

Heart to Heart Christian Academy

2016-2017

Student Registration

Private Pay
 McKay
 Step Up

**Transportation
Needed**
 Yes No

Need Uniforms go to: www.frenchtoast.com
Local Vendor: 50/50 FZO Custom Clothier
Email: fingazzeta@hotmail.com
Phone#: 904-238-1492

STUDENT'S NAME _____ DATE OF BIRTH _____

ADDRESS _____

STREET _____ CITY _____ STATE _____ ZIP CODE _____
AGE _____ GRADE LEVEL _____ GENDER _____ SOCIAL SECURITY NUMBER _____

HOME NUMBER _____ CELL NUMBER _____

EMAIL ADDRESS _____

PREVIOUS SCHOOL _____

MOTHER'S (or legal guardian's) NAME _____ RELATIONSHIP TO STUDENT _____

SSAN _____

PLACE OF EMPLOYMENT _____ WORK NUMBER _____

MARITAL STATUS: MARRIED SINGLE DIVORCED WIDOWED

HOME NUMBER _____ CELL NUMBER _____ WORK NUMBER _____

EMAIL ADDRESS _____

FATHER'S (or legal guardian's) NAME _____ RELATIONSHIP TO STUDENT _____

PLACE OF EMPLOYMENT _____ WORK NUMBER _____

MARITAL STATUS: MARRIED SINGLE DIVORCED WIDOWED

HOME NUMBER _____ CELL NUMBER _____ WORK NUMBER _____

EMAIL ADDRESS _____

EMERGENCY CONTACT OTHER THAN PARENT _____ NUMBER _____

RELATIONSHIP TO STUDENT _____

Heart to Heart Christian Academy

2016-2017

Student Registration

SIGNATURE OF PARENT OR LEGAL GUARDIAN

DATE

HEART TO HEART CHRISTIAN ACADEMY



McKay Scholarship Information

Complete for all McKay Scholarship Students

Date Registered: _____

Student Name: _____ Birth Date: _____

Parent Name: _____ Parent SS#: _____

Address: _____

**McKay Scholarship Amount: \$ _____
(Annually)**

School Fees

Registration, Tuition, Achievement Testing and Books)

K-4 to K-5	\$ 6,000.00
1 st to 5 th	\$ 8,000.00
6 th to 8 th	\$ 9,000.00
9 th to 12 th	\$ 10,185.00
H2H Scholarship \$ _____	

Parent Signature

Date

Heart to Heart Christian Academy
2016-2017
Student Registration

STUDENT RELEASE FORM

Parental Authorization for student pick-up

I authorize any one of the following persons listed below to pick-up my child(ren) from Heart to Heart Christian Academy upon dismissal of school or in the case of emergency.

I also authorize Heart to Heart Christian Academy personnel to contact any of these individuals in the event I have not arrived to retrieve my child within 10 minutes of the end of school. Additionally, I acknowledge that a fee of \$25.00 will be assessed the first 30 minutes and \$5.00 every additional 15 minutes my child is not picked up.

School hours are (8:20 am- 3:20 pm) Monday through Friday. Students are not to arrive prior to 7:45 am and should be picked up by 3:20 pm.

Student Name: _____

Name	Contact Number

Parent Signature

Date

Heart to Heart Principal/ Administrator

Date

Heart to Heart Christian Academy
2016-2017
Student Registration

Emergency Medical Release
This Form must be NOTARIZED and returned to the school office.

Student Name: _____ Age: _____

Grade: _____ Birth Date: _____

Parent Name: _____ Phone Number: _____

Doctor's Name: _____ Phone Number: _____

Preferred Hospital: _____

MEDICAL INSURANCE INFORMATION

Insurance Company: _____

I authorized employees of Heart to Heart Christian Academy to transport my child(ren) to the doctor or medical facility listed above. I also authorize the doctor and/or medical facility personnel listed above to provide the medical treatment necessary for my child(ren).

If I cannot be reached during an emergency, please call:

Contact Name: _____ Phone: _____

Contact Name: _____ Phone: _____

Parent Signature: _____ Date: _____

Notary Signature: _____ Date: _____

Heart to Heart Christian Academy
2016-2017
Student Registration

Medication Administration Release

Student's Name _____

Parents: Carefully list all prescribed medications you authorize Heart to Heart to administer to your child(ren) during school hours.

