

APPLICATION FOR  
RE-ADMISSION  
*2017 – 2018 School Year*



***“Discovering Truth, Transforming Minds, Rebirthing a Culture”***



6427 Cliffdale Road  
Fayetteville, NC 28314  
(910) 221-0400  
[www.rccaonline.com](http://www.rccaonline.com)

*Renaissance Classical Christian Academy (RCCA) will not discriminate on the basis of race, color, sex, or ethnic origin in administration of its admissions policies. Renaissance Classical Christian Academy does reserve the right to select students on the basis of academic performance, religious commitment, philosophical compatibility, and willingness to cooperate with RCCA's administration and abide by its policies.*

# Application/Re-Admission Procedure

## General Admission Standards

Renaissance Classical Christian Academy (RCCA) is an expression of the commitment of a body of parents to provide the best possible training and instruction for their children. Our mission is to instill in each student a love for truth, wisdom, discernment, and learning through the use of excellent materials, in an orderly setting, founded on a growing personal knowledge of the Lord Jesus Christ. **As a discipleship school, we require that at least one parent or guardian of each applicant give a credible profession of faith in Jesus Christ as Lord and Savior and be a regular attendee of a Christian church.** Students seeking re-admission are evaluated on the basis of their report cards, references, admission questionnaires, interviews, and potential to perform satisfactorily at RCCA. We are not equipped with the resources required to serve children who are seeking to be admitted into special educational programs. Students who seek re-admission directly following suspension, expulsion, or behavior problems from RCCA or another school will not be accepted until they prove themselves elsewhere. Students with less than a “C” average in their primary academic subjects may have difficulty in attaining a satisfactory level of academic achievement. **The first quarter is considered a trial period for all new and returning students.**

### Application Procedures Checklist

Please keep this checklist and use it for your personal reference. It is the responsibility of the parent to be sure all application materials are completed and received by the admissions office. The admission process for your child cannot proceed until these materials are received. Your application will be processed after the following items are submitted or steps completed:

- Completed Application for Re-Admission
- Registration Fee of \$150. Early Bird Registration discount of \$75 if paid by April 1<sup>st</sup>. *(Not to exceed \$400 for families enrolling multiple children. All fees are non-refundable.)*
- Copies of Standardized Test Scores and Report Cards from the Past Two Years
- Copy of Updated Immunization Record *(Details follow)*
- Copy of Birth Certificate *(All Kindergarten students)*
- Signed Parental Contract *(Page 4 of this application)*
- Student Screening/Testing, if deemed appropriate by the administration *(Scheduled with school office)*
- Parent/Family Interview, if deemed appropriate by the administration *(Scheduled with school office)*

### Admission Status Decisions

Approved: Students approved for re-admission will be notified in writing. The school must receive the non-refundable resource fee within two weeks to hold the student’s place. Ongoing monthly tuition payments are due beginning August 5<sup>th</sup> and occur monthly through May 5<sup>th</sup>. For students accepted after August 5<sup>th</sup>, any catch-up payments are due with registration.

Denied: Students not approved for re-admission will be notified in writing.

### Immediately following notification of your child’s acceptance, please submit:

- Non-refundable resource fee of \$500 for grades Kindergarten – 11<sup>th</sup>. (Early Bird discount of \$50 if paid by May 1<sup>st</sup>)
- Non-refundable lab fee of \$35 for grades 9<sup>th</sup> - 11<sup>th</sup>
- Make tuition payment arrangements in the form of: 1) monthly automatic bank draft of 10 equal payments for tuition beginning August 5th (details at academy office); or 2) payment in full **prior to the first day of school.**

#### 2016-2017 Tuition Rates

Kindergarten	\$4300/year	or	\$430/month in 10 equal payments
1 <sup>st</sup> – 10 <sup>th</sup>	\$4100/year	or	\$410/month in 10 equal payments

- The following records must be received by the first day of school. Upon receipt of registration fees, required forms will be made available to you.
  - Records from your child’s previous school, if necessary
  - Health form completed by child’s physician (including updated immunization records);
  - Emergency contact form / Authorization to pick up form.

