



Bible Baptist
CHRISTIAN SCHOOL

2724 Margaret Wallace Road, Matthews, NC 28105
(704) 535-1694 • www.bbcscotts.com

Welcome!

We appreciate your interest in Bible Baptist Christian School. Thank you for taking the time to consider BBCS for your future! We would like to take a moment to share a few things that make BBCS a great school to attend.

Faith

- God's Word is the highest authority for all that we do
- A biblical worldview is taught and emphasized
- Servant leadership skills developed in the students
- Weekly Bible classes and chapels
- A disciplined environment to encourage students to please God with their lives

Academics

- Consistently high standardized test scores
- Advanced academic programs
- Member of the American Association of Christian Schools
- Teachers who take a personal interest in each child in the classroom
- Member of the North Carolina Christian School Association

Extra-Curricular Activities

- Outstanding Fine Arts program including choirs, band, hand bells, speech, and drama
- Jr. High and High School sports team including volleyball, soccer, track, and basketball
- School competitions in Fine Arts, Academic testing, and Journalism
- Community outreach

If you would like to find out more about BBCS, we would be delighted to help you in any way we can. Please take a moment to fill out the enclosed forms and mail them to Bible Baptist Christian School.

Once we receive the information, we will call you to schedule a testing time and an interview. If you have other questions, please do not hesitate to contact us. We count it a privilege to work with you, and we look forward to the opportunity to getting to know you and your family.

Sincerely,

Brad Parker

Brad Parker
Administrator

Bible Baptist Christian School

Admissions Procedure and Policy

Getting Started

We are delighted that you are considering joining Bible Baptist Christian School. We recognize that the school you choose to place your children in is a very important decision. We have designed this document to help you as you make your choice.

Please read the enclosed material in this packet:

- Student Application
- Family Covenant
- Financial Information
- Student Cooperation Agreement (7th – 12th grade)

What's Next?

If you are comfortable with the school's direction and philosophy after reading the enclosed materials, and wish to enroll your child, please complete the student application form, student cooperation agreement (if applicable), and sign the family covenant and send them in with your application fee of \$250.00. Our admissions department will call you for an interview and testing. If the school and the parents are not in agreement on the decision to place the child at BBCS, the application fee will be refunded. Once a child is accepted, the application fee is non-refundable.

Those parents who would like more information before committing to an interview should feel free to visit our campus, take a tour of the facility, and have their questions answered.

Policy

1. All prospective students must be present during the interview with the administrator.
2. Prospective students will be asked to take a placement test at a cost of \$40.00.
3. Final acceptance is based on the interview, testing results, and student application.
4. All new students are accepted on a nine-week trial basis. The student's progress will be evaluated in the areas of academics and character.

Before final acceptance, each family must submit an updated immunization record, Smart Tuition financial agreement form, and have the appropriate transcripts sent to BBCS.

Bible Baptist Christian School

Grades K5-12 Application

2019-2020

Application must be completed in full for consideration for program. Note: birth date cutoff is August 30. Also, please include updated immunization information and birth certificate.

Please circle grade level K 1st 2nd 3rd 4th 5th 6th 7th 8th
 9th 10th 11th 12th

Student's name _____ Gender M / F
Last First Middle (Nickname)

Date of Birth _____ Social Security Number _____
MM / DD / YYYY

Name of last school attended _____

Address of last school attended _____
Street City State Zip

Mother's name (Miss Ms. Mrs.) _____

Address _____
Street City State Zip

Home Phone _____ Cell Phone _____ E-mail _____

Employer _____

Work Phone _____ Extension _____ Work Hours _____ Days _____

Father's name _____

Address _____
Street City State Zip

Home Phone _____ Cell Phone _____ E-mail _____

Employer _____

Work Phone _____ Extension _____ Work Hours _____ Days _____

Please give the name and contact information for any non-custodial biological parent

List the names and ages of any siblings in the family _____

Church you are now attending _____ Member? _____

Student's Physician _____ Telephone _____

Does your child have his/her own health insurance? _____ Company Name _____

List any allergies your child has _____

Explain any physical or health problems your child currently has and what accommodations might need to be made at school for him or her.

List any medications your child is taking _____

Do you allow BBCS to administer Tylenol or Tums to your student as needed? Yes _____ No _____

Has this student ever been suspended or expelled from any school? _____ If yes, please explain

Has this student ever been arrested or convicted of a crime? _____ If yes, please explain _____

Has either parent ever been arrested or convicted of a crime involving violence or sexual misconduct or a crime against children? _____ If yes, please explain _____

In case parents cannot be reached, list at least two people who may be contacted to pick up the child in an emergency

1. Name _____ Cell Phone _____
Last First Relationship

Address _____
Street City State Zip Home Phone

2. Name _____ Cell Phone _____
Last First Relationship

Address _____
Street City State Zip Home Phone

In EMERGENCIES requiring immediate medical attention, your child will be taken to the NEAREST HOSPITAL EMERGENCY ROOM. Your signature authorizes a responsible person at the school to have your child transported to that hospital.

STATEMENT OF COOPERATION AND AGREEMENT

1. We the parents understand that the school will determine the proper performance level of our child and prescribe the appropriate curriculum.
2. In making application for my child, it is my desire to have him complete the school year. It is my understanding that the policy of the school is to make no refunds on registration fees. My cooperation is expected in regular tuition payment. Tuition refunds will be pro-rated from the withdrawal date
3. Students who do not abide by the rules and regulations of Bible Baptist Christian School may be dismissed from school.
4. I give permission for my child to take part in all school activities, including sports and school-sponsored away from the school premises. In case of accident or serious illness, I request the school contact me. If it is impossible to contact the physician, the school may make whatever arrangements deemed necessary to obtain treatment.
5. I consent to my child being photographed during the school year and that Bible Baptist Christian School and Bible Baptist Church shall have the right, but not the obligation, to use my child's photograph, likeness, (including caricature), biographical information, and any reproduction or simulation thereof, for any publicity, advertising, training aids, or websites at any time and for any other purpose or materials the ministry deems necessary.

Parent Signature _____ Date _____

(NOTE: Any missing, incomplete, or inaccurate information may be grounds for a student's immediate dismissal from BBCS or for termination of the enrollment process. In order to determine how we might best serve your child, we must have complete disclosure of any diagnostic educational, psychological, or medical testing [related to academic performance] performed in the past.)