All OTC(over the counter) medications should be turned in at the Front Desk with the child's name, direction of administering and the parent's signature.

Prescription Medicines

I authorize Heart to Heart Christian Academy administrators to administer the following medications to my child as directed below.

Medication	Dosage	How Often

Parent Signature: _____ **Date:** _____

Heart to Heart Christian Academy
2016-2017
Student Registration

Student Medication and Allergy Form

Student Name: _____

Parents: Carefully list all medications your child is taking and any allergies and/or food items allergic to.

MEDICATIONS

The following is a list of all the medication my child is currently taking.

Medication	Dosage	How Often	Used For

ALLERGIES

Following is a list of all my child's allergies that I am aware of and I understand that allergic reactions can occur at any time and under any circumstance to include substances which my child has previously shown no signs of being allergic to. Therefore, I do not hold Heart to Heart Christian Academy responsible for any reaction to any substance listed below.

Medication/Substance/Food	Reaction (rash, hives, etc.)

Parent Signature

Date

Heart to Heart Principal/Administrator

Date

Heart to Heart Christian Academy
2016-2017
Student Registration

**CONSENT, WAIVER, AND RELEASE AGREEMENT FOR PARTICIPATION IN HEART TO HEART
CHRISTIAN ACADEMY (H2H) ACTIVITIES AND EVENTS**

Participant Name: (Last) _____ (First) _____

Birth Date: _____

Home Address: _____

City/State/Zip: _____

Parent/Guardian: _____

Home Phone: _____ Cell Phone: _____

Release: In consideration of the benefits of participation in the activities of Heart to Heart Christian Academy (H2H), ("School"), a ministry of The New Life Church at Jacksonville ("Church"), a Florida non-profit corporation, I, for my minor child and myself, the heirs, personal representatives or assigns of my minor child and myself, consent to my child's participation in School Activities (including but not limited to Field Trips, Events, Special Sessions, Sports, Games and Physical Education) as well as my child(ren) picture, name, grade and etc. to be displayed or used for social media networks for advertisement for Heart to Heart Christian Academy and further waive all claims or causes of action against School/Church, its agents, Board of Directors, trustees, employees and volunteers; arising out of my minor child's and my participation in School Activities and hereby release, hold harmless and discharge the School/Church from any and all liability, claims, demands, actions and causes of action whatsoever, including reasonable attorney fees, arising out of or related to any loss, damage or injury (whether direct, indirect, consequential or otherwise), including death, that my minor child and I might sustain or that any of my minor child's and my property might sustain while participating in any School Activities.

Assumption of Risks: Knowing, understanding, and fully appreciating all possible risks, I hereby expressly, voluntarily and willingly assume all risks and dangers associated with my minor child's and my participation in School Activities. I understand and acknowledge that School Activities could result in injury and I agree that participation in all School Activities shall be at my minor child's and my sole risk. I acknowledge that I am responsible for payment of any/all medical costs and insurance costs.

Acknowledge of Understanding: I have read this Consent, Waiver, and Release Agreement and understand the terms used in it and their legal significance. This Consent, Waiver, and Release Agreement is freely and voluntarily given with the understanding that right to legal recourse against the School/Church is knowingly given up in return for allowing my minor child's and my participation in School Activities. I agree that this Consent, Waiver, and Release Agreement shall remain in effect and apply each time my minor child and I participate in any School Activities.

By signature below, I acknowledge and accept all terms and conditions of this Consent, Waiver, and Release Agreement. I am signing this Consent, Waiver, and Release Agreement on behalf of a minor, I certify that all representations are true and that I am the minor's legal guardian(s) or custodial parent(s) with full authority to bind the minor and myself to the terms and conditions of this Consent, Waiver, and Release Agreement.

Signed: _____

Dated: _____

Print Name: _____

Heart to Heart Christian Academy

2016-2017

Student Registration

GENERAL SCHOOL POLICIES

DRESS AND GROOMING:

A Christian's appearance should reflect the indwelling presence of Jesus Christ and not that of the world.

