

DREAM CENTER CHRISTIAN ACADEMY

2125 ROCKBRIDGE ROAD SW. STONE MOUNTAIN GA 30087/ 770-414-8272/ www.njdreamcenter.org

STUDENT APPLICATION

GENERAL INFORMATION

Payment Plan: Full Payment Aftercare: Yes

Application Type: Sibling New Student Staff (Full Time Part Time

Sex: Male Female

Grade Applying to: _____

() I do not give permission for information to be printed in school directory.

Last Name: _____ First: _____

Middle: _____ Preferred Name: _____

Street Address: _____

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

Home Phone: (____) _____ - _____ Guardian Email Address: _____

Birth: ____ mo. ____ day ____ yr. Student Social Security Number: _____ - _____ - _____

School last attended: _____

Preschool: _____ Days a week attended: _____

OFFICE USE ONLY

Date of Interview: _____

Principal's Approval: _____

Date: _____ Time: _____

Amt. of Check: \$ _____ Ck# _____

Parent Information Mtg: _____

Test Date: _____

Acceptance Date: _____

Waiting Pool: _____

Withdrawal Date: _____

EMERGENCY MEDICAL INFORMATION

Name of Emergency Contact: _____ Phone #: _____ Cell: _____

Contact's Relation to you: () Relative-Relationship: _____ () Friend () Guardian () Other: _____

Applicant's Doctor: _____ Doctor's Phone: _____ Hospital Preference: _____

PARENT/GUARDIAN AND FAMILY INFORMATION

Marital Status: () Married () Widower () Separated () Divorced () Remarried

Father's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Employer's Name: _____

Title: _____ Occupation: _____

Business Phone: _____ Cell: _____

Work Email: _____

Years in High School: _____ Years in College: _____

Lives with student (Y/N) Receives Mail (Y/N) Receives Bill (Y/N)

Marital Status: () Married () Widower () Separated () Divorced () Remarried

Mother's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Employer's Name: _____

Title: _____ Occupation: _____

Business Phone: _____ Cell: _____

Work Email: _____

Years in High School: _____ Years in College: _____

Lives with student (Y/N) Receives Mail (Y/N) Receives Bill (Y/N)

Paternal Grandparents

Grandparent(s): _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Maternal Grandparents

Grandparent(s): _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

List names, ages, grades, and schools attending of all school-aged children in your family:

1. _____ Age: _____ Grade: _____ School: _____

2. _____ Age: _____ Grade: _____ School: _____

3. _____ Age: _____ Grade: _____ School: _____

4. _____ Age: _____ Grade: _____ School: _____

Church Attending: _____ Pastor's Name: _____

Church Member: () Yes () No Attendance: () Regular () Seldom () Never

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FAMILY INFORMATION

To be completed by a parent:

1. What are your goals for your children? _____

2. Share your reasons for applying to DCCA. _____

3. Does your child have any health problems? _____

4. Pre-mature birth (Y/N):_____ If yes, what was the term:_____
5. Does your child have normal or corrected vision? _____
6. Does your child have normal hearing? _____
7. Are you aware of any spiritual, physical, emotional, or academic problem concerning your child?
8. Please attach any diagnostic tests for ADD, ADHD, LD, etc. so we might better assist your child.

9. Other schools your child has attended: _____
10. Has your child ever repeated a grade? _____ If yes, describe which grade and why. _____

11. If your child has had problems in school, please explain: _____

12. Who recommended DCCA to you? _____

GRADES 6-12 STUDENT INFORMATION

To be completed by students applying for grades 6-12:

1. How did you learn about Dream Center Christian Academy? _____

2. Do you desire to come to DCCA? _____ Why or why not? _____

3. Have you ever been on the honor roll? _____ Have you failed a subject? _____ What? _____
4. What is your hardest subject? _____
5. Do you plan to go to college? _____ What are your career plans? _____
6. Are you a Christian? _____ How do you know? _____

7. Do you go to church every Sunday? _____ Attend a youth group? _____ Where? _____
8. Do you sing in the choir? _____ Do you play a musical instrument? _____ What? _____
9. Are you involved in Fine Arts? _____ What? _____
10. What type of music do you enjoy? _____
11. Name two of your favorite musical groups? _____
12. Do you play a sport? _____ What? _____
13. How much time do you spend watching TV? _____
14. Do you have a job after school or weekends? _____ What is it? _____
15. How often do you go to the movies? _____ Name the last three: _____
16. Are most of your friends Christians? _____ Are most of your friends the same age? _____
17. Please circle the appropriate answer. Have you ever used tobacco(yes/no), alcohol(yes/no), and/or drugs(yes/no)? _____
If yes, please write on a separate sheet of paper the circumstances, dates, and current situation.
18. Have you ever been suspended or expelled from school? _____ Why? _____

