Vacaville Christian Schools

CALL OUR ADMISSIONS OFFICE TODAY!
707-446-1776 ext. 1614

GO-VCS

1117 Davis Street
Vacaville, CA 95687
www.go-vcs.com

Student Application Packet

Vacaville Christian Schools
www.Go-VCS.com

High School
9th to 12th grade

Dear Prospective Family,

Thank you for considering Vacaville Christian Schools (VCS). We know that the selection of the right school environment for your child is one of the most important decisions facing any parent. As a school, our focus is on providing a superior educational climate that will encourage your child to pursue academic excellence, and will create a desire to strengthen spiritually, physically, and creatively. As a parent, I understand that you have a crucial decision to make about your child's future. That is why you have this packet in your hand!

We are looking for families who are supportive of our Christian philosophy, objectives, and standards of education, and whose children meet our enrollment standards. Our purpose is to serve families who desire not only a private education, but a distinctively Christian education for their children.

Before filling out the admission paperwork, please read through our Parent & Student Handbook at www.go-vcs.com/parent-handbooks. The handbook will introduce you to many of the school's policies, procedures and expectations for both parent and students. In the first several pages of our handbook you will find explanations regarding our purpose, mission, and beliefs. Vacaville Christian Schools unashamedly accepts the Bible as the infallible and inerrant Word of God and practices a literal interpretation of Scripture. Biblical principles are integrated into every subject taught at our school and our staff is committed to academic excellence and teaching students how to apply the truths of God's Word in every aspect of life.

As in all decisions related to your child's education, it is important for you to determine that this is a school that is consistent with your personal decisions and life style and will not cause confusion or conflicted feelings. We respect your right to enroll your child in the best possible learning environment. It is our hope that Vacaville Christian Schools can partner with your family in all areas.

For more information on the admissions process, please turn to the last page of this packet or feel free to contact us at 707-446-1776 ext. 5300. If you have not visited our campus, I encourage you to schedule a personal tour, as soon as possible. I would like to make the admissions process as easy as possible, answer your questions and provide you with all of the information you need to make an informed decision.

Working together!
Maylene Ripley
Director of Enrollment

Please complete ALL REQUIRED forms in the application packet prior to returning the packet for consideration. Check-off each item on the checklist below to ensure the packet is complete. Please print legibly on all forms.

APPLICATION PACKET CHECKLIST:

- ☐ $100 non-refundable application fee*
- ☐ Copies of court ordered custodial agreements (if applicable)
- ☐ Copy of birth certificate
- ☐ Copy of immunization records
- ☐ Copies of report cards and state achievement tests (from the past two years) or high school transcript
- ☐ Completed Application and Parental Commitment form (must be signed by BOTH parents)
- ☐ Emergency Contacts form
- ☐ Student Questionnaire and Essay
- ☐ Educator Evaluation (must be completed by a current teacher/counselor/principal)
- ☐ Release of Specific Student Information
- ☐ Letter of verification for full-time ministers, if applicable

*Applications submitted without the appropriate fee and signatures **will not be processed.**

Admission Procedures:

1

Step One: Application - To initiate the application process, the Admissions Office must receive the following items:

A. Completed Application Packet: (one per child) The application, in addition to the supplemental forms listed on the front cover, needs to be signed and completed.
B. Application Fee: A non-refundable application fee of $100.00, made payable to Vacaville Christian Schools, must accompany the completed application packet.
C. Educator Evaluation: These forms are usually completed by your child's current teacher or the school administrator that handles academic affairs.
D. Test Results: Please submit copies of standardized testing scores and report cards for the past two years with the application (9th grade) or current transcripts (10th -12th grade).

2

Step Two: Family Interview

New Family Interview: This appointment will be scheduled by the Admissions Office after the Admissions Office has received your **completed application packet** and placement testing is completed (if testing is applicable).
Acceptance of Admission Letter will be given to all applicants during the New Family interview with the principal confirming or denying your child's acceptance.

3

Step Three: Completion of School Registration - In order to secure your child's spot, please return your enrollment contract to the Admissions Office within seven (7) days of receipt. Please be sure to include the non-refundable registration fee of $250. Credit Cards are not accepted.

A. Signed Contract of Payment and Liability Contract
B. Remittance of non-refundable registration fee of $250
C. Completion of online Smart Tuition account registration
D. Supplemental documents included in acceptance packet

Joseph Rowland
Principal
(707) 724-6033
joseph.rowland@go-vcs.com

Terra Golden
Vice Principal
(707) 724-6201
terra.golden@go-vcs.com

Vacaville Christian Schools, admits students of any race, color, national, or ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students of the school. It does not discriminate on the basis of race, color, national, or ethnic origin in administration of its educational policies, admissions policies, scholarship and loan programs, and athletic and other school administered programs.