UNIFORM DRESS CODE REQUIREMENTS:

A Biblical dress code requires modest apparel, which is not suggestive of worldliness. Therefore, young ladies must wear the approved skirts or pants. The skirts or pants should be of the appropriate size to be loose fitting and modest in appearance.

Students will abide by this dress code during all regular school hours as well as all school outings, activities, and events.

Under no circumstances, while on school property, will any student wear spiked or unnaturally extreme colored hair (red, purple, pink, blue, or green, etc.). We allow no body piercing other than a maximum of two earrings per ear for females.

- All skirts must be below the knees.
- All shirts must not reveal the stomach area.
- No baggy pants, chain wallets and any obvious gang related clothing.
- Students must present a clean appearance and wear clean clothing each day.
- Students must wear underarm deodorant in order to prevent offensive body odor.
- No hats are to be worn in the school building at anytime. **Such as: doo-rags, scarf's, plastic caps etc.**
- No house slippers.
- No walking about the school in bare feet or in socks.
- Hair is to be groomed daily. The fixing and dressing of hair should be done in the restrooms. No combs are allowed to be worn in the hair at anytime during school hours.
- Uniform requirement for **females**: khaki pants, capris (loose fitting and below the knee), Dickies (tan, black, navy) and uniform shirts, khaki or jean skirts below the knee.
- Uniform requirement for **males**: khaki pants, shorts to the knees, Dickies (tan, black, navy) and uniform shirts. All males must wear a belt. Shirts are to be tucked inside of pants.

FOR MORE DETAILS, PLEASE REFER TO THE STUDENT HANDBOOK.

Student's Signature

Parent's Signature

Date

Heart to Heart Christian Academy
2016-2017
Student Registration

HEART TO HEART CHRISTIAN ACADEMY
PARENT OBLIGATIONS

We at Heart to Heart (H2H) value your patronage to entrust your son/daughter with us to provide a quality education for them. We take every measure necessary to ensure that your son/daughter has the proper tools and instructional material to complete their goals. Therefore, we need your support in making sure that scholarship payments are endorsed promptly, so that we can continue in a flow of excellence providing for the needs for our students and staff.

Please sign below for your support in meeting your Obligations for this school year.

ALL SCHOLARSHIP CHECKS, MCKAY AND STEP-UP MUST BE SIGNED BY THE 3RD DAY OF RECEIVING, OR UPON NOTIFICATION FROM THE SCHOOL, and WHICHEVER IS SOONER (*i.e., if your scholarship check is received 1st September, you must sign it by the 3rd of September*)

ANY SCHOLARSHIP CHECKS NOT SIGNED BY THE 3RD DAY OF RECEIPT WILL BE ACCESSED A \$7.00 FEE EACH DAY THEREAFTER. (*No records, report cards will be released until all fees have been paid for the school year*)

PRIVATE PAY STUDENTS MUST HAVE ALL FEES PAID, INCLUDING TRANSPORTATION AND ACHIEVEMENT TESTING BEFORE ANY RECORDS ARE RELEASE FROM HEART TO HEART.

ANY OUTSTANDING OBLIGATIONS, WHATSOEVER, WILL DELAY THE RELEASE OF RECORDS FROM HEART TO HEART FOR THE SCHOOL YEAR TO PARENTS OR THIRD PARTY. ALL FEES MUST BE PAID IN ORDER TO RELEASE RECORDS.

Parent Signature

Date

Principal or Administrator Signature

Date

Heart to Heart Christian Academy

2016-2017

Student Registration

Dear Academy Patrons,

As an essential part of the enrollment process, the pledge written below must be completed. It serves as a protective legal hedge for the benefit of our families and the school. In the interest of being good stewards, we must make every attempt to insulate our school against costly lawsuits and/or other forms of avoidable disruption.

Please understand that we dearly value your patronage and ask that you realize our mission and purpose has not changed even though the climate around us has required that we be “wise as serpents” yet “harmless as doves”.