Please use the space provided to tell us something unique about yourself. _____

Did you receive any help answering the above questions? _____ If yes, who? _____

With my signature below, I certify that I have answered the above questions honestly and completely and have read the Student Handbook (on-line at www.njdreamcenter.org).

Student's Signature _____

Date: _____

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MISSION STATEMENT

"Dream Center Christian Academy is a Christian school with a mission to assist families and their children in their pursuit of excellence Academics, creative fine arts and constructive athletics while instilling biblical values in them so that they will impact their communities for Christ."

YES	NO	
_____	_____	Do you understand and agree with the above Mission Statement of DCCA?
_____	_____	Will one parent attend Parent-Teacher Fellowships?
_____	_____	Has your child had disciplinary difficulty in his/her previous school?
_____	_____	Has your child been suspended or expelled at another school?
_____	_____	Is your child a ward of the court?
_____	_____	Has your child been under the jurisdiction of the court?
_____	_____	Has your child committed a felony?

We certify that the above answers are true and are made with no reservations.

Father's Signature

Mother's Signature

Date: _____

NEW STUDENT APPLICATION PROCESS

The following steps are necessary in order to complete the Admission process.

1. Complete and sign the application. **Both parents are required to sign in two separate places on the application.**
2. Attach a check made out to DCCA for the correct amount. (If selecting full payment, attach the registration fee plus the non-refundable, \$100 application processing fee. If selecting the monthly pay plan, attach the first monthly installment plus the non-refundable, \$100 application processing fee).
3. Include a copy of the student's birth certificate. Must be submitted with the application.
4. Include a copy of the student's current Immunization Record. Must be submitted with the application.
5. Include a copy of previous year and current year report cards.
6. Include current SAT (Stanford Achievement Test) . The application processing fee covers the cost of student testing if needed. In order to register a student for testing, an application and check must be received in the Business Office three days prior to the testing date. Call the school office at (770) 414-8272 to place your student on the testing calendar.
7. Include a completed and signed Transcript Request Form. Records will be requested by DCCA after the completion of the current school year.
8. Return completed application with check attached, to DCCA Business Office.
9. Student Confidential Evaluation (K-5, 1st-5th, or 6th-12th) must be signed by the parent or guardian, dated and sent to your student's current teacher. (Please return form to DCCA business office).
10. Pastor Reference Form must be signed by the parent or guardian, dated and sent to any full-time minister on staff at your church. (Please return form to DCCA business office).
11. At least one parent or guardian must attend a Parent Information Meeting. Attendance is required each year, even if you have attended a previous year meeting.
12. Kindergarten and first grade Student Medical/Immunization Form must be completed and returned by the first day of school. The Student Medical form includes a physical form and an immunization record, which is a Georgia requirement. (This is in addition to the record provided for admissions.
13. 2nd - 12th Grade Student Medical/Immunization Form must be completed and returned with the application. Proof of immunization is a GA requirement in order for a student to attend school.
14. LUNCH: DCCA will be contracting with private caterers for lunch that you have an option to purchase in the future. Meanwhile, we encourage every parent to pack lunch for their child(ren). DCCA however has a concession stand available for students to purchase snacks at specific times.

After completion of all these requirements, an interview will be scheduled with the appropriate principal (Elementary, Middle or High). If you have multiple children applying, the interview will be scheduled with the oldest applicant's principal. Interviews begin in December for Kindergarten. Interviews for 1st through 12th grade usually begin in late January, after the re-enrollment process for current DCCA students is completed.

Upon acceptance to DCCA, TUITION MUST BE PAID IN FULL OR ACCORDING TO ARRANGEMENT

I have read the New Student Application process and will provide all the above items. I understand that the Application cannot be processed if all information is not complete.