Vacaville Christian Schools

www.Go-VCS.com

ADMISSIONS USE ONLY

App Date Received: _____/_____/_____

App Fee: _____ CASH CK# _____

Application Received by: _____

Forwarded to Registrar: ____/_____/_____

OFFICE USE ONLY

PowerSchool ID: _____

Reg Fee: _____ CASH CK# _____

Student Start Date: _____/_____/_____

☐ *Full-Time Minister* ☐ *Military* ☐ *Rewards*

☐ *Sibling to current VCS Student* ☐ *Staff*

☐ *2021-2022* ☐ *2022-2023* ☐ *Wait List*

ADMISSION APPLICATION

PLEASE PRINT OR TYPE CLEARLY

Student Information: All school mailings will be sent to this address

Legal Last Name _____ Legal First and Middle Name _____ Date of Birth ____/____/_____ Gender ☐M ☐F Grade Applying For _____

Primary Address _____ City _____ State _____ ZIP _____

Home Phone: _____

Ethnicity (optional): ☐Asian ☐African American ☐Caucasian ☐Hispanic ☐American Indian ☐Pacific Islander ☐Other

Guardian #1 Information: Relationship to Student: _____

Last Name _____ First and Middle Name _____ Home Phone _____

Mailing Address _____ City _____ State _____ Zip _____

Occupation: _____ Employer: _____

Email Address: _____ Work Phone: _____

Cell Phone: _____

Guardian #2 Information: Relationship to Student: _____

Last Name _____ First and Middle Name _____ Home Phone _____

Mailing Address _____ City _____ State _____ Zip _____

Occupation: _____ Employer: _____

Email Address: _____ Work Phone: _____

Cell Phone: _____

How did you hear about VCS? ☐VCS Parent/Friend's Name: _____

☐Internet ☐Radio ☐Social Media ☐Local magazine ☐Billboard ☐Friend/Family member ☐Other _____

☐My other child goes here ☐Returning Student/Last Date Attended: _____

Guardian #3 Information:

Relationship to Student: _____

Last Name _____ First and Middle Name _____ Home Phone _____

Mailing Address _____ City _____ State _____ Zip _____

Occupation: _____ Employer: _____

Email Address: _____ Work Phone: _____

Cell Phone: _____ Cell Phone Provider: _____

Guardian #4 Information:

Relationship to Student: _____

Last Name _____ First and Middle Name _____ Home Phone _____

Mailing Address _____ City _____ State _____ Zip _____

Occupation: _____ Employer: _____

Email Address: _____ Work Phone: _____

Cell Phone: _____ Cell Phone Provider: _____

Marital Status of Parents: ☐ Single ☐ Married ☐ Divorced ☐ Separated ☐ Remarried ☐ Widow/Widower

Physical Custody: ☐ Both Parents ☐ Mother ☐ Father ☐ Shared Custody ☐ Other _____

Legal Custody: ☐ Both Parents ☐ Mother ☐ Father ☐ Shared Custody ☐ Other _____

Custody/restraining orders must be kept in the student file. Please bring the original. documents to the Admissions Office for copies to be made.

CURRENT CHURCH: _____

Denomination: _____ Pastor _____

Address _____ Telephone _____

City _____, California Zip _____

How often does the student attend church? ☐ Weekly ☐ Monthly Parents ☐ Weekly ☐ Monthly

VCS Parental Commitment

VCS Statement of Faith

We believe the Bible is the only Word of God, divinely inspired, inerrant, infallible, totally expressing His purposes to mankind. We accept the Bible as our final authority; the all-sufficient and complete rule for faith and conduct. (2 Timothy 3:15-17; I Peter 2:15)

We believe there is one God, eternally existent in three persons: Father, Son and Holy Spirit. God the Father, Creator and Ruler of the universe from Whom all life exists (Genesis 14:22; Genesis 1:1; Colossians 1:17); Jesus Christ, God the Son sent to take the form of a man to put God's great plan for humanity into effect (John 17:5; Philippians 2:5-11; Hebrews 1:2); God the Holy Spirit, revealing Jesus Christ and God's plan to the Christian and bearing witness to God's work in our world. (John 16:13-14; I Corinthians 2:9)