**Please retain this page for future reference.**

# Renaissance Classical Christian Academy

6427 Cliffdale Rd., Fayetteville, NC 28314  
 Phone: (910) 221-0400 Fax: (910) 864-5476

## Application for Re-Admission

Academic year: 2017 – 2018  
 Applying for grade: \_\_\_\_\_  
 Application date: \_\_\_\_\_

<b>Office Use Only</b>	_____ <b>Complete</b>
<i>Pre-Admission</i>	
Registration fee rec'd	_____
Interview date	_____
Student screening	_____
<i>Post-Admission</i>	
Accepted	_____ Date _____
Accept letter sent	_____
Resource fee rec'd	_____
School forms rec'd	_____
Health form	_____ NOOform _____
Immunization Record Complete	_____
Allergies	_____
ACH	_____ Extended Care _____

Student's Name: \_\_\_\_\_  
 (Last) (First) (Middle)

Preferred name/nickname: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Sex: \_\_\_\_\_

Student lives with: both parents / mother / father / guardian *(Please circle one)*

Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
 (Street Address) (City/State/Zip)

### Siblings

Name	Age	Present School	Applying to RCCA? (yes/no)

### Parent/Guardian Information

<p><b>Mother/Guardian</b></p> <p>First/last name: _____</p> <p>Relationship to applicant: _____</p> <p>Home address (if different): _____</p> <p>_____</p> <p>Cell phone: _____</p> <p>Work phone: _____</p> <p>Occupation: _____</p> <p>Employer: _____</p> <p>Email: _____</p>	<p><b>Father/Guardian</b></p> <p>First/last name: _____</p> <p>Relationship to applicant: _____</p> <p>Home address (if different): _____</p> <p>_____</p> <p>Cell phone: _____</p> <p>Work phone: _____</p> <p>Occupation: _____</p> <p>Employer: _____</p> <p>Email: _____</p>
<p><b>Current Church Affiliation</b></p> <p>Home church: _____</p> <p>Church address: _____</p> <p>City, State, Zip: _____</p> <p>Pastor's name: _____</p>	<p><b>Current Church Affiliation</b></p> <p>Home church: _____</p> <p>Church address: _____</p> <p>City, State, Zip: _____</p> <p>Pastor's name: _____</p>

## RENAISSANCE CLASSICAL CHRISTIAN ACADEMY GUIDELINES

*Please discuss these guidelines with your child(ren).*

### **Students are expected to:**

- ❑ Maintain a courteous, grateful, respectful, obedient, and cooperative attitude. It is important that they learn to exercise proper restraint and to forgive freely.
- ❑ Work responsibly and independently in the classroom without distracting others.
- ❑ Share, take turns, love, and serve one another.
- ❑ Refrain from teasing, name-calling, bad language, pushing, pulling, and fighting while at work or play.
- ❑ Be punctual and regular in attendance and in all assigned work. Illness, medical appointments, family emergencies, family trips, etc., may be acceptable reasons for absence; whenever planned, these absences should be prearranged through the school office.
- ❑ Remain in school during the entire day unless permission to leave is granted by the office.
- ❑ Remain at home in case of illness until temperature has returned to normal for a period of twenty-four hours and/or all signs of contagion are gone. When antibiotics are prescribed, please remain at home for a full twenty-four hours after first dose is taken.
- ❑ Dress in compliance with the uniform policy; if found to be in violation, accept correction and consequences graciously and respectfully, and correct the error as soon as possible. Keep body clean and well groomed.

### **Parents are asked to:**

- ❑ Foster a courteous, grateful, respectful, obedient, cooperative, forgiving attitude, exercise proper restraint (self-control) in thoughts, words, actions, and attitudes.
- ❑ Nurture habits of punctuality, thoroughness, neatness, honesty, resourcefulness, independent reading, and study.
- ❑ Expect completion of all homework daily, making sure all books and completed homework are returned to school the following day.
- ❑ Support school personnel, programs, policies, and activities with prayer and communication, and serve as a volunteer in various capacities.