Parent's Signature

Date: _____

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Statement of Cooperation

FINANCES: We understand it is necessary that parents pay tuition for the amount stated on the Tuition and Financial Information statement. If tuition payments and fees are not received by the due date of each month, a \$25.00 late charge will be added to the account. *Tuition that becomes 30 days past due will result in the student being withheld from attending school until such amounts due to DCCA are made current.* A fee of \$30.00 will be charged for each returned check. All monthly tuition payments are made at our Business office. We further understand that there are no refunds or transfer of fees to other children or other school years for the Registration Fee. The full month's tuition is due for any month in which the student attends one school day. All fees are due in full and are non-refundable. Refunds are for tuition only, and will be made on accounts that are paid beyond the current month.

SCHOOL ACTIVITIES: We give permission for our child(ren) to take part in any and all school activities, class field trips, including sports and school-sponsored trips away from the school premises, and absolve the school from liability to us or our child because of any injury to us or our child at school or during any school activity. In case of emergency or serious illness, we request the school contact us first. If we are not available, please contact the designated emergency contact. If the emergency contact cannot be reached, the school has my permission to make whatever arrangements deemed necessary for our child(ren)'s treatment. If the emergency is life-threatening and we cannot be reached, the physician has permission to act accordingly absolving the school of any liability. This statement of cooperation will serve as a blanket permission slip from August 1, 2016 to July 30 of the current school year. We likewise, authorize DCCA, or anyone authorized by DCCA, to use and reproduce all audio and video tapes and photographs which DCCA takes of our child(ren) or any family member produced for school literature, advertisements, and promotional purposes without further compensation. All copies, masters, negatives, pictures and proofs shall constitute DCCA property, solely and completely.

DISCIPLINE: We believe discipline is a necessary aspect of our child(ren)'s education. We give permission for our child(ren)'s teacher and/or administration to make and enforce classroom regulations in a manner consistent with Christian principles and discipline as set forth in Scriptures. Detention may be assigned, and transportation will be the responsibility of the parents. Parents will be sent written notice of such assignments. We understand that we have the responsibility to actively support the authority, philosophy, objectives, policies, procedures, and discipline of the school as established by DCCA Management.

PARENTAL COMMITMENT: We understand our child(ren) is accepted on a general probationary status for the first quarter. We agree that we will in no case complain to other parents, but will register only necessary complaints with the teacher or administration following the Matthew 18 principle. We pledge our full cooperation to keep doctrinal controversy out of the school. We have read the student handbook online at www.njdreamcenter.org and agree to abide by its established policies. We agree to support the school with our prayers and positive attitude. We understand that if at any time the school determines, in its sole discretion, that our actions do not support the ministry, or reflect a lack of cooperation and commitment to the home and school working together, the school has the right to request the withdrawal of our child(ren). We understand that DCCA reserves the right to dismiss our student for lack of cooperation on the part of the student, parent and/or guardian.

If parents are separated or divorced, who has legal custody? _____
In the event of sole primary custody, the school requires copies of the custodial legal documents to be provided to the Admissions Office.

FAITH STATEMENT: *I believe in God, the Father almighty, creator of heaven and earth. I believe in Jesus Christ, his only Son, our Lord, who was conceived by the Holy Spirit and born of the virgin Mary. He suffered under Pontius Pilate, was crucified, died, and was buried; he descended to the dead; on the third day he rose again. He ascended into heaven and is seated at the right hand of God the Father. From there he will come to judge the living and the dead. I believe in the Holy Spirit, the holy universal church, the communion of saints, the forgiveness of sins, the resurrection of the body, and the life everlasting. Amen.*

We have read the Application, Student Handbook (on line at www.njdreamcenter.org), Statement of Cooperation and the 20016/07 Tuition and Financial Information statement and hereby agree to abide by their stated policies.

Signature of Father/Guardian

Date

Signature of Mother/Guardian

Date

Dream Center Christian Academy 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, admissions policies, scholarship and loan programs, athletic, and other school-administrated programs.

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TUITION AND FEES

Enrollment fee :

\$100.00 onetime non-refundable fee (due when application is turned in)

Re-Enrollment Fee

\$50.00 (for returning students)

Book/Materials fee

\$300/one time

Tuition

\$400/month (K5-5th grade)

\$450/month (6th-8th grade)

\$475/month (9th-12th grade)

Before care (6:30am-8:30am)

\$25/week

After School (2:30pm-6:30pm)

\$65/week

Before and After package

\$75

PRESCHOOL (9am-1pm)

(Ask for our separate preschool rate sheet)

***All fees apply to school days only. Early release, field trips and special events not included.
See the school office for details***