CONDITIONS OF ENROLLMENT AND PLEDGE OF COOPERATION

1. I understand that it is a privilege, and not a right, for my child to attend Heart to Heart Christian Academy. I further understand that all students are accepted on a **probationary status**. I further understand that the school reserves the right to dismiss any student, who does not cooperate with any phase of the educational program and process, be it curricular, or whose attitudes and actions are not in harmony with the aims and ideals of Heart to Heart Christian Academy. I give H2H administration full discretion in the discipline of my child, including the issuing of demerits, referrals, detention, suspension (in-school/out), and expulsion from the school for conduct deemed by H2H to be improper, regardless of where the incident(s) giving rise to such discipline occurs.
2. In order to preserve the spiritual atmosphere nurtured at H2H, I understand that discipline will be more swiftly and rigorously enforced than in a public school environment or in some other private school. I further understand there may be times where I disagree with discipline imposed upon my child. I further understand that in the event of such disagreement, I am to request a conference with the principal and/or his or her designee(s) of the educational unit involved.
3. I understand that H2H, in the interest of nurturing its school atmosphere and spiritual goals, has a “Zero Tolerance” policy regarding possession and/or use of drugs on or off campus. If in the judgment of H2H’s administration, it is determined my child(ren) should be drug tested, I agree to have my child(ren) tested, at my own expense, by an appropriate medical provider approved by H2H to conduct such drug test. If I am unwilling to permit such a drug test, or to release the results of such test to H2H, I shall withdraw my child(ren) from H2H and thereby waive all rights to any recourse.
4. I understand and agree to the need for not random, but reasonably determined investigations of student activities which may involve and include searching my child’s or children’s belongings (books, or carrying bag, lunch box, purse, gym bag, etc.) and locker. In case of secondary students, I also give permission for any motor vehicle in my student’s possession to be searched for stolen or other improper items. I ask that H2H’s administration make a reasonable attempt to contact me prior to such a search in order to allow me to be present. If I am not available by telephone after reasonable efforts to contact me have been made by H2H, I permit H2H’s administration to search the vehicle.
5. I agree to fully cooperate with H2H’s administration regarding all actions requested of me pertaining to my child’s or children’s enrollment at the school and in the enforcement of its rules and policies. I agree to uphold the aims and ideals of school and to encourage my child(ren) to likewise abide by the aims and ideals of the school.

Heart to Heart Christian Academy
2016-2017
Student Registration

6. I understand that my child's or children's continued enrollment at H2H is conditioned upon my prompt and timely payment of all tuition and fees (including late fees). I further understand that in the event of withdrawal or expulsion of my child(ren) from H2H for any reason. I waive all rights to a refund of tuition and fees not yet having been paid.
7. I acknowledge receiving and reading a copy of H2H's handbook before execution of this application. I agree that my child's and children's enrollment at H2H is subject to all terms and conditions of the handbook which are fully incorporated herein by reference.

PLEASE SIGN AND RETURN THIS PAGE. REGISTRATION CANNOT BE COMPLETED WITHOUT THIS FORM.

STUDENT NAME _____ GRADE _____
PLEASE PRINT

STUDENT SIGNATURE (1st - 12th GRADE) _____ DATE _____

I have read, or reviewed with my parents, and understand and agree to abide by the provisions of the school handbook for my grade level.

PARENT SIGNATURE _____ DATE _____

- No. 7 above notes that I have read the student handbook and agree to the provisions governing my child(ren) included.

Heart to Heart Christian Academy
2016-2017
Student Registration

BUS RULES

1. Student must be to their bus stop 5 to 10 minutes before their scheduled pick up time.
2. Students are to remain seated, faced forward (in their assigned seats) at ALL times. (Girls on one side and Boys on the other) Unless the student is redirected by the Bus Driver and/or Attendant.
3. Students are to keep noise to a minimum level for the safety and protection of ALL students. The driver must be able to hear inside and outside the surrounding area.
4. Students, NO yelling from back to front and/or front to back of bus.
5. No profanity! This disrespectful behavior will result in immediate suspension of bus service.
6. Students are to keep their hands to themselves. Touching one another in any form is not permitted and WILL NOT be tolerated. Again, Immediate suspension of bus service.
7. Students will not instruct the Driver (what they will or will not do). The Driver and /or Attendant are in control at ALL times.
8. The Bus Aisle's must be clear at ALL times. (Book bags, feet, arms, etc.)
9. Students are to keep hands and/or arms inside the bus at ALL TIMES.
10. Do not throw any objects off the bus or out the windows of the bus.
11. Students must enter and exit the bus in an orderly manner. There's never any running or horse playing on the bus.
- 12. NO LITTERING AT ANYTIME. NO EATING FOOD/DRINKING ON THE BUS.**