We believe in the person of Jesus Christ, God's only eternal Son. Born of a virgin, He lived a sinless life; performed mighty miracles; died for the sin of the whole world; rose again to conquer sin, death, and Hell; ascended to the right hand of His Father to intercede on our behalf; and will return to earth again for those who have personally accepted forgiveness of sin through Him. (Isaiah 7:14; Hebrews 7:26; I Corinthians 15:3-4)

We believe that all mankind is born sinful and separated from God, requiring individual repentance and forgiveness through the blood of Jesus Christ, shed on the cross, as absolutely essential to be in right standing again with God. (Romans 10:9-17; John 3:16; Titus 2:11-13)

We believe that any form of sexual immorality (including adultery, fornication, homosexual behaviors, bisexual conduct, bestiality, incest, and use of pornography) is sinful and offensive to God. (Matt 15:18-20 ; I Cor. 6:9-10)

We believe that God offers redemption and restoration to all who confess and forsake their sin, seeking His mercy and forgiveness through Jesus Christ (Acts 3:19-21; Romans 10:9-10; 1 Cor 6:9-11.

We believe that every person must be afforded compassion, love, kindness, respect, and dignity (Mark 12:28-31; Luke 6:31). Hateful and harassing behavior or attitudes directed toward any individual are to be repudiated and are not in accord with Scripture or the beliefs or practices of Vacaville Christian Schools.

We believe in the continuing ministry of the Holy Spirit, by Whose indwelling, the Christian is enabled to live a godly life. (Ephesians 5:18; 4:30; I Corinthians 3:16)

We believe in the second coming of Christ and the resurrection of believers. (I Thess. 4:16-17; Revelation 19:20; 20:11-15)

We believe in the spiritual unity of all believers in the Lord, Jesus Christ. (Ephesians 1:22-23; Romans 8:9). I understand the standards of VCS in all areas including character, academics, social, and spiritual development. I recognize that VCS is a non-denominational school that fully supports the local Christian churches in the community.

I have read the "Statement of Faith" printed above and by my signature below, I acknowledge VCS' Bible based education and agree to support, uphold and abide by all of its policies and procedures. VCS exists to serve students and parents who support Christian values. All parents and students are encouraged to regularly attend a Christian church.
Parent Initials: _____ _____

I have read and understand the terms set forth in this parental commitment and will adhere to this covenant for the duration of my child's attendance at Vacaville Christian Schools. Parent Initials: _____ _____

The statement of faith does not exhaust the extent of our beliefs. The Bible itself, as the inspired and infallible Word of God, is what speaks as the final authority concerning truth, morality, and the proper conduct of mankind. It is the sole and final source for all that we believe. For purposes of Vacaville Christian School's faith, doctrine, practice, policy, and discipline, our school board is Vacaville Christian School's final authority on the Bible's meaning and application.

I have reviewed the statements above and agree to be governed by all the provisions herein.
NOTE: MUST BE SIGNED BY BOTH PARENTS

_____ _____
Signature of Father Date

_____ _____
Signature of Mother Date

Vacaville Christian Schools, admits students of any race, color, national, or ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students of the school. It does not discriminate on the basis of race, color, national, or ethnic origin in administration of its educational policies, admissions policies, scholarship and loan programs, and athletic and other school administered programs.

Vacaville Christian Schools

www.Go-VCS.com

Emergency Contacts & Medical Info

Student Information:

_____	_____	____/____/_____	☐M☐F	_____
Last Name	First Name	Date of Birth	Gender	Grade Level

Emergency Contacts (other than parents) Please note work (w), cell (c), or home (h) for type

Name	Primary #/Type	Secondary #/Type	Relationship to Child	Allowed to Pick Up
				Yes ☐ No ☐
				Yes ☐ No ☐
				Yes ☐ No ☐
				Yes ☐ No ☐

Disaster contacts (other than parents) allowed to release students in the care of, in the event of a school emergency evactuation. Please note work (w), cell (c), or home (h) for type

Name	Primary #/Type	Secondary #/Type	Relationship to Child

Authorization For Medical Treatment:

In the event of an emergency, I authorize VCS personnel to make arrangements for my child to receive medical care, including required transportation. I authorize the physician and/or dentist to undertake such care as is considered necessary. In the event the physician is unavailable, I authorize VCS personnel to arrange for emergency medical care. I agree to assume all costs incurred. I further hold the school harmless for any result of said treatment and assume solely, the financial responsibility for such treatment.

Signature of Parent:_____ **Date:**_____

Parent's Name (please print):_____

Medical Information:

Health Problems: ☐ Asthma ☐ Inhaler ☐ Epi-Pen ☐ Bee Sting ☐ Diabetes ☐ Epilepsy ☐ Food Allergy

☐ Heart Condition ☐ ADD/ADHD ☐ Other please list:_____

If you checked the box to asthma or inhaler, please fill out the included **Asthma Action Form** and bring in a peak flow meter to the school office. If you checked the box to Epi-Pen, please fill out the included **FARE Form**.

Allergies (specific):_____

If you answered no Inhaler, please give the Medical Treatment Plan you want followed if your child is having an allergic reaction. EMERGENCY RESPONDERS WILL BE CALLED If your child shows extreme signs of distress; difficulty breathing, extreme wheezing, bluish or gray areas around the mouth or fingernails, and cannot walk or becomes unconsciousness.

MEDICAL TREATMENT PLAN:_____

_____

_____

MEDICAL CONSIDERATIONS:_____

_____

_____

Does your child require medication at school? ☐ Medication is needed at school ☐ None needed at school

MEDICATIONS USED AT SCHOOL (please list):_____

_____

_____

All medications must be in their original container with doctor's instructions for school personnel to administer medication. Please complete the Medication Authorization Form for medications to be used during school hours.

Medical Insurance Information:

Insurer _____ Group # _____ ID# _____

Physician _____ Address _____ Phone _____

Dentist _____ Address _____ Phone _____

Hospital(s) Preferred: _____

Vacaville Christian Schools

www.Go-VCS.com

Student Questionnaire
6th-12th Grade Applicants

This form is to be completed by the student. Please do not type your answers. If more space is needed, please use an additional piece of paper.

_____ _____

Student's Name Grade applying for

Why do you wish to come to Vacaville Christian Schools? (Please tell us about your personal feeling and reason for choosing VCS.)

_____

_____

_____

_____

_____

What are your plans after high school?_____

_____

_____

On average, how many hours a day do you spend on homework?_____

Where do you attend church?_____

Do you have private Bible study and prayer? ☐Regularly ☐Occasionally ☐Never

What extracurricular activities interest you? (Check all that apply)

☐Music ☐Yearbook ☐Drama ☐Cheerleading ☐Missions

☐Computer Applications ☐Film/Video/Radio Broadcasting ☐Student Government/Leadership

☐Athletics (list)_____

☐Clubs (list)_____

☐Other (list)_____

Student Questionnaire

List any special academic or athletic awards you have received in the last two years:

_____

_____

Have you had difficulty with students or teachers in a current or previous school? ☐ Yes ☐ No

If yes, please explain: _____

_____

_____

Have you ever had any incidents with the police or have a police record? ☐ Yes ☐ No

If yes, please explain: _____

_____

_____

Describe your contact with tobacco, alcohol and drugs and your present attitude regarding their use:

_____

_____

_____

Have you read the standards regarding dress code and student conduct, and will you wholeheartedly support the mentioned standards? ☐ Yes ☐ No

(Dress Code and Conduct policy can be found in Parent Handbook at www.go-vcs.com)

Write a two page essay:

We would like to know how well you organize your thoughts and express them in writing, while at the same time telling us more about yourself. Please neatly write your essay on separate sheets of paper. **Typed essays will not be accepted.** Do your best to demonstrate logical organization, clear paragraph transitions, proper sentence structure and variety of expression, and absence of mechanical and grammatical errors. In your two page essay write about ONE of the following:

A. Describe 2-3 important experiences from your life that have helped shape the kind of person you are (for example: family experiences, activities, interests, hobbies, places in which you have lived or visited, service to others, etc.).

OR

B. What do you think it means to be a Christian? Describe your relationship with God over the last year or two, leading up to the present, noting any high or low experiences you feel comfortable sharing with us.

I certify that all information given on all application materials is correct and complete. I understand that any omission or misinformation may result in denial of my application or dismissal from Vacaville Christian Schools.

Student Signature_____ Date_____

Parent Signature_____ Date_____

Vacaville Christian Schools

www.Go-VCS.com

Educator's Evaluation
6th-12th Grade Applicants

To the Parent: Please PRINT all information in this section, then give this form to a present (or most recent) teacher, counselor or principal to complete. **In compliance with confidentiality and privacy laws, this form must be submitted directly to VCS by the person or institution completing this form. This form will not be disclosed to the parents.**

Student's Name:_____ Sex: ☐ M ☐ F
Last First Middle

Date of Birth:_____ Current Age:_____ Current Grade:_____

Home Address:_____
Street City State Zip

To the Teacher, Counselor, or Principal: Your candid evaluation of the student's academic and personal ability to participate in a rigorous academic experience is appreciated. Please print clearly. **In compliance with confidentiality and privacy laws, this form must be submitted directly to VCS. Please fax or email this form directly to the VCS Admissions Office. Fax: 707-446-1514 Email: admissions@go-vcs.com.**

Name:_____ Position:_____

School:_____ Office Phone:_____

Address:_____
Street City State Zip

1. The student has been sent to my office for disciplinary problems: ☐ Never ☐ Seldom ☐ Often

2. The student has been suspended _____ times.

3. The student has been expelled and therefore not eligible to return next year: ☐ Yes ☐ No

4. In your view, what are the student's particular strengths?

_____

_____

_____

5. In your view, what are the student's particular weaknesses?

_____

_____

_____

6. Please evaluate the student's personal qualities in relation to other students of the same age.

Qualities	Outstanding	Excellent	Good	Average	Below Average	No Basis for Judgement
Energy						
Integrity/Honesty						
Self-Discipline						
Receptiveness to Ideas of Others						
Independence						
Leadership						
Social Self-Confidence						
Peer Compatibility						
Resilience						
Concern for Others						
Warmth of Personality						
Responsiblity						
Emotional Stability						
Maturity (relative to age)						

7. Please evaluate the student's academic qualities in relation to other students of the same age.

Qualities	Outstanding	Excellent	Good	Average	Below Average	No Basis for Judgement
Intellectual Curiosity						
Academic Potential						
Academic Achievement						
Reading Ability						
Written Expression						
Creativity/Imagination						
Analytical Ability						
Ability to Work with out Supervision						
Organizational Ability						
Initiative						

Comments:_____

_____

_____

Signature:_____ Date:_____

Vacaville Christian Schools

www.Go-VCS.com

Release of Specific Student Information

Vacaville Christian Schools does not release information or records concerning your child to organizations or individuals without your consent (except as noted below). There are a number of times, however, when such information may be requested. Rather than contacting you for specific permission to release information when each instance occurs, we have designed this form to serve as a release for most of those instances.

Your consent is **required** for us to release such information. If you choose to give your consent, **please initial where indicated** for each instance listed. If you wish to revoke your consent, you may do so at any time by **notifying the school in writing.** If you have any questions, please call your school's administration office.

_____ _____

Name of Student Date

Marketing/Advertising Release	**Parents' Initials**
Allows school to use information and photography to advertise enrollment and/or activities at VCS. (Advertising may be in print, multi-media, internet, or website communications social media and cable TV.)	_____
Social Media Release Allows the school to use information and photography concerning participation in school activities on social media outlets. (Includes participation in special programs, school events, athletics, honors, ect.)	_____
Room Parent Release Allows the school to release your name, address or phone number to the room parent who will supply you with information regarding class parties and activities that you may be willing to participate in.	_____
Parent Release Allows the school to release your name, address or phone number to parents in your child's class, requesting the information for out of school activities such as birthday parties, pay dates or other special events.	_____

Statement of Consent

We/I consent to the release of the specified information to the organizations and individuals noted above upon their request. We/I understand that this consent may be revoked by us/me at any time by notifying the school in writing.

_____ _____

Signature of Parent/Guardian Signature of Parent/Guardian

☐ WE DO NOT WISH ANY INFORMATION BE RELEASED (please check the box)

Vacaville Christian Schools

www.Go-VCS.com

Mr. Joseph Rowland, Principal
joseph.rowland@go-vcs.com

Dear Parents,

All 8th – 12th grade students will need an iPad for the school year. Each student is required to purchase their own iPad for daily school use. The minimum requirement is an iPad with Wi-Fi capability. You may purchase an iPad Mini, but please keep in mind it has a smaller screen. Students do not need 3G capabilities, nor does the memory need to be greater than the 16GB. Whichever model or source the iPad comes from, students need to have an iPad in their possession when school begins in August.

iPads and cases can be purchased from any source that you select. VCS does not have a preferred retailer.

Apple offers various financing plans. See www.apple.com/ipad for details.

Insurance coverage would have to be renewed and paid upon expiration.
**Two-Year Accident Coverage can be purchased by visiting: http://www.worthavegroup.com/ipad.

*Apps are not included. A list of the necessary apps will be given to all students. Total required Apps fees are estimated at $50 for the school year, but may be more or less depending on grade level requirements.

If you need help with any of these requirements or further information, please contact our Admissions Office at (707) 446-1776 ext. 1614.