### **You may expect your school to:**

- ❑ Clarify to all students our expectations and commend or correct as occasion demands; to the best of our ability to balance justice, mercy, and faithfulness in our dealings with your child (Matthew 23:23).
- ❑ Cooperate with you in every way possible to encourage your child in the development of the above attitudes, habits, and skills.
- ❑ Communicate with you regularly concerning the growth, needs, and accomplishments of your child.

# PARENTAL CONTRACT WITH RENAISSANCE CLASSICAL CHRISTIAN ACADEMY

**I, the undersigned, do hereby commit to the following:**

- ❑ That all the information provided on this application is true and that I have not intentionally withheld or misrepresented any pertinent data.
- ❑ To fulfill my financial obligations to Renaissance Classical Christian Academy, namely:
  - I am responsible for the monthly payment of \_\_\_\_\_ (Tuition) starting on \_\_\_\_\_ and ending on \_\_\_\_\_.
  - I understand that there will be a \$35 fee for any nonpayment due to “Insufficient Funds” received for either checks or bank drafts.
  - In the event that I decide to withdraw, I will, for the school’s benefit, inform the school office in writing concerning my reasons.
  - I am responsible for any and all damages my child may have made to school property.
- ❑ I will fully support and abide by **all** Renaissance Classical Christian Academy policies, including the school uniform policy. I affirm that I have read the Student-Parent Handbook in full.
- ❑ I will support school personnel, programs, policies, and activities with prayer and communication. Furthermore, I will commit to serving as a volunteer in various capacities for a minimum of **10 hours** per family. If I am unable to fulfill my hours of volunteer service, I will be pay a volunteer fee of \$100.
- ❑ I will nurture habits of punctuality, thoroughness, neatness, honesty, resourcefulness, independent reading, and study. I will also expect my child to complete all homework daily and to make sure all books and completed homework are returned to school the following day.
- ❑ I will allow my child to be photographed or videotaped for public relations and/or training purposes.
- ❑ I will direct any grievances, concerns, or issues which I may have through the proper channels, according to the principles outlined in chapter eighteen of the Gospel of Matthew as summarized below.
  - I agree that all persons are to deal with the situation at its source. This usually means initially speaking privately with the person involved in a constructive and supportive attempt to attain clarification or resolution.
  - If, after honest attempts have been made and clarification or resolution has not been satisfactorily reached, then I will proceed to the next level of authority. This generally means speaking with the headmaster. If satisfaction is not reached by this point, then I will proceed to the RCCA School Board by bringing the matter to the board’s attention **in writing**.

I have read the above contract and agree to abide by it while my child is enrolled as a student at Renaissance Classical Christian Academy.

\_\_\_\_\_ (Signature)      \_\_\_\_\_ (Date)      \_\_\_\_\_ (Signature)      \_\_\_\_\_ (Date)

_____ _____	<b>ACCEPTED</b> <b>DENIED</b>	_____ Headmaster Signature	_____ Date
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Date \_\_\_\_\_

## Request for Transcript

Dear Registrar:

The following student(s) have enrolled in our school:

Student's Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Grade: \_\_\_\_\_

School for records request: \_\_\_\_\_

School Address: \_\_\_\_\_

Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

Please forward all records relating to these students:

- ✓ Birth Certificate
- ✓ Immunization Records
- ✓ Psychological Records
- ✓ Transcript or Grades
- ✓ Standardized Test Scores
- ✓ Current Academic Status and Report Card

Thank you for your kind cooperation.

Sincerely yours,

**Ray Hendrickson**  
Headmaster

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*I hereby authorize you to release all student school records (including psychological records, if any) for the above listed students who have enrolled at Renaissance Classical Christian Academy.*

\_\_\_\_\_  
*Signature of Parent or Guardian*

\_\_\_\_\_  
*Date*