Rules and Discipline is necessary for the protection and safety of your children as well as the Driver and Attendant. We must work together to implement these rules now before it's too late.

Parent Signature

Date

Student Signature

Date

Heart to Heart Christian Academy

2016-2017

Student Registration

AUTHORIZATION RELEASE

Request for School Records

To: School Principal or Authorized Administrator

I authorize your school to release the indicated school records for the student(s) listed below who are now enrolled at Heart to Heart Christian Academy. Please forward the records of my child(ren) to the address below.

1. _____ Cumulative Records _____ Health Records _____ Student Name
Birth Date: _____ Psychological Records _____ ESE Records _____ Behavior (Detention/Suspension/Expulsion) _____
2. _____ Cumulative Records _____ Health Records _____ Student Name
Birth Date: _____ Psychological Records _____ ESE Records _____ Behavior (Detention/Suspension/Expulsion) _____
3. _____ Cumulative Records _____ Health Records _____ Student Name
Birth Date: _____ Psychological Records _____ ESE Records _____ Behavior (Detention/Suspension/Expulsion) _____

ACCEPTING SCHOOL: Heart to Heart Christian Academy
The New Life Temple Church at Jacksonville
8247 Ramona Blvd. West
Jacksonville, FL 32221

Parent Signature _____ Date _____

Last School Attended _____

Principal/ Authorized Administrator _____ Date Records Sent _____

Heart to Heart Christian Academy
2016-2017
Student Registration

Behavior Contract

I, _____

Student's Signature

AGREE TO STAY IN GOOD ACADEMIC STANDING AT HEART TO HEART CHRISTIAN ACADEMY AND WILL OBEY ALL OF THE RULES AND REGULATIONS OF HEART TO HEART ACADEMY.

I UNDERSTAND THAT I WILL BE EXPELLED AFTER THREE INFRACTIONS OF THIS AGREEMENT. THE INFRACTIONS INCLUDE,

1. BEING SENT TO THE OFFICE FOR BEHAVIOR PROBLEMS.
2. BEING DISRESPECTFUL TO THE CLASSROOM TEACHER OR ANY TEACHER OR ADMINISTRATOR.
3. ANY OTHER TYPES OF BEHAVIOR THAT DO NOT COMPLY WITH HEART TO HEART RULES AND POLICIES.

DATE OF INFRACTION 1: _____

INFRACTION: _____

DATE OF INFRACTION 2: _____

INFRACTION: _____

DATE OF INFRACTION 3: _____

INFRACTION: _____

I HAVE READ AND UNDERSTAND THIS BEHAVIOR CONTRACT

Student Signature: _____

Parent Signature: _____

Date: _____

Heart to Heart Christian Academy
2016-2017
Student Registration

STUDENT EXTENDED CARE AGREEMENT

NAME: _____ TODAY'S DATE: _____
(STUDENT NAME/PRINT)

GRADE: _____ DOB: _____ STARTING DATE: _____

DAYS NEEDED: MONDAY TUESDAY WEDNESDAY THURSDAY FRIDAY
(CIRCLE)

MONTHLY RATE: AM = 6:30 – 7:45= \$82.50 PER MONTH
PM = 3:20 – 6:00 = \$82.50 PER MONTH
AM & PM = \$165.00 PER MONTH
2 OR MORE (REDUCED RATE)
(RATE ALSO INCLUDES SNACK)

PARENT/GUARDIAN NAME: _____
(PRINT)

ADDRESS: _____
(STREET) (CITY/STATE) (ZIP)

TELEPHONE NUMBER(S): _____
(CELL) (WORK) (HOME)

EMERGENCY CONTACT: _____
(NAME/PRINT) (PHONE NUMBER)

**** ALL FEES ARE DUE AT THE START OF EXTENDED CARE, UNLESS PRIOR ARRANGMENTS HAS BEEN MADE. ADDITIONAL FEES WILL INCUR FOR ANY STUDENT BEYOND THE AGREED HOURS OF CARE. STUDENTS RECORDS WILL BE HELD FOR ANY PAST DUE BALANCES. ****

PARENT SIGNATURE (DATE SIGNED)

ADMINISTRATOR SIGNATURE (DATE SIGNED)

Heart to Heart Christian Academy
2016-2017
Student Registration

SCHOOL CALENDAR

(Notification and updates will be given for any changes to the calendar)

MONDAY	AUGUST 15 TH	TEACHERS REPORT TO SCHOOL
FRIDAY	AUGUST 18 th @ 6:30 P.M.	SCHOOL ORIENTATION – ALL GRADES
MONDAY	AUGUST 22 ND	1 ST DAY OF SCHOOL FOR STUDENTS
TUESDAY-WEDNESDAY	AUGUST 30 TH /AUGUST 31 ST	MCKAY SCHOLARSHIP PARENTS MUST SIGN CHECKS
MONDAY	SEPTEMBER 5 TH	LABOR DAY/SCHOOL CLOSED
THURSDAY	OCTOBER 13 TH	OPEN HOUSE
FRIDAY	OCTOBER 28 TH	TEACHER PLANNING DAY/NO SCHOOL FOR STUDENTS
MONDAY	OCTOBER 31 ST	MCKAY SCHOLARSHIP PARENTS MUST SIGN CHECKS
FRIDAY	NOVEMBER 11 TH	VETERAN'S DAY/SCHOOL CLOSED
WEDNESDAY – FRIDAY	NOVEMBER 23 RD -25 TH	THANKSGIVING/SCHOOL CLOSED
MONDAY-THURSDAY	DECEMBER 19 TH -30 TH	CHRISTMAS BREAK/SCHOOL CLOSED
MONDAY	JANUARY 2 ND	NEW YEAR'S DAY/SCHOOL CLOSED
TUESDAY	JANUARY 3 RD	TEACHERS AND STUDENTS RETURN TO SCHOOL
MONDAY	JANUARY 16 TH	MARTIN LUTHER KING HOLIDAY/SCHOOL CLOSED
FRIDAY	JANUARY 20 TH	TEACHER PLANNING DAY/NO SCHOOL FOR STUDENTS
TUESDAY	JANUARY 31 TH	MCKAY SCHOLARSHIP PARENTS MUST SIGN CHECKS
FRIDAY	FEBRUARY 17 TH	CSDC TRAINING/NO SCHOOL FOR STUDENTS
MONDAY	FEBRUARY 20 TH	PRESIDENT'S DAY/SCHOOL CLOSED
MONDAY – FRIDAY	MARCH 20 TH – 24 TH	SPRING BREAK/SCHOOL CLOSED
FRIDAY	MARCH 31 ST	TEACHER PLANNING DAY/NO SCHOOL FOR STUDENTS
FRIDAY	MARCH 31 ST	MCKAY SCHOLARSHIP PARENTS MUST SIGN CHECKS
FRIDAY	APRIL 14 TH	GOOD FRIDAY/SCHOOL CLOSED
SUNDAY	MAY 21 ST @ 6:00 P.M.	BACCALAUREATE SERVICES
FRIDAY	MAY 26 TH @ 7:00 P.M.	2017 GRADUATION SERVICES
MONDAY	MAY 29 TH	MEMORIAL DAY – SCHOOL CLOSED
TUESDAY	MAY 30 TH	LAST DAY OF SCHOOL FOR STUDENTS
WEDNESDAY	MAY 31 ST	TEACHER PLANNING DAY – LAST DAY OF SCHOOL

First Semester

1st Quarter: 8/22/2016 – 10/21/2016

2nd Quarter: 10/24/2016 – 01/13/2017

Second Semester

3rd Quarter: 1/23/2017– 3/24/2017

4th Quarter: 3/27/2017 – 5/30/2017

Heart to Heart Christian Academy

2016-2017

Student Registration

Student Data Collection Form

Dear Parent or Guardian:

Every school district in Florida is required to report to the Florida Department of Education each year student data by race and ethnicity categories that are set by the federal government. The Department of Education does not report individual student data to the federal government but does report the total number of students in various categories in each school. These reports help us keep track of changes in student enrollments and ensure that all students receive the education programs and services to which they are entitled.

The federal government has adopted new standards for collecting and maintaining ethnicity and race data that will allow individuals to more accurately report their origins. As a result of this, you have the opportunity to update the student data for your child. With the new reporting categories, you may now identify your child by ethnic group and by one or more racial groups.

Please answer all questions below by checking "Yes or No" for each of your children.

Question	Yes	No
ETHNICITY		
1. Is the student of Hispanic/Latino origin?		
RACE		
2. Is the student American Indian or Alaska Native?		
3. Is the student Asian?		
4. Is the student Black or African American?		
5. Is the student Native Hawaiian or Other Pacific islander?		
6. Is the student White?		

Student Name _____ Grade _____

School District Where Private School is Located _____

Name of Private School _____

Parent/Guardian Signature _____ Date _____

Date: _____

Signature: _____

Heart to Heart Christian Academy
2016-2017
Student Registration

TO: ALL PARENTS OF THE STUDENTS ATTENDING HEART TO HEART CHRISTIAN ACADEMY

FROM: THE ADMINISTRATION

SUBJECT: ENFORCEMENT OF RULES AND POLICIES

Dear Parents:

Please understand that we value your patronage and ask that you realize our mission and purpose here at Heart To Heart Christian Academy.

As outlined in the Condition of Enrollment and Pledge of Cooperation that was signed by each parent at the time of registration, there is a (ZERO-TOLERANCE) policy regarding certain rules and violations. In order to preserve the spiritual atmosphere nurtured at Heart To heart, please understand that discipline will be more swiftly and rigorously enforced than in a public school environment, and in some other private schools. Please also understand that the school reserves the right to dismiss any student who does not cooperate with any phase of the educational program and process, be it curricular or extra-curricular, or whose attitudes and actions are not in harmony with the aims and ideals of Heart to Heart Christian Academy.

We thank you for your decision to make Heart to Heart Christian Academy the choice for your child/children's educational needs and advancement. We are committed to making a full effort in giving each student the best education and the help they need to reach their highest potential.

Please feel free to contact us here at the school during normal business hours. Our hours of operation are 8:00 a.m. to 4:00 p.m., Monday- Friday. Our contact number is (904) 783-8638.

Sincerely,

Dr. Juanita White
Director/Administrator
Heart to Heart Christian Academy

Heart to Heart Christian Academy

2016-2017

Student Registration

TITLE I

DUVAL COUNTY PUBLIC SCHOOLS

2014-2015



Heart to Heart Christian Academy is trying to qualify for extra services for our students. Please help by following the directions below to complete this form and return it to the school. All information is kept confidential and is only used to determine funding for the entire school, not individual students.

Income Determination Form For Non-Public Schools

Your family's street address: _____ zip code _____

Grade levels of all children living in your household and attending this school between Kindergarten-12th grade.

Using the chart below locate your family size (total number of people in your family, not just children) and the minimum income earned each month. Then answer the three questions below.

1. Is your monthly income equal to or less than the amount listed? ___ yes ___ no (please check one)
2. Does your family qualify for food stamps? ___ yes ___ no (please check one)
3. Are you receiving Temporary Assistance to Needy Families(TANF)? ___ yes ___ no (please check one)
(Formerly aid to Families with Dependent Children or Public Assistance)

Family Size	Income Earned Each Month
1	\$ 1,722
2	\$ 2,392
3	\$ 3,011
4	\$ 3,631
5	\$ 4,251
6	\$ 4,871
7	\$ 5, 490
8	\$ 6,110
For each additional family member, add \$ 620	

Income Eligibility Guidelines, U.S. Department of Agriculture

Please return this form to the front desk of Heart to Heart Christian Academy.

Thank you for your assistance.