



Vacaville Christian Schools

www.Go-VCS.com

ADMISSIONS USE ONLY

App Date Received: ___/___/___

App Fee: _____ CASH CC CK# _____

Application Received by: _____

OFFICE USE ONLY

PowerSchool ID: _____

Reg Fee: _____ CASH CC CK# _____

Student Start Date: ___/___/___

Kindergarten 1st-5th grade

6th-8th grade 9th-12th grade

How many courses _____

HS Dipoloma Option

2023-2024 2024-2025

Student Application Home2School Connection Hybrid Homeschool Program

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

Legal Last Name _____ Legal First and Middle Name _____ Date of Birth ___/___/___ M F Gender _____ 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 _____ Home Phone _____

Mailing Address _____ City _____ State _____ Zip _____

Occupation: _____ Employer: _____

Email Address: _____ Work Phone: _____

Cell Phone: _____

Guardian #2 Information: Relationship to Student: _____

Last Name _____ First _____ Home Phone _____

Mailing Address _____ City _____ State _____ Zip _____

Occupation: _____ Employer: _____

Email Address: _____ Work Phone: _____

Cell Phone: _____

How did you hear about VCS? 1.VCS Parent Referral/Friend's Name: _____ *ask for referral form

2.Google search 3.Facebook advertisement 4.Drive by/Location 5.Vacaville Magazine 6.My other child attends VCS

7.I am VCS Alumni 8.Other _____ 9.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.



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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, play 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)



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 evacuation. 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: _____



Parent & Student Handbook Acknowledgement

Student's Name: _____

Please read through the VCS Parent & Student Handbook from the VCS website, <http://www.go-vcs.com/parent-handbooks>, read the following statements carefully and sign below to indicate your agreement.

I hereby affirm that I have read the Student Handbook and have discussed its policies with my student. I certify that I consent to and will submit to all governing policies of the school, including all applicable policies in the Student Handbook. I understand that the standards of the school do not tolerate profanity, obscenity in words or actions, dishonor to the Holy Trinity and the Word of God, disrespect to the personnel of the school, or continued disobedience to the established policies of the school.

I understand that the services of the school are engaged by mutual consent, and that either the school or I reserve the right to terminate any or all services at any time (subject to the schools financial withdrawal guidelines). I understand that this handbook does not contractually bind Vacaville Christian Schools and is subject to change without notice by decision of Vacaville Christian Schools. Admission to the school is a privilege, not a right, and admission for one school year does not guarantee automatic admission for future school years. Students in grades 6-12: Please read the following statement carefully and sign below to indicate your agreement. I hereby affirm that I have read the Student Handbook. I certify that I consent to, and will submit to all governing policies of the school, including all applicable policies in the Student Handbook.

I understand that admission to the school is a privilege, not a right, and that any behavior, either on or off campus, which is not consistent with the school's standards could result in the loss of that privilege.

NOTE: MUST BE SIGNED BY BOTH PARENTS

Student's Signature Date

Signature of Father/Legal Guardian Date

Signature of Mother/Legal Guardian Date



Grandparents Information Sheet

Throughout the year, VCS hosts many special events. We would like to invite the Grandparents of your student to join us for these events. Please provide us with their address, phone number and email address.

Name of Grandchild: _____ Grade: _____

Grandfather's First Name: _____ Grandfather's Last Name: _____

Grandmother's First Name: _____ Grandmother's Last Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Grandfather's First Name: _____ Grandfather's Last Name: _____

Grandmother's First Name: _____ Grandmother's Last Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____



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Student Information Sheet K-5th Grade Applicants

Please note: This information is provided by the PARENT. All candidates for admission will be tested for grade level placement and require a reference from their previous teacher.

Student's Name: _____ Grade last completed: _____ Applying for: _____

How did you hear about our school? _____

Previous School Attended:

School (s): _____

Address: _____

Phone: _____ Teacher: _____

Reason for leaving school? _____

Please answer the following questions:

1. Does your child have problems that might affect his/her ability to learn in school?

____ Yes ____ No Please describe _____

2. Describe your philosophy of child training and discipline. What method(s) of discipline do you utilize with your child? _____

3. Does your child obey instruction? ____ Yes ____ No

4. What are your child's most difficult subjects? _____

5. What are your child's best subjects? _____

6. Has your child ever received any of the following? (Please check if applicable)

____ Tutoring ____ Chapter 1 ____ Resource ____ Speech/Language ____ Specialized Testing

7. If tutoring, by whom, and for what? _____

8. Has your child ever received specialized testing? For what? _____

Student Information

9. Please list the student's special interests, skills, or hobbies: _____

10. What are your child's personal goals for the coming year? _____

11. What do you expect to find at Vacaville Christian Schools that you would not find in another school?

12. Why did you choose Vacaville Christian Schools? _____

13. Is your child now or has he/she in the past been involved in:

A. Any scholastic difficulties in school? _____ Yes _____ No

B. Any discipline problems in school? _____ Yes _____ No

C. Suspension or expulsion from a previous school? _____ Yes _____ No

If you have answered "yes" to any of the above questions, please briefly explain here:

14. Please describe the Christian values you view as critical for your child's development and growth.

15. In regard to your child, please describe any special needs VCS should be aware of in order to provide the most effective learning and discipleship environment. _____



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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 _____



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Educator Evaluation Survey K-5th Grade Applicants

Dear Educator,

_____ has applied for admission to _____ grade

at Vacaville Christian School. Your candid evaluation of the student's academic and personal ability to participate in a rigorous academic experience is appreciated.

We appreciate your time and participation as this is a requirement for admission.

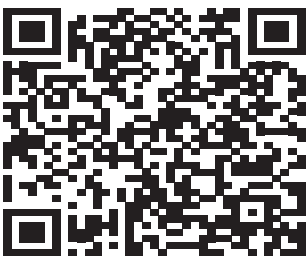
The school is requesting that you complete a survey for this student by using the QR code below, or by logging in to this link: <https://forms.gle/bgveXvFsB3R5xrK19>

To use the QR code: 1. Open the camera app on your phone. 2. Focus the camera on the QR code by gently tapping the code. 3. Follow the instructions on the screen to complete the action.

If you have any questions, please contact:

Vacaville Christian School Admissions office:
707-446-1776
admissions@go-vcs.com

QR Code for Form:



To the Parent: Please PRINT all information in this section, then give this form to a current teacher, counselor or principal to complete the survey. This survey will not be disclosed to the parents.

Student's Name: _____ Sex: M F

Date of Birth _____ Current Age _____ Current Grade _____

Home Address: _____



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Educator Evaluation Survey 6th-12th Grade Applicants

Dear Educator,

_____ has applied for admission to _____ grade

at Vacaville Christian School. Your candid evaluation of the student's academic and personal ability to participate in a rigorous academic experience is appreciated.

We appreciate your time and participation as this is a requirement for admission.

The school is requesting that you complete a survey for this student by using the QR code below, or by logging in to this link: <https://forms.gle/mF4L7vhP2aiZoFBR6>

To use the QR code: 1. Open the camera app on your phone. 2. Focus the camera on the QR code by gently tapping the code. 3. Follow the instructions on the screen to complete the action.

If you have any questions, please contact:

Vacaville Christian School Admissions office:
707-446-1776
admissions@go-vcs.com

QR Code for Form:



To the Parent: Please PRINT all information in this section, then give this form to a current teacher, counselor or principal to complete the survey. This survey will not be disclosed to the parents.

Student's Name: _____ Sex: M F

Date of Birth _____ Current Age _____ Current Grade _____

Home Address: _____



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Parent & Student Biblical Worldview Survey

Dear Parent of Applicant,

VCS is requesting that you complete this Parent Biblical Worldview Survey by using the QR code below, or by logging in to this link: <https://forms.gle/Xhiq1VT95GTe32dy6>

To use the QR code: 1. Open the camera app on your phone. 2. Focus the camera on the QR code by gently tapping the code. 3. Follow the instructions on the screen to complete the action.

**This survey is required for admission.



Dear Student:

(6th through 12th Grades Only)

To complete the Student Biblical Worldview Survey, please use the QR code below or log in to this link: <https://forms.gle/BdrFuDto5YX1NQQW9>

**This survey is required for admission.





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Pastor Survey K-12th Grade Applicants

Dear Pastor or Church Leader,

_____ has applied for admission to _____ grade

at Vacaville Christian School. We welcome any information or comments you have regarding his/her character and spiritual life.

We appreciate your time and participation as this is a requirement for admission.

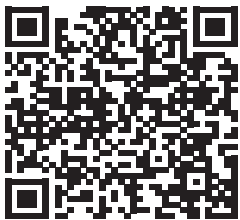
The school is requesting that you complete a survey for this student by using the QR code below, or by logging in to this link: <https://forms.gle/ApwyMvKGkqn9ZWc2A>.

To use the QR code: 1. Open the camera app on your phone. 2. Focus the camera on the QR code by gently tapping the code. 3. Follow the instructions on the screen to complete the action.

If you have any questions, please contact:

Vacaville Christian School Admissions office
707-446-1776
admissions@go-vcs.com

QR Code for Form:





Dear Middle and High School families,

Welcome to VCS! We are very excited about the opportunities your student will have here at Vacaville Christian. VCS uses a variety of technology in the educational process on our campus. The tools we use allow for extremely effective technological support for instruction.

1. VCS employs a Learning Management System (LMS) called Schoology. Once logged into Schoology, using the students Power School credentials, students will find a home page which serves as a hub for all information, links, and paperwork associated with each class.
2. Every student in middle and high school will need a tablet or laptop to aid instruction. Our IT department has provided a list of minimum requirements for these devices whether they be tablet or laptop units. (Please see below)

Device specifications:

- Laptops or tablets that use a digital pen or stylus
- Laptops or tablets with a minimum of 128gb of storage
- Laptops or tablets that can install applications and programs (Chromebooks are not a viable option because they do not allow for installation of apps and programs)
- Laptops or tablets with a keyboard (not required but highly recommended)
- Laptops or tablets with a camera

iPads, Android, EVOO, or Samsung tablets, Lenovo ThinkPads, or laptops are all ACCEPTABLE devices.

Other options for obtaining a device would include using a vendor called Insight. Insight is aware of the technology needs and the platform, for our school, and have negotiated highly competitive pricing with our IT department. These devices were specifically designed in collaboration with our IT team and Lenovo to best suit our students' needs.

If you need help with any of these requirements or further information, please contact your student's school office.

Middle School (707) 446-1776 x 3000

High School (707) 446-1766 x 4000