

## Dear Prospective Family,

Thank you for considering Vacaville Christian School (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 an exceptional educational climate that will encourage your child to pursue academic excellence, and 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 on our website, [www.go-vcs.com/parent-handbooks](http://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 School 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 lifestyle 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 School 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. If you have not visited our campus, I encourage you to schedule a personal tour, as soon as possible. We 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!

Director of Admissions

**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 standardized test scores from the past two years (if applicable)
- Completed Application and Parental Commitment form (must be signed by BOTH parents)
- Release of Specific Student Information
- Handbook Agreement
- Emergency Contacts form
- Student Information Sheet
- Educator's Evaluation (online)
- Pastoral/Church Leader Survey (online)
- Parent Biblical Worldview Survey (online)

\*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, need to be signed and complete.

**B. Application Fee:** A non-refundable application fee of \$100.00, must accompany the completed application packet.

**C. Online Surveys:** Online Surveys must be completed before interviews are scheduled. The Pastoral/Church Leader survey is not required for admission, but applicants will be given a favorable review with one submitted.

2

**Step Two: Testing** - After the Admissions Office has received your **completed application packet**, your child will be scheduled for placement testing.

**A. New Student Placement Testing:** The second step in the admissions process is the New Student Placement Test. This evaluation will determine proper grade level placement. **All new student testing appointments will be scheduled individually with the Admissions Office.**

3

**Step Three: New Family Interview** -

**A. New Family Interview:** This appointment will be scheduled after the student has completed the placement test and all online surveys have been completed. (Pastoral/Church Leader survey not required).

Parents will have a personal interview with the Elementary Principal. **The student will not attend.** You will receive a call from the Admissions Office to schedule this appointment.

4

**Step Four: Acceptance & Completion of School Registration** - In order to secure your child's spot, please return your enrollment contract and supplemental documents to the Admissions office within seven (7) days of receipt. Please be sure to include the non-refundable registration fee of \$250. Applications for students beyond the number we are able to accept will be placed on a waiting list.

**A. Signed Contract of Payment and Liability Contract**

**B. Remittance of non-refundable registration fee of \$250**

**C. Completion of online Blackbaud Tuition Management account registration**

**D. Supplemental documents included in acceptance packet**

Vacaville Christian School, 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 School

[www.Go-VCS.com](http://www.Go-VCS.com)

## ADMISSION APPLICATION

**PLEASE PRINT OR TYPE CLEARLY**

### ADMISSIONS USE ONLY

App Date Received: \_\_\_\_/\_\_\_\_/\_\_\_\_

App Fee: \_\_\_\_\_ CASH CC CK# \_\_\_\_\_

Application Received by: \_\_\_\_\_

Forwarded to Registrar: \_\_\_\_/\_\_\_\_/\_\_\_\_

### OFFICE USE ONLY

PowerSchool ID: \_\_\_\_\_

Reg Fee: \_\_\_\_\_ CASH CC CK# \_\_\_\_\_

Student Start Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Extended Care Option:

K-8 Full-Time

Full-Time Minister  Military  Rewards

Sibling to current VCS Student  Staff

2026-2027  2027-2028  Wait List

**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 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 Name \_\_\_\_\_ 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 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 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 School.

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 School. 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



### Student Information:

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ M \_\_\_\_\_ F \_\_\_\_\_ 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

### 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 get an **Asthma Action Form** from your doctor and bring in a peak flow meter to the school office. If you checked the box to Epi-Pen please bring a **FARE Form** to the office.

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.

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## Medical Insurance Information:

Insurer \_\_\_\_\_ Group # \_\_\_\_\_ ID# \_\_\_\_\_

Physician \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

Dentist \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

Hospital(s) Preferred:  

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# Vacaville Christian School

[www.Go-VCS.com](http://www.Go-VCS.com)

## 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 an Educator's Evaluation completed by their previous teacher or administrator.

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 challenges 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 correction do you utilize with your child? \_\_\_\_\_

3. What are your child's best subjects? \_\_\_\_\_

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

5. Please list the student's special interests, skills, or hobbies: \_\_\_\_\_

6. What are your child's personal goals for the coming year? \_\_\_\_\_

## Student Information

7. Why did you choose Vacaville Christian School and what do you expect to find here that you wouldn't find at another school? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

9. 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. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

10. Has your child ever received any of the following? (Please check if applicable)  
 Tutoring       Resource       Speech/Language       Specialized Testing

11. If tutoring, by whom, and for what? \_\_\_\_\_

12. Has your child ever received specialized testing? For what? \_\_\_\_\_

13. Does your child obey instruction?  Yes  No

14. 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:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



### Be a Part of the VCS Story!

At Vacaville Christian School, we love capturing the joy, creativity, and achievements of our students to showcase what makes our school family so special. Your child may be included in photos or videos that highlight the vibrant experiences and memorable moments happening here, such as academic successes, sports, school activities, honors, and special events. These images help us celebrate our amazing students and share the heart of VCS with others.

These highlights may be included in:

- Sharing updates in school newsletters
- Showcasing school spirit on social media
- Creating school brochures and flyers for prospective families
- Celebrating our students through print and multimedia projects

Your child will feel proud to be recognized and celebrated as a vital part of our school family. These moments inspire others and show the heart of VCS to our community!

Rest assured:

We respect your privacy. This permission is only for sharing school-related moments, and you can change your mind anytime by letting us know in writing.

Photo and Video Permission:

We're excited to share the great moments happening at Vacaville Christian School (VCS)! By giving your permission, you allow us to use photos or videos of your child for the purposes outlined above. Thank you for helping us highlight the wonderful things happening in our school community!

Child's Name: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_



**Vacaville Christian School** does not release information or records regarding your child to organizations or individuals without your consent (except as noted below). However, there are situations where such information may be requested.

To streamline this process, this form serves as a general release for those instances, rather than requiring specific permission each time.

Your consent is required for us to release the information described below. Please check the box for each instance in which you grant consent. You may revoke your consent at any time by providing written notice.

### **Room Parent Release**

Allows the school to share your name, phone number, and/or email address with the room parent, who will provide you with information about class parties and activities you may wish to participate in.

### **Classmate Connection Authorization**

Allows the school to share your name, phone number, and/or email address with parents in your child's class who request the information for out-of-school activities, such as birthday parties, playdates, or other special events.

### **Statement of Consent**

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

- Room Parent Release
- Classmate Connection Authorization

Child's Name: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

For questions, or to withdraw consent, submit a written request to:

Vacaville Christian School Attn: Admissions, 1117 Davis St., Vacaville 95688, or Email us at: [Admissions@Go-VCS.com](mailto:Admissions@Go-VCS.com). Include your name, child's name, and specific details of the opt-out request.



## 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

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Student's Signature

Date

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Signature of Father/Legal Guardian

Date

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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: \_\_\_\_\_



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.

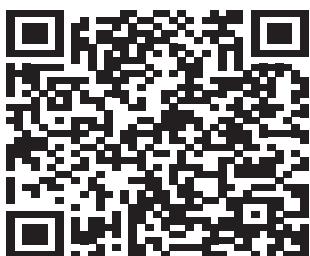
The school is requesting that you complete a survey for this student by using the QR code below, or by logging in to this link: <https://forms.gle/bgveXvFsB3R5xrK19>

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: \_\_\_\_\_



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.





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 helpful 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:

