

Stockton

Baptist

School

Academic Excellence

but always with a Spiritual Emphasis

**Student Application**

**2023-2024**

5480 N. Highway 99

Stockton, CA 95212

(209) 931-6101

[www.sbschool.info](http://www.stocktonbaptistchurch.org)

Email: [info.sbschool@gmail.com](mailto:school@stocktonbaptistchurch.org)

www.sbschool.info

www.sbcstockton.com

A Ministry of

Stockton Baptist Church

Pastor Steve Kihlthau

www.sbcstockton.com

#### Tuition Fee Schedule for the 2023-2024 School Year

YEARLY 10 MONTH \*12 MONTHS (June-May)

##### KINDERGARTEN-EIGHTH GRADE (8am-3:00pm)

FIRST STUDENT $4,500.00 $465.00 $380.00

SECOND STUDENT + $3,600.00 $375.00 $315.00

**NINTH-TWELFTH GRADE (8AM-3:00PM)**

FIRST STUDENT $4,550.00 $470.00 $395.00

SECOND STUDENT + $3,950.00 $410.00 $340.00

**Tuition Referral Program:** For each enrolled students that you have referred you will receive:

**$50.00** off your tuition each month they are enrolled the first year. **$25.00** off each month they are enrolled for the second year.

**Payment dates:** We can only operate on timely tuition payments**. A late fee of $30.00 will be assessed after the**

**5th or the 20th of the month. You may choose one of the following options:**

1st of each month or the 15th of each month or split your payment on the 1st & the 15th of each month

**Extended School Day: Monday through Friday 3:15-4:00 -** Students needing help with their school work may stay and be given ***homework help*** during this time.

**After School Care**: - $100.00 per month. After School Care runs from 4:00-4:30pm (M-F) Students must be picked up by 4:30pm or extra charges will apply.

**Non-Refundable Books and Registration Fees:**

#### Book Fee: K-12th Grade: $325.00 The book fee must be paid for in advance before books can be ordered. The student books become your property, and you are responsible for the cost of replacing lost or damaged books.

**Registration Fee: After 4/30/2023 $150.00**

**Registration Discounts - If paid before 3/31/23- $75.00; before 4/30/23- $100.00**

This fee has the following purposes: (1) to reserve a place for the student, (2) to acquire school equipment not acquired by fund-raisers, (3) membership fees to GSACS, and (4) all school curriculum. This is an annual fee and is due at the time of registration for the student and is **non-refundable**. Only upon payment of this fee is your child’s space reserved.

**Annual Testing Fee: $30.00 -** This is required for all students K-12th grade. It is a tool used for the school and parents to see how the students are progressing.

#### 

#### Families are required to participate in fundraisers. Families wishing to not participate in fundraisers throughout the year will be allowed to exempt themselves at a charge of $150.00. Payment of this fee can be split into two payments of $75.00 each on your October and April payments.

#### PLEASE SEE FUNDRAISER EXEMPTION REQUEST FORM IN THE APPLICATION PACKET.

Stockton Baptist School accepts all major credit and debit card payments. In addition payments may now be made through ACH (Automatic Withdrawal) and our website at www.sbschool.info.

Non-Discrimination Policy

Stockton Baptist School admits students of any race to all the rights, privileges, programs, and activities made available to students at this school. This school does not discriminate on the basis of race or color in administration or its educational policies, admission policies, scholarship and loan programs, athletic and other school administered programs.

**Stockton Baptist School Admissions Checklist**

**Application Packet**

\_\_\_\_\_ Family Information/Contract

\_\_\_\_\_ Student Information Page

\_\_\_\_\_ Church/Parent/Emergency/Pick Up Authorization Form

\_\_\_\_\_ Consent for Administration of Medications/Medication Chart

\_\_\_\_\_ Understanding/Commitment Form

\_\_\_\_\_ Student Standard of Conduct Form

\_\_\_\_\_ Field Trip Permission Form

\_\_\_\_\_ Photo/Media Release Permission Form

\_\_\_\_\_ Fundraiser Exemption Request Form

\_\_\_\_\_ Pastoral Recommendation Form (9th-12 Grade)

\_\_\_\_\_ Policy Statement

\_\_\_\_\_ Health & Safety Plan

**Other Forms**

\_\_\_\_\_ Birth Certificate

\_\_\_\_\_ Immunization Record

\_\_\_\_\_ HS Transcripts - (Unofficial)

\_\_\_\_\_ Lunch Application - Turned into Kitchen

**Fees (Amount Collected)**

$\_\_\_\_\_ Registration Fee

$\_\_\_\_\_ Book Fee

$\_\_\_\_\_ Tuition

$\_\_\_\_\_ Testing Fee

$ \_\_\_\_\_ Fundraising Exemption Fee

**School Office (Date)**

\_\_\_\_\_ CUM Requested

\_\_\_\_\_ CUM Received

\_\_\_\_\_ Official Transcript

\_\_\_\_\_ K/7th Grade Immunization Form Updates



**Stockton Baptist School 2023-2024**

**Noah’s Ark Preschool**

**Family Contact Information** Please fill in completely and sign

Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade: \_\_\_\_\_\_\_\_\_\_\_\_ DOB: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Payer’s Name: Mr. Mrs. Ms. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Payer’s Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Payer Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **/** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Secondary Contact: Mr. Mrs. Ms. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Payer’s Street Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Apt: \_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ST:\_\_\_\_\_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SSN#: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**1**

Circle one

First Middle Last

Circle one

First Middle Last

**Plan Options**

A $30 late fee will be charged to each account if past the 5th or the 20th.

***Due on the 1st & 15th***

***Due on the 15th***

***Due on the 1st***

**2**

**10 Installments: 12 Installments: Other:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Due ***8/1/2023 to 5/1/2024*** Due ***6/1/2023 to 5/1/2024 Dates: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

**10 Installments: 12 Installments: Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Due ***8/1/2023 to 5/1/2024*** Due ***6/1/2023 to 5/1/2024 Dates: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

**20 Installments:**

***Due the 1st and 15th of each month***

***from 8/1/2023 to 5/15/2024***

**Pay tuition in full: $0**

**Registration & Books $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Amount due**

**$ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ date paid \_\_\_\_\_\_\_\_\_\_\_\_ $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ date paid \_\_\_\_\_\_\_\_\_**

**BOOKS can only be ordered when paid for.**

**In order to qualify for early registration discount, payments must be made on time.**

**Books & Registration is non-refundable.**

**3**

Administrator Signature Date

1. Tuition $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2.  -Scholarships $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3.  **=Total Plan Amount $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

4. divide 9,10,12 or 20 \_\_\_\_\_\_\_\_\_

5.  **= Installment Amount $\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**SCHOOL USE ONLY**

**Notes:**

Signature required

**2023-2024 Stockton Baptist School Student Information Form**

1st Child’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Last) (First) (Middle Initial)

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Street) (City) (ZIP)

Grade: \_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_\_\_ Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Right or Left Handed (circle one) Student's grades have been: ( ) Superior ( ) Above Average ( ) Average ( ) Below Average

Physical Difficulties: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Food or Drug Allergies: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Previous School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

2nd Child’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Last) (First) (Middle Initial)

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Street) (City) (ZIP)

Grade: \_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_\_\_ Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Right or Left Handed (circle one) Student's grades have been: ( ) Superior ( ) Above Average ( ) Average ( ) Below Average

Physical Difficulties: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Food or Drug Allergies: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Previous School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

3rd Child’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Last) (First) (Middle Initial)

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Street) (City) (ZIP)

Grade: \_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_\_\_ Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Right or Left Handed (circle one) Student's grades have been: ( ) Superior ( ) Above Average ( ) Average ( ) Below Average

Physical Difficulties: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Food or Drug Allergies: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Previous School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

4th Child’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Last) (First) (Middle Initial)

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Street) (City) (ZIP)

Grade: \_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_\_\_ Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Right or Left Handed (circle one) Student's grades have been: ( ) Superior ( ) Above Average ( ) Average ( ) Below Average

Physical Difficulties: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Food or Drug Allergies: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Previous School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Church Information**

Church now attending: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Pastor’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Parent Information**

## Father’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Home Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## Occupation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work Phone:

Company Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Company Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## Mother’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Home Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## Occupation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work Phone: \_\_\_\_\_\_\_\_\_

Company Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Company Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

With whom does the student reside?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Two Emergency Phone Numbers – to be contacted when parents cannot be reached:**

1. Name Phone # Relationship to student

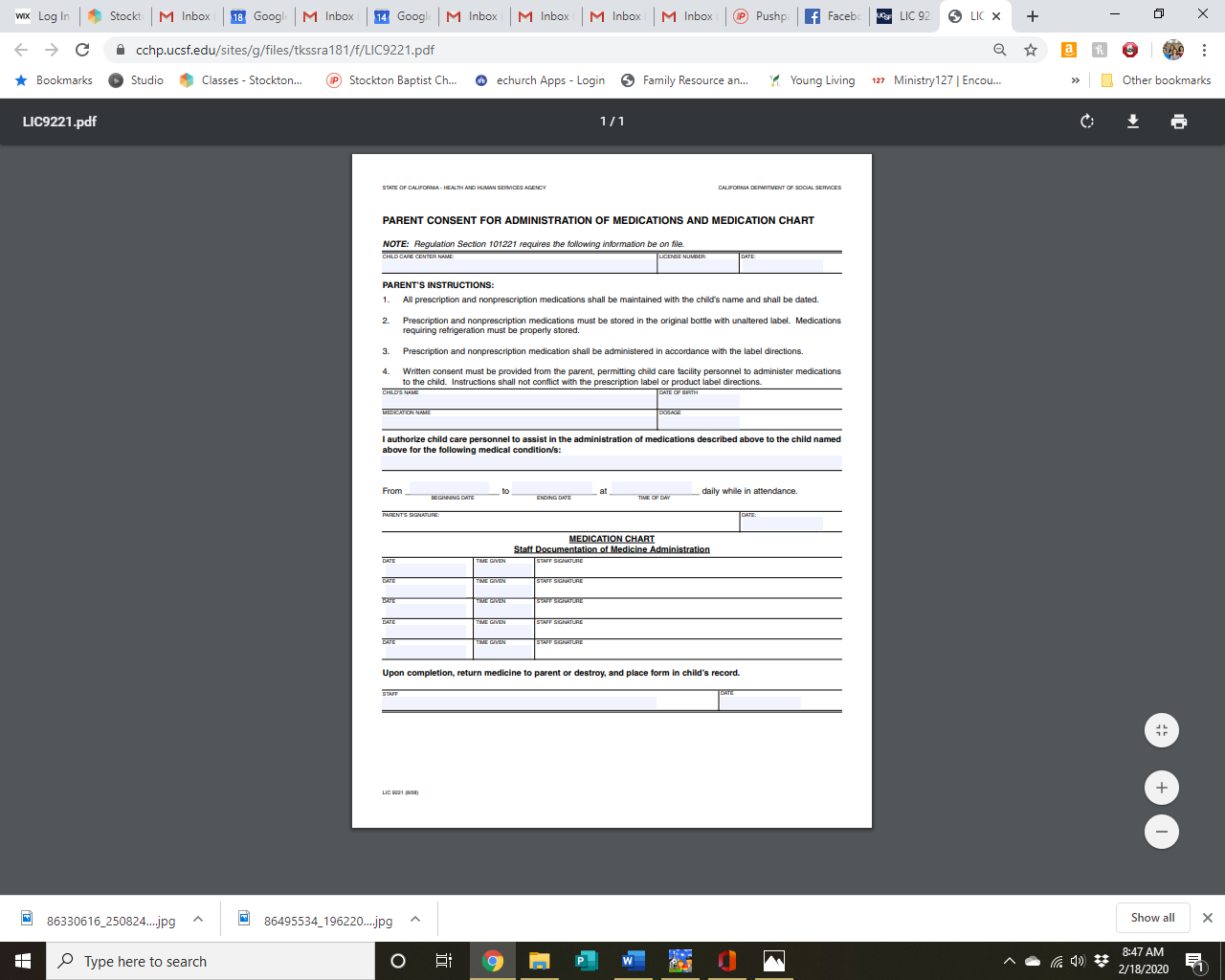
2. Name Phone # Relationship to student

**Child Pick-Up Authorization**

**The following people have permission to pick up my child:**

|  |  |  |
| --- | --- | --- |
| Name | Phone Number | Relationship to child |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

#### Parent's Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_



**Parent Understanding and Commitment is required for admission:**

“We the parents or guardians of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ do hereby request enrollment in Stockton Baptist School for our child. We know that the Bible places primary responsibility on the home for education, especially on the father, and we request this school to assist us in meeting this responsibility. It is our conviction that our child must have an academic education based on the Word of God and its teachings. We hereby certify that we request this school to operate on our behalf with the following understanding:

1. I understand that it is an effort of this school to meet the needs of the families of the church and community to train up our children in the way that God would have them go, and that the Bible teaching will be reflected in all affairs and teachings of the school.

2. I understand that it is expected of our family that we will maintain a family and church life that is consistent with the teachings of the Word of God. This should include regular prayer and Bible reading, church attendance, and loyal support for the school ministry.

3. I realize that from time to time children take issue with actions that they do not agree with and that they are prone to criticize statements out of context. This being normal for children, I pledge that should such occur, I will not support the criticism; that I will correct my child, support the school personnel, and call the school for full details at any time I have a question concerning an incident.

4. I further realize that building strong relations with my child’s teacher to aid in the training of my child is as much my responsibility as it is the school’s, and that I must pray for the staff and program, cooperate with them in discipline, be accepting of their judgment in such matters, lay a spiritual foundation through Godly example in the home, support the spiritual training of chapel, revivals, etc., follow through with any work assignments or slips to be signed, see that the child starts school on time, keep written excuses for absence or tardiness, cooperate in training the child to respect school property and pay for irregular abuse of same, attend all parent functions and assist in publicizing the school.

5. I understand that parents or students who are not in harmony with the school standards or programs will be asked to submit to the program; if they will not, the parents will be asked to withdraw their child.

6. I realize that attending Stockton Baptist School is a privilege and not a right; and it is my intention to abide by the decisions and to support the discipline of the administration.

I have read and understood the information materials furnished as well as the school handbook, and agree to insist that my child submit to the programs academic and disciplinary regulations and all other requirements instituted by the administration and carried out by the faculty.

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Father’s Signature Date

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Mother’s Signature Date

Stockton Baptist School STUDENT STANDARD OF CONDUCT

Student’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Age \_\_\_\_\_\_\_\_\_\_\_

Last First MI

The student’s attitudes, conversation, and behavior reflect the character of the institution from which he derives his training, both home and church. This form reflects the Christian school’s attempts to secure students who would best adjust to the rigor of a highly disciplined training program that must set high standards. These standards will result in a charactered student to lead in reformation for our nation and the world.

Do you attend church regularly? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Where? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you a Christian? \_\_\_\_\_\_\_\_\_\_ At what age did you receive Christ as your Savior? \_\_\_\_\_\_\_

Do you accept the Bible as God’s Word and submit yourself to its principles as a final authority in every area of your life? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you sincerely pledge allegiance to the Christian and national flags? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you ever smoked\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Have you ever drunk alcoholic beverages? \_\_\_\_\_\_\_\_\_

Have you ever used or possessed narcotics (dope, pills, marijuana, etc.) of any kind? \_\_\_\_\_\_\_\_\_\_

Have you ever run away from home? \_\_\_\_\_\_\_\_\_\_\_\_\_ If yes, how long ago? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Will you promise not to draw, wear, or display in any way anti-Christian symbols?\_\_\_\_\_\_\_\_\_\_\_

Will you agree to dress according to the uniform guidelines and hair code? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Will you agree to dress in public in a manner that will be a consistent, daily example of our Lord Jesus Christ? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Will you honestly agree to keep all the school rules and respect authority without being critical and finding fault? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

General Policy:

Students are expected to abide by these standards of conduct throughout their enrollment whether at home, church, or elsewhere. Students found to be out of harmony with the school’s ideals of work and life may be invited to withdraw whenever the administration determines it is necessary.

As a student of the Christian school, I pledge to uphold this school’s standards against cheating, fighting, swearing, smoking, gambling, dancing, drinking alcoholic beverages, using or talking favorably about narcotics, or using indecent language, and will act in a very orderly and respectful manner. I will maintain Christian standards in courtesy, kindness, morality, and honesty. I will strive to be of unquestionable character in dress, conduct, and other areas of life.

I agree to abide by the above standards of conduct and other regulations expected of each student enrolled in this Christian education program while I am a student attending the school and will not give the impression to students, parents, or faculty that I am not in harmony with the goals, aims and standards of the school.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student’s Signature Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent’s Signature Principal’s Signature

Field Trip Permission Form– 2023-2024

Please Print

Student Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City, Zip:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I hereby give permission for my child to participate in the following:

All field trips with Stockton Baptist School

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, give my permission for my student to travel with the school program to and from field trips. As a parent or guardian, I hereby give my consent for the responsible leader to authorize necessary hospitalization or treatment, including injections, anesthesia, surgery, and medication, should an accident or other medical emergency occur during a trip or activity and the responsible leader is unable to reach me.

As parent or guardian, I also agree to be responsible for all debts not covered by Stockton Baptist School that are incurred by the student during the trip or activity, for all expenses not covered by insurance that are incurred as a result of any accident, illness, or medical emergency involving the student, and for all transportation costs to prematurely return the student to Stockton, CA, should the student’s continued participation jeopardize the safety or health of the other participants.

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

Medical #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dr. Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Known Allergies\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Photo/Media Permission

In order to best promote our school, we would like to ask permission to photograph/video tape your child to use in any of our publications. Please sign below to give your permission.

Thank you,

Stockton Baptist School Staff

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ give Stockton Baptist School permission to photograph/video tape my child(ren).

Child(ren) Name(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent Signature Date

**FUNDRAISER EXEMPTION REQUEST**

2023-2024

**Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

In order to help provide the students of Stockton Baptist School and Noah’s Ark Preschool with the funds necessary to maintain safe and enjoyable buildings, playground equipment and facilities, I understand that Stockton Baptist School and Noah’s Ark Preschool will occasionally host a fundraiser to obtain those funds. Fundraising is sometimes time-consuming and not always convenient, therefore, parents may wish to opt out of a year’s fundraisers for their child(ren).

In this case, as stated in our school and preschool handbooks, there will be a $150 fee charged per student to become exempt from all fundraisers for that school year. If you’d like to pay this upfront, you are welcome to do so. We also offer the option to pay this fee in a split payment of $75 charged to both your October and April payments. If you would like to request to be exempt, please fill out the below (one form per child):

Please check one option:

\_\_\_\_\_\_\_ $150 payment to be charged in October

\_\_\_\_\_\_\_ Two $75 payments to be charged once in October and once in April

**I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ hereby request to be exempt from all fundraisers in the current school year of 2023-2024. I commit to the above marked fees to be charged to my child’s tuition payment(s).**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature Date**

**Stockton Baptist School**

**Pastoral Recommendation (7th-12th Grade Only)**

Dear Pastor,

The following student is applying for admission to Stockton Baptist School. Please complete and return the following information as soon as possible. We must have this information in order to complete the processing of the application. All information will be kept confidential. Thank you for your assistance.

Student’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

How long have you known the student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

In what church activities does the student participate? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How would you rate the student in these areas:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Superior | Above Average | Average | Below Average | Comments |
| Personal Integrity |  |  |  |  |  |
| Leadership |  |  |  |  |  |
| Self-Control |  |  |  |  |  |
| Respect for Authority |  |  |  |  |  |

How many services does the family attend per week? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What do you consider the students strong points? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What do you consider the students weak points? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Does the applicant have special skills or talents? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Additional Comments: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Pastor’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name of Church: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please mail to: Stockton Baptist School, 5480 N. Hwy 99, Stockton, CA 95212, (209) 931-6101

Or Fax to: Stockton Baptist School Attn: School Office (209) 931-6109

**Parents: Please read the following statements carefully and sign below to indicate your agreement.**

I hereby affirm that I have read the Student Handbook and 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, fighting, obscenity in word or action, dishonor to the Holy Trinity and the Word of God, disrespect to the personnel of the school or any students, 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. I understand that this Handbook does not contractually bind Stockton Baptist School and is subject to change without notice by decision of Stockton Baptist School’s governing body. 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.

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Signature of Mother Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Father Date

**Students in Grades 7-12: 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 this Handbook does not contractually bind Stockton Baptist School and is subject to change without notice by decision of Stockton Baptist School’s governing body.

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.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Student Date