

# Fishers Christian Academy

9587 East 131<sup>st</sup> Street • Fishers, IN 46038

[www.FishersChristianAcademy.org](http://www.FishersChristianAcademy.org)

(317) 577-1777 / 572-7077

A Ministry of Fishers Baptist Church

Home of the Warriors

## Our Vision:

We seek to train our future leaders in the BASICS to change the world for Christ:  
Bible, Academics, Servitude, Integrity, and Character.



## Our Mission:

Fishers Christian Academy is a Christ-Centered academic institution committed to changing the world by developing Christian servants in character, scholarship, and leadership.

## Our Commitment:

Affordable Christian Education  
Bible Centered Instruction  
Challenging Academics (ABeka)  
Dedicated Loving Teachers

Application for Student Enrollment

2016/2017 School Year



# Fishers Christian Academy

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## Enrollment Application 2017-2018 School Year

What is the native language of the student \_\_\_\_\_  
 What language is spoken most often by the student \_\_\_\_\_  
 What language is spoken by the student at home \_\_\_\_\_

**Notes:**

1. Please fill out the application completely
2. Please fill out a separate *Student Information Form* for each child you are enrolling.
3. Your application must be accompanied by the application fee. See attached schedule. All application fees are non-refundable.

**Ethnicity (Circle one)**

1. American Indian/Alaskan Native
2. Black
3. Asian
4. Hispanic ethnicity and of any race
5. White
6. Multiracial (two or more races)
7. Native Hawaiian or other Pacific Islander

**Student** \_\_\_\_\_

**Parents**

Last Name	First Name	Occupation/Employer	Business Phone/Cell Phone

Address	City	State	Zip Code	Home Phone

Primary E-mail Address: \_\_\_\_\_

Students with (check all that apply):	<input type="checkbox"/> Both Parents	<input type="checkbox"/> Father	<input type="checkbox"/> Mother	<input type="checkbox"/> Guardian
	<input type="checkbox"/> Stepfather	<input type="checkbox"/> Stepmother	<input type="checkbox"/> Other (explain on separate sheet)	

**Siblings in family**

Last Name	First Name	Middle Name	Grade Entering	Male or Female
				M F
				M F
				M F
				M F
				M F

**Medical**

Family Physician	Address	Business Phone

Emergency Contact	Relationship to Student	Home Phone	Business Phone

**Home Church**

Church Name	Address	Name of Pastor	Business Phone

Services You Attend Each Week:	<input type="checkbox"/> Sunday Morning	<input type="checkbox"/> Sunday Evening	<input type="checkbox"/> Mid-Week Service
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**Why Fishers Christian Academy?**

Please state why you would like to send your child(ren) to Fishers Christian Academy.


If your family is new to Fishers Christian Academy, from what source did you come to know about the school?

--

**Personal Testimony**

**Father**

Have you personally received Jesus Christ as your Savior?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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Please relate to us how the Lord has been working in your life over the last year.


**Mother**

Have you personally received Jesus Christ as your Savior?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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Please relate to us how the Lord has been working in your life over the last year.



**Family**

Please explain the importance of the Bible to your faith and in your family life.


**Fishers Christian Academy Statement of Faith**

Fishers Christian Academy Statement of Faith is in accordance with Fishers Baptist Church

**The Scriptures**  
We believe the Holy Scriptures of the Old and New Testaments to be the Bible, as it is in truth, the Word of God... (I Thessalonians 2:13). We believe in verbal, plenary inspiration in the original writings, and God's preservation of His pure words to every generation (II Timothy 3:16, Psalms 12:6-8). The Masoretic Text of the Old Testament and the Received Text of the New Testament (Textus Receptus) are those texts of the original languages we accept and use; the King James Version of the Bible is the only English version we accept and use. The Bible is our sole authority for faith and practice.

**The Godhead**  
We believe in one Triune God, eternally existing in three persons--Father, Son, and Holy Spirit, co-eternal in being, co-identical in nature, co-equal in power and glory, and having the same attributes and perfections (Deuteronomy 6:4; II Corinthians 13:14).

**The Person and Work of Christ**  
We believe that the Lord Jesus Christ, the eternal Son of God, became man, without ceasing to be God, having been conceived by the Holy Spirit and born of the virgin Mary, in order that He might reveal God and redeem sinful men (John 1:1-2, 14; Luke 1:35; Isaiah 9:6; 7:14; Philippians 2:5-8; Galatians 4:4-5).

We believe that the Lord Jesus Christ accomplished our redemption through His finished work on the cross as a representative, vicarious, substitutionary sacrifice; and that our justification is made sure by His literal, physical resurrection from the dead (Romans 3:24-25; I Peter 2:24; Ephesians 1:7; I Peter 1:3-5).

We believe that the Lord Jesus Christ ascended to Heaven, and is now exalted at the right hand of God, where, as our High Priest, He fulfills the ministry of Representative, Intercessor, and Advocate (Acts 1:9-10; Hebrews 9:24, 7:25; Romans 8:34; I John 2:1-2).

**The Person and Work of the Holy Spirit**  
We believe that the Holy Spirit is the Person who reproves the world of sin, of righteousness, and of judgment; and that He is the Supernatural Agent in regeneration, indwelling all believers and sealing them unto the day of redemption (John 16:8-11; II Corinthians 3:6; Romans 8:9; Ephesians 1:13-14).

**Man**  
We believe that man was created in the image and likeness of God, but that in Adam's sin the race fell, inherited a sinful nature, and became alienated from God; and that man is totally depraved, and, of himself, utterly unable to remedy his lost condition (Genesis 1:26-27; Romans 3:22-23; Ephesians 2:1-3, 12). The sacredness of human personality is evident in that God created man in His own image and is mindful of him, and in that Christ died for man; therefore every individual possesses dignity and is worthy of respect and Christian love. (Psalm 8:4-9; Colossians 3:9-11).

**The Way of Salvation**

We believe that the clear message of salvation is repentance toward God and faith toward our Lord Jesus Christ (Acts 20:21). We believe that salvation is "by grace" plus nothing minus nothing. We believe that men are justified by faith alone and are accounted righteous before God only through the merit of our Lord and Saviour Jesus Christ. (Ephesians 2:8-10; John 1:12; I Peter 1:18-19)

We believe that all the redeemed, once saved are kept by God's power and are thus secure in Christ forever. We believe that eternal life is the present possession of every believer (John 6:37-40, 10:27-30; Romans 8:1, 38-39; I Corinthians 1:4-8; I Peter 1:4-5; Jude 1, 2).

### **The Church**

We believe that the New Testament church is a local assembly of baptized believers who have voluntarily joined themselves together to carry out the Great Commission. The Lord is doing His work in this world through local churches. The establishment and continuance of local churches is clearly taught and defined in the New Testament Scriptures (Acts 14:27; 20:17, 28-32; I Timothy 3:1-13; Titus 1:5-11). We believe in the autonomy of the local church free of any external authority or control. Christ is the only head of the church (Acts 13:1-4, 15:19-31, 20:28; Romans 16:1, 4; I Corinthians 3:9,16; 5:4-7,13; I Peter 5:1-4).

### **The Ordinances of the Church**

We recognize the ordinances of baptism by immersion in water and the Lord's Supper as a Scriptural means of testimony for local churches in this age (Matthew. 28:19-20; Acts 2:41-42, 18:18; I Corinthians 11:23-26).

### **Biblical Separation**

We believe that all the saved should live in such a manner as not to bring reproach upon their Savior and Lord; and, that separation from all religious apostasy, all worldly and sinful pleasures, practices and associations is commanded of God (II Timothy 3:1-5; Romans 12:1, 2, 14:13; I John 2:15-17; II John 9-11; II Corinthians 6:14-7:1).

### **The Return of Christ**

We believe the "Blessed Hope" of our Lord's return is literal, personal, visible, imminent, premillennial, and pretribulational. Believers will be caught up to be with the Lord prior to the seven years of tribulation, and at the end of the tribulation Christ will return with His saints to establish His thousand-year reign on the earth. (I Thessalonians 4:13-18; Titus 2:13; I Thessalonians 1:10; Revelation 3:10; Zechariah 14:4-11; Revelation 19:11-16, 20:1-6; Psalm 89:3-4)

### **Our Eternal State**

We believe in the bodily resurrection of all men, the saved to eternal life, and the unsaved to judgment and everlasting punishment (Matthew 25:46; John 5:28, 29, 11:25-26; Revelation 20:5-6, 12-13).

We believe that the souls of the redeemed are, at death, absent from the body and present with the Lord, where in conscious bliss they await the first resurrection, when spirit, soul, and body are reunited to be glorified forever with the Lord (Luke 23:43; Revelation 20:4-6; II Corinthians 5:8; Philippians 1:23, 3:21; I Thessalonians 4:16-17).

We believe that the souls of unbelievers remain, after death, in conscious misery until the second resurrection, when with soul and body reunited they shall appear at the Great White Throne Judgment, and shall be cast into the Lake of Fire, not to be annihilated, but to suffer everlasting, conscious punishment (Luke 16:19-26; Matthew 25:41-46; II Thessalonians 1:7-9; Jude 6-7; Mark 9:43-48; Revelation 20:11-15).

### **Human Sexuality**

We believe that God has commanded that no intimate sexual activity be engaged in outside of a marriage between a man and a woman. We believe that any form of homosexuality, lesbianism, bisexuality, bestiality, incest, fornication, adultery and pornography are sinful perversions of God's gift of sex. We believe that God disapproves of and forbids any attempt to alter one's gender by surgery or appearance (Genesis 2:24; 19:5,13; 26:8-9; Leviticus 8:1-30; Romans 1:26-29; 1 Corinthians 5:1; 6:9; 1 Thessalonians 4:1-8; Hebrews 13:4). We believe that the only Scriptural marriage is the joining of one man and one woman (Genesis 2:24; Romans 7:2; 1 Corinthians 7:10; Ephesians 5:22-23).

## Parent Partner Agreement

We agree with the following statements regarding the application of our child(ren):

- | Yes                      | No                       |   |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | It is our desire to have our child(ren) complete the school year.   |
| <input type="checkbox"/> | <input type="checkbox"/> | We shall endeavor to attend all important meetings of the school.   |
| <input type="checkbox"/> | <input type="checkbox"/> | We will abide by the discipline and regulations of the school board.  |
| <input type="checkbox"/> | <input type="checkbox"/> | We have read the Statement of Faith and agree to support it, and are willing to have our child(ren) trained in accordance with it.  |
| <input type="checkbox"/> | <input type="checkbox"/> | We will read the Parent/Student Handbook for the current school year and will cooperate fully with the policies and regulations spelled out in the handbook.                              |
| <input type="checkbox"/> | <input type="checkbox"/> | Our child(ren) is (are) expected to attend all scheduled field trips and other activities.  |
| <input type="checkbox"/> | <input type="checkbox"/> | The school has the responsibility of placing our child(ren) in the proper grade.  |
| <input type="checkbox"/> | <input type="checkbox"/> | We will cooperate in making regular tuition payments, offering practical help, being faithful in Prayer for FCA and our child(ren), and offering special gifts upon the Lord's leading.   |
| <input type="checkbox"/> | <input type="checkbox"/> | We understand that the school reserves the right to dismiss any student who does not respect its spiritual and behavioral standards or who does not cooperate in the educational process. |
| <input type="checkbox"/> | <input type="checkbox"/> | We agree to partner with FCA through communicating openly with the staff, supporting the policies, and encouraging our child(ren) to adhere to the FCA standards.                         |

Signed,

\_\_\_\_\_

Father

\_\_\_\_\_

Mother

\_\_\_\_\_

Date

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For Office

Use Only

Date Rec. \_\_\_\_\_

Appl. Fee \_\_\_\_\_

Check # \_\_\_\_\_

## Student Information Form 2017-2018 School Year

### Student

Students Last Name	First Name	Middle Name	Goes By

Social Sec. #	Date of Birth (M/D/Y)	Sex
		M F

Parents' Full Name(s):

Grade Requested (circle one): K2 K3 K4 K5 1<sup>st</sup> 2<sup>nd</sup> 3<sup>rd</sup> 4<sup>th</sup> 5<sup>th</sup> 6<sup>th</sup> 7<sup>th</sup> 8<sup>th</sup> 9<sup>th</sup> 10<sup>th</sup> 11<sup>th</sup> 12<sup>th</sup>

School student would be attending if not attending FCA:

Name of public school district in which students resides:

Name and address of last school attended (for request of records):

**PARENT QUESTIONNAIRE:** (Attach additional sheets if necessary.)

Why do you want to send your child to Fishers Christian Academy?

What are your child's greatest strengths?


What are your child's greatest needs in the following areas?

Spiritual	
Behavioral	
Social	
Emotional	

Is the student taking any long-term prescription medication? If so, what type of medication?


Explain any special medical or physical information or instructions that the academy should be aware of:


Has the student ever been retained in a grade? \_\_\_\_\_ If yes, state grade, year, and circumstances. \_\_\_\_\_


Has the students ever been recommended for academic or psychological testing? Yes\_\_\_\_\_ No\_\_\_\_\_. Was testing completed for the student? Yes\_\_\_\_\_ No\_\_\_\_\_. Has the student been recommended for placement in a special education program? Yes\_\_\_\_\_ No\_\_\_\_\_. If yes to any of the above questions, please provide details in the space below. (Please submit copies of testing results to the FCA office.)




Has a case conference ever been convened to develop an individualized education plan (IEP) for your child? Yes \_\_\_\_\_ No \_\_\_\_\_  
Has the student ever received accommodations or modifications to a standard school day? Yes \_\_\_\_\_ No \_\_\_\_\_. If yes, please provide details in the space below.


**STUDENT QUESTIONNAIRE (Grades 5-12) To be completed by the student.**

Have you used drugs, alcoholic beverages, or used tobacco within the last 12 months? If yes, please explain.

--

Have you ever had to appear in juvenile court? If yes, please explain.

--

What are your favorite subjects?

What subjects will you need the most help with?

Why do you feel that you should be accepted as a student at Fishers Christian Academy?


Have you ever been suspended, asked to withdraw from school, or expelled? \_\_\_\_\_ If you answered yes to any part of this question, please provide complete details on a separate sheet of paper, including the principal's name and address of the school.


The following questions must be answered by each student applying for the middle school or high school. Your prayerful and truthful answers are appreciated. The answers do not generally affect your acceptance, but rather give us a better understanding of where you are spiritually.

Have you personally received Jesus Christ as your Savior? Yes \_\_\_\_\_ No \_\_\_\_\_

How long have you been a Christian? \_\_\_\_\_



Do you genuinely desire to attend Fishers Christian Academy? Yes \_\_\_\_\_ No \_\_\_\_\_


What are some goals that you have for your life?


Whose idea is it for you to attend Fishers Christian Academy?

--

What behaviors and attitudes will you have to work at changing to become a quality student at Fishers Christian Academy?


What one thing do you wish to avoid at Fishers Christian Academy that you were unable to avoid in your last school?


**AFFIRMATION:**

I hereby affirm: 1. to diligently pursue my school work and complete assignments. 2. to abide by the school's policies and guidelines. 3. to refrain from all un-Christ like behavior 4. to cooperate in all the educational and spiritual programs at FCA 5. that all of the information contained in this application is true and accurate to the best of my knowledge. I understand that providing any false information would be sufficient reason for the rejection of this application or suspension when found out. I further understand that I may be asked for additional written affirmation concerning such items as academic record and health records.

Student Signature	Date	Signature of Father (Guardian)	Date
Fishers Christian Academy 9587 East 131 <sup>st</sup> Street Fishers, IN 46038		Signature of Mother	Date

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

\_\_\_\_\_ Date



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## REPORT OF PHYSICAL EXAMINATION BY FAMILY PHYSICIAN

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Grade \_\_\_\_\_

Address \_\_\_\_\_  
Street City State Zip

### PREVENTIVE MEASURES AND TESTS

Check Here If Records Are Attached \_\_\_\_\_

IPV	1. ___/___/___	2. ___/___/___	3. ___/___/___	4. ___/___/___	5. ___/___/___/___
DPT/DT/Td	1. ___/___/___	2. ___/___/___	3. ___/___/___	4. ___/___/___	5. ___/___/___/___
Hib	1. ___/___/___	2. ___/___/___	3. ___/___/___	4. ___/___/___	
TETANUS	1. ___/___/___	2. ___/___/___			
MEASLES	1. ___/___/___	2. ___/___/___			
MUMPS	1. ___/___/___	2. ___/___/___			
RUBELLA	1. ___/___/___	2. ___/___/___			
Varicella	1. ___/___/___	2. ___/___/___			
PCV	1. ___/___/___	2. ___/___/___	3. ___/___/___	4. ___/___/___	
HBV	1. ___/___/___	2. ___/___/___	3. ___/___/___		

NOTE: To be considered adequately immunized, a child of age twenty-four months should have received four DTP inoculations, three polio inoculations, one inoculation against measles, mumps, and rubella, and at least 3 Hib vaccinations.

The above named child has had the following disease(s):

MEASLES \_\_\_/\_\_\_/\_\_\_ MUMPS \_\_\_/\_\_\_/\_\_\_ CHICKEN POX \_\_\_/\_\_\_/\_\_\_

### MEDICAL EXAMINATION

Please indicate any other health information that would be of importance to the school by completing this form.

HEIGHT & WEIGHT \_\_\_\_\_  
 BLOOD PRESSURE \_\_\_\_\_  
 EYES \_\_\_\_\_  
 EARS \_\_\_\_\_  
 NOSE \_\_\_\_\_  
 TONSILS \_\_\_\_\_  
 TEETH \_\_\_\_\_  
 LYMPH NODES \_\_\_\_\_

HEART \_\_\_\_\_  
 ABDOMEN \_\_\_\_\_  
 GENITO-URINARY \_\_\_\_\_  
 THYROID \_\_\_\_\_  
 ORTHOPEDIC (Structural) \_\_\_\_\_  
 POSTURE \_\_\_\_\_  
 FEET \_\_\_\_\_  
 NERVOUS SYSTEM \_\_\_\_\_

To enable the school to better know the physical history of this child and meet his/her individual needs, we ask you to complete the following:

Has this child ever had any significant disease? Yes\_\_\_ No\_\_\_  
If yes, what? \_\_\_\_\_ Date\_\_\_\_\_

Has this child ever had surgery? Yes\_\_\_ No\_\_\_  
If yes, what type of surgery? \_\_\_\_\_ Date\_\_\_\_\_

Has this child been hospitalized for any reason? Yes\_\_\_ No\_\_\_  
If yes, what reason? \_\_\_\_\_ Date\_\_\_\_\_  
Where\_\_\_\_\_

Has this child any physical condition the school should know about? Yes\_\_\_ No\_\_\_  
If yes, what \_\_\_\_\_  
Does this child have any special needs because of this condition? \_\_\_\_\_  
\_\_\_\_\_

Is this child able to participate in the regular physical education program of the school? Yes\_\_\_ No\_\_\_

Please list any restrictions from the normal physical education program or any differences in the school program for this child. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please describe in more detail any positive findings. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Additional remarks: \_\_\_\_\_  
\_\_\_\_\_

I have completed a physical for this child and find that he/she may participate in \_\_\_\_\_ sport.

Physician's Name (PRINTED) \_\_\_\_\_

Address \_\_\_\_\_  
Street City State Zip

\*Physician's Signature \_\_\_\_\_ Date\_\_\_\_\_

\*Above information must be certified by signature of a duly licensed physician.



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## Dress Code

2017-2018 School Year

### Girls

**K-5 through 6<sup>th</sup> grade:** Uniform must be worn during school hours. PE uniform is sneakers, culottes, and shirt. White tights (no design, not sheer or skin tone) or white knee-high socks must be worn. Jewelry, nylons and makeup are not permitted.

**7<sup>th</sup> through 12<sup>th</sup> grade:** Uniform must be worn during school hours. PE uniform is sneakers, culottes, and shirt. During regular school hours nylons must be worn. No socks are permitted. Makeup and nail polish are permitted only when worn moderately and conservative colors are used (no dark colors are allowed). A moderate amount of jewelry is permitted. Earrings should be no more than one inch in length or width. No more than one earring may be worn in each ear (it must be worn in earlobe only). No more than one ring may be worn on one hand. No ankle bracelets, toe rings, or body piercings are permitted. No “noisy” jewelry may be worn to school.

**ALL GIRLS:** No coats or jackets are to be worn in class. A uniform cardigan sweater or fleece jacket may be worn. Black shoes must be worn as part of the uniform. Sneakers may be permitted for certain activities. No extreme hair styles are permitted while in school.

### BOYS

**K-5 through 12<sup>th</sup> grade:** Uniform must be worn during school hours. Shirt must be tucked in at all times. Black shoes, dark socks, and belt must be worn as part of the uniform. PE uniform is sneakers, running pants, and T-shirt. The following items are not permitted at any time during class hours: white socks, sneakers, hats, bracelets, earrings, nose rings, or necklaces. School rings and watches are permitted. No coats or jackets are to be worn in class. A uniform fleece jacket or cardigan sweater may be worn.

**HAIR:** Boys hair must be neatly trimmed. Hair must not touch the collar or ears. Sideburns may be no longer than the middle of the ear. Hair is to be tapered in the back and on the sides. No facial hair is permitted. No “faddish” styles or perms are permitted.

\*\*Fishers Christian Academy reserves the right to change the dress code at any time\*\*



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## MEDICAL AID RELEASE FORM

Date \_\_\_\_\_

Student Name \_\_\_\_\_ Age \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Father's Name \_\_\_\_\_ Emergency # \_\_\_\_\_

Mother's Name \_\_\_\_\_ Emergency # \_\_\_\_\_

### Medical History

Does your child take prescribed medication? If so, please explain here:

\_\_\_\_\_

Has your child ever been previously hospitalized? \_\_\_\_\_

Is your child allergic to anything? If so, please list \_\_\_\_\_

Has your child previously had any diseases or illnesses? \_\_\_\_\_

Does your child have any physical handicaps? \_\_\_\_\_

Is your child under the care of a doctor? \_\_\_\_\_

Is there any history of mental retardation? \_\_\_\_\_

Does your child have a history of convulsions? \_\_\_\_\_

Does your child have any history of diabetes? \_\_\_\_\_

Does your child have any history of heart trouble? \_\_\_\_\_

In the event that my child is injured during school related activities, I give Fishers Christian Academy permission to administer medical aid. If hospital treatment is necessary, I give my permission for my child to be treated, knowing that I will be notified as soon as possible.

Father's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Mother's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Parents: Please be sure to include an updated copy of your child's immunization records with your application.**



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## Statement of Cooperation

### Student Name:

Fishers Christian Academy was established to assist Christian families that are sincere and committed in raising their children in godly and righteous standards. Parental commitment to Biblical training is a requirement for your child's admission. The child's primary teacher and example is the parent; while Fishers Christian Academy's primary function is to assist the parents in that endeavor.

The primary requirements for student admission are that the child's parents (at least one) are active members of a church of like faith. Parents and child are expected to attend regularly scheduled services.

Everyone expects Fishers Christian Academy to function at a high scriptural, moral, and scholastic level; however, to fail to support the practice and enforcement of godly principles in your home and church life is unacceptable. Parents, students, and families of Fishers Christian Academy are strongly encouraged to support this and to use godly discretion.

Both parents please initial \_\_\_\_ indication that you have read and agree to each item.

( \_\_\_\_\_ , \_\_\_\_\_ ) I will pray for the ministry of Fishers Christian Academy. I will seek the advancement of the school in all areas: spiritually, academically, and physically.

( \_\_\_\_\_ , \_\_\_\_\_ ) I have carefully examined and agree with the Statement of Faith of Fishers Christian Academy and am willing to have our child(ren) trained in accordance with it.

( \_\_\_\_\_ , \_\_\_\_\_ ) I will read the Parent/Student Handbook for the current school year and will cooperate fully with the policies and regulations spelled out in the handbook.

( \_\_\_\_\_ , \_\_\_\_\_ ) I agree to partner with FCA through communicating openly with the staff, supporting the policies, and taking any and all questions and criticisms directly to the school administration for appropriate action, and encouraging our child(ren) to adhere to the FCA standards.

( \_\_\_\_\_ , \_\_\_\_\_ ) I agree to assure that my child(ren) comply with the dress code.

( \_\_\_\_\_ , \_\_\_\_\_ ) I agree to have my child(ren) attend all scheduled classes and will plan all family vacations around the school calendar. I also understand that my child cannot miss more than 10 excused absent days for the school year.

( \_\_\_\_\_ , \_\_\_\_\_ ) I agree to attend two (2) school all-parent meetings (when scheduled) at Fishers Christian Academy (Attended by at least one parent of the family.)

( \_\_\_\_\_ , \_\_\_\_\_ ) I agree to participate in parent teacher conferences as needed.

( \_\_\_\_\_ , \_\_\_\_\_ ) I agree to provide a quiet place for my child/children to do their assigned homework.

( \_\_\_\_\_ , \_\_\_\_\_ ) I agree to check my child's/children homework every night to see that it is completed and sign their assignment book.

( \_\_\_\_\_ , \_\_\_\_\_ ) I agree to monitor the grades my child/children are receiving throughout the marking period.

( \_\_\_\_\_ , \_\_\_\_\_ ) I will pay all of my financial obligations to Fishers Christian Academy on or before the 1<sup>st</sup> day of each month. I recognize that there is a \$35 late fee for tuition not received by the 5th of the month.

( \_\_\_\_\_ , \_\_\_\_\_ ) I will undertake volunteer duties and responsibilities for Fishers Christian Academy as opportunities arise and as God provides opportunity.

( \_\_\_\_\_ , \_\_\_\_\_ ) I will work with other Christians for the advancement of the Lord's work at Fishers Christian Academy and will seek to avoid controversy.

( \_\_\_\_\_ , \_\_\_\_\_ ) I agree that our child(ren) is (are) expected to attend all scheduled field trips and other activities.

( \_\_\_\_\_ , \_\_\_\_\_ ) I realize that the behavior of my child/children both in and away from school and my behavior as a parent reflects upon the testimony of the school and the Lord Jesus Christ and may be cause for dismissal.

( \_\_\_\_\_ , \_\_\_\_\_ ) I agree that my child/children has/have my permission to go on supervised school activities with proper notification.

( \_\_\_\_\_ , \_\_\_\_\_ ) I give my permission for my child/children to be photographed or videotaped by organizations or by the media under the auspices of Fishers Christian Academy, and their pictures to be used on school/church website.

( \_\_\_\_\_ , \_\_\_\_\_ ) I agree that the school has the responsibility of placing our child(ren) in the proper grade.

( \_\_\_\_\_ , \_\_\_\_\_ ) I understand that the school reserves the right to dismiss any student who does not respect the spiritual and behavioral standards or who does not cooperate in the educational process.

We, the Fishers Christian Academy staff, are committed to supporting you, the parent. We ask that you return the same to us. If you have any question or concern, make it known to the Fishers Christian Academy staff without your child's awareness that there is need of consultation. Without this loyalty, your child's education is greatly suppressed. Criticism in the presence of your child(ren) makes a marked difference in their attitude toward authority in the learning process. Please refrain from doing this!

I agree to make an earnest effort to fulfill the above requirements.

Signature of Father \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Signature of Mother \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Signature of Legal Guardian \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_



# Fishers Christian Academy

A Ministry of Fishers Baptist Church

9587 East 131<sup>st</sup> Street • Fishers, IN 46038

[www.FishersChristianAcademy.org](http://www.FishersChristianAcademy.org)

(317) 577-1777 / 572-7077

## Admission Policy 2017-2018

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



Fishers Christian Academy admits students of any race, color, disability, national or ethnic origin to the rights, privileges, programs, or activities generally accorded or made available to students at the school. It further does not discriminate on the basis of race, color, disability, national or ethnic origin in the administration of its educational policies, financial aid program, athletic or other co-curricular school administered programs.

Each student and parent must fully support and cooperate with the Statement of Faith and Policies of Fishers Christian Academy as well as FCA administration, faculty, and staff in order for a child to attend or remain in the school.

Attendance at Fishers Christian Academy is a privilege and not a right, which may be forfeited by any student who does not conform to the standards and regulations of the institution. The academy may request the withdrawal of any student at any time, who in the opinion of the school, does not fit into the spirit of the institution, regardless of whether they conform to the specific rules and regulations of the school.

Students enrolled in Fishers Christian Academy may not at any time participate in smoking, drinking, social dancing, use of narcotics, misuse of a controlled substance, or any type of behavior which is considered to be immoral by the administration of Fishers Christian Academy. This applies to acts committed not only on the school property, but off the property as well. In addition, profanity will not be tolerated and will result in disciplinary action that could include suspension or expulsion.

Fishers Christian Academy reserves the right to implement searches or student's belongings, provided reasonable cause for an investigation exists.

Each parent and guardian agrees that any controversy or claim against Fishers Baptist Church and/or Fishers Christian Academy, its employees or agents, or claim arising during, or out of his child's enrollment, which cannot be resolved within Fishers Baptist Church and/or Fishers Christian Academy, shall be resolved with the assistance of a school-approved professional arbitration agency, through mediation or, as a last resort, through legally binding arbitration, also by the approved arbitration agency. The parent/guardian expressly waives the right to file a lawsuit against Fishers Baptist Church and/or Fishers Christian Academy, its employees or agents, except to enforce a legally binding arbitration decision, and agrees to pay legal fees for the Fishers Baptist Church and/or Fishers Christian Academy, should they not be found at fault.

All policy states herein are subject to change by the School Administration.

Signature of Father \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
Signature of Mother \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
Signature of Legal Guardian \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

NOTE: This Admissions Policy must be signed before an application can be processed.