's address:**

**Parent/Guardian Two** Relationship to Applicant:  Father  Mother  Grandparent  Guardian  Other: \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_  Mr.  Mrs.  Miss  Ms.  Other: \_\_\_

Custodial rights?  yes  no Financially Responsible?  yes  no Receive Correspondence?  yes  no

Marital Status:  Married  Divorced  Separated  Not Married Church Home:  Same as student Other: \_\_\_\_\_

Email 1: \_\_\_\_\_ Email 2: \_\_\_\_\_

Occupation: \_\_\_\_\_ Job Title: \_\_\_\_\_ Employer: \_\_\_\_\_

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

Highest Level of Education:  HS Graduate  Some College  Degree: \_\_\_\_\_ School Name: \_\_\_\_\_

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

**Secondary (Household Two) INFORMATION:** (If applicable)

**Other parent, not living in same household with student:**

**Parent/Guardian One** Relationship to Applicant: Father Mother Grandparent Guardian Other: \_\_\_\_\_  
Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_  Mr.  Mrs.  Miss  Ms.  Other: \_\_\_\_  
Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State/Zip \_\_\_\_\_  
Custodial rights? yes no Financially Responsible? yes no Receive Correspondence? yes no  
Marital Status: Married Divorced Separated Not Married Church Home: Same as student Other: \_\_\_\_\_  
Email 1: \_\_\_\_\_ Email 2: \_\_\_\_\_  
Occupation: \_\_\_\_\_ Job Title: \_\_\_\_\_ Employer: \_\_\_\_\_  
Work Phone: \_\_\_\_\_ Cell Phone \_\_\_\_\_ Home Phone: \_\_\_\_\_  
Highest Level of Education:  HS Graduate  Some College  Degree: \_\_\_\_\_ School Name: \_\_\_\_\_

**Parent/Guardian Two** Relationship to Applicant: Father Mother Grandparent Guardian Other: \_\_\_\_\_  
Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_  Mr.  Mrs.  Miss  Ms.  Other: \_\_\_\_  
Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State/Zip \_\_\_\_\_  
Custodial rights? yes no Financially Responsible? yes no Receive Correspondence? yes no  
Marital Status: Married Divorced Separated Not Married Church Home: Same as student Other: \_\_\_\_\_  
Email 1: \_\_\_\_\_ Email 2: \_\_\_\_\_  
Occupation: \_\_\_\_\_ Job Title: \_\_\_\_\_ Employer: \_\_\_\_\_  
Work Phone: \_\_\_\_\_ Cell Phone \_\_\_\_\_ Home Phone: \_\_\_\_\_  
Highest Level of Education:  HS Graduate  Some College  Degree: \_\_\_\_\_ School Name: \_\_\_\_\_

**Medical Information**

**Does this student have any medical conditions?**  yes  no

If yes, please explain: \_\_\_\_\_

**Does this student take any medication (prescribed or OTC) on a regular basis?**  yes  no

If yes, please explain: \_\_\_\_\_

**Does this student have any allergies?**  yes  no

If yes, please explain: \_\_\_\_\_

**Doctor's Name:** \_\_\_\_\_ **Phone #:** \_\_\_\_\_

**Preferred Hospital:** \_\_\_\_\_

**Insurance Information:** Around-the-clock (24-hour) Accident insurance coverage is required for all grades. (A student insurance policy is available through the school if needed)

Insurance Company: \_\_\_\_\_

Group # \_\_\_\_\_ ID# \_\_\_\_\_

## **ALL PARENTS AND STUDENTS:**

All students and parents are required to read the Student Handbook\*, including the "Standards of Conduct/Behavior Code," and to sign an acknowledgment of this reading. The acknowledgments will be placed in each student's permanent file. (Exception: If students are too young to read, parents should explain the contents as appropriate.) We expect our students to be good examples of proper Christian behavior both on and off campus. Any violation of these standards, on or off campus, is grounds for suspension or dismissal from school with tuition refund penalties. (See Tuition Refund Policy below.)

### **Student Signature (Required for students applying for 2nd-12th grade)**

I, the undersigned student, take responsibility for obtaining the current Student Handbook\* to familiarize myself with the information contained therein, including the Standards of Conduct/Behavior Code and dress code, and agree to abide by all the rules, regulations, and standards of Hope Christian School and fully understand the discipline policies for failure to comply.

Student's Signature \_\_\_\_\_ Date \_\_\_\_\_

### **Student Signature (Required for students applying for 6th-12th grade)**

I, the undersigned student, take responsibility for obtaining the current HONOR CODE and to read and sign said Honor Code, and agree to abide by all the items listed in the Honor Code. I also fully understand the discipline policies for failure to comply to said Honor Code.

Student's Signature \_\_\_\_\_ Date \_\_\_\_\_

### **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 Schools, Inc., 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 Schools, Inc., 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 Schools, Inc., 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 take responsibility for obtaining the current Student Handbook\* to familiarize myself with the information contained therein, to accept the rules and regulations of the school as stated in the current Student Handbook, including the Standards of Conduct/Behavior Code and dress code for grades K-12, 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.

I understand that my child's likeness may be photographed or videotaped by the school in the course of school activities. I hereby give consent for the school to use my child's likeness in promotional and/or advertising materials, including the use of video and still photos on the school's website.

Signature of Parent or Guardian \_\_\_\_\_ Date \_\_\_\_\_

Please print name \_\_\_\_\_

### **Refund Policy**

*Application, enrollment and registration fees are non-refundable and non-transferable from one student to another or from one school year to another.*

*Tuition is non-transferable from one student to another or from one school year to another. Tuition is non-refundable unless one of the following criteria applies:*

A. *If withdrawal occurs before the first day of school, there will be a 100 percent refund of tuition monies paid.*

B. *As of the first day of school, refunds will be given for the following reasons only:*

1) *Medical withdrawal of the student for any physical disability certified to and treated by a legally qualified medical practitioner.*

2) *Job related transfer of parent or guardian beyond a 50-mile radius of the City of Albuquerque. Documentation of such transfer is required if a refund is requested.*

C. *If withdrawal occurs as of or after the first day of school, and one of the above criteria (1 or 2) applies, tuition will be refunded prorated to the end of the current nine-week quarter.*

D. *If the tuition is set up on a F.A.C.T.S. payment program and withdrawal occurs before the end of the third quarter, it is likely there will be a balance due the school and F.A.C.T.S. payments will continue.*

E. *No Refund will be given if monies are owed on any other account. The amount owed must be paid first, or will be deducted from the refund due.*

F. *When a student withdraws from Hope (for any reason), a letter of explanation is required to request any refund which applies.*

\*(Available online at [www.hcsnm.org](http://www.hcsnm.org) under Admissions or may be requested by calling the Admissions Office)

**Student Name:** \_\_\_\_\_ **Applying for grade:** \_\_\_\_\_ **for 2012-13 school year**

**STUDENT'S PERSONAL TESTIMONY (To be completed by students applying for 6th—12th grade)**

Please give a brief, but comprehensive, personal TESTIMONY of your relationship with Jesus Christ). (May be typed and attached if desired.)

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Student Signature: \_\_\_\_\_

**PRIMARY PARENT/GUARDIAN ONE PERSONAL TESTIMONY**

Please give a brief, but comprehensive, personal TESTIMONY of your relationship with Jesus Christ). (May be typed and attached if desired.)

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Signature: \_\_\_\_\_

**PRIMARY PARENT/GUARDIAN TWO PERSONAL TESTIMONY**

Please give a brief, but comprehensive, personal TESTIMONY of your relationship with Jesus Christ). (May be typed and attached if desired.)

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Signature: \_\_\_\_\_

For the purpose of requesting official transcripts, test scores, etc., please complete the following:

School currently attending (or last attended):

\_\_\_\_\_

Address:

\_\_\_\_\_

City, State Zip:

\_\_\_\_\_

School Phone Number:

\_\_\_\_\_

*Public schools often forward records to the next school (i.e., elementary to mid-school, or mid-school to high school) in their district. Because of this, we need the following information if your student is applying for 6th or 9th grade.*

School scheduled to attend for 2012-13 (if different):

\_\_\_\_\_

Address:

\_\_\_\_\_

City, State Zip:

\_\_\_\_\_

School Phone Number:

\_\_\_\_\_

Student Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Student's Address: \_\_\_\_\_ City: \_\_\_\_\_ State/Zip: \_\_\_\_\_

Parent or Guardian signature: \_\_\_\_\_

**Emergency Contact Information**

Persons, OTHER THAN THOSE LISTED previously, to be contacted in case of emergency: List at least two, must be local and from separate households.

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

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

Checklist: Enclose or attach the following:

1. State certified birth certificate
2. Copy of current shot records
3. Students applying for
  - Grades 1-9: Copy of most recent report card
  - Grades 10-12: Complete **U**nofficial transcript
  - Grades 6-12: signed Honor Code
4. Copy of standardized test scores
5. Recent photograph or snapshot
6. Non-refundable application fee

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

Tape photo or snapshot of student here

Name (Last, First, Middle) \_\_\_\_\_

Grade \_\_\_\_\_ App # \_\_\_\_\_

Address \_\_\_\_\_

Email Address \_\_\_\_\_

Emerg Contacts \_\_\_\_\_

Insurance Info \_\_\_\_\_

Medical Information \_\_\_\_\_

Parent Personal Testimony \_\_\_\_\_ Mother \_\_\_\_\_ Father \_\_\_\_\_

Student's Personal Testimony (6th—12th) \_\_\_\_\_

Student Signature \_\_\_\_\_

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

Honor Code Signed (6-12th) \_\_\_\_\_

Photo \_\_\_\_\_

Release \_\_\_\_\_

Immunization Record \_\_\_\_\_

Birth Certificate \_\_\_\_\_

Grades \_\_\_\_\_

1st—9th Report Card \_\_\_\_\_

10th—12th Transcript \_\_\_\_\_

Standardized Test Scores \_\_\_\_\_

Character Ref (K-6th) \_\_\_\_\_ Teacher \_\_\_\_\_ Teacher \_\_\_\_\_ Pastor \_\_\_\_\_

Character Ref (7th-12th) \_\_\_\_\_ Math \_\_\_\_\_ Eng \_\_\_\_\_ Sci \_\_\_\_\_ Pastor \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Enrollment Paid \_\_\_\_\_ Plan 1 2 3 4

Acpt: A N AW

\_\_\_\_ Ltr mailed Date: \_\_\_\_\_

\_\_\_\_ Ltr emailed Date: \_\_\_\_\_

Conditions: \_\_\_\_\_

New <input type="checkbox"/>	Ret <input type="checkbox"/>	Initials _____
ID# _____		
Pd. Appl. Fee _____	CK# _____	

I certify that I have witnessed and reviewed the original Birth Certificate for:	
D.O.B. _____	_____
Signature: _____	_____

Test:
Feb 11 _____ Feb 25 _____ or _____
Interview Date: _____

English Reading Program
_____ M H

For office use only