112 Jackson Avenue Ripley, WV 25271

P: (304) 786-1234 office@ripleychristian.com

F: (304) 786-1121

Student Application

After all forms have been returned to RCA, we will contact you to let you know when we have received your application.

Applicants may not receive an immediate verdict, but rather be placed in the applicant pool until the enrollment period has ended. If you have any questions during the application process, call, email, or visit us anytime!

PERSONAL DA	TA									
Date	Legal Name: Last	Fi	rst				Middle	Usual	Usually Called	
Grade to Enter	Year Applying For	Birth date	Birthpl	place			Social Secur	ty Number	ımber Gender:	
		/ /						Male □ Female		
SCHOOLS ATT	ENDED									
School Name		City, State					From	То	Grades Completed	
School Name		City, State					From	То	Grades Completed	
School Name		City, State					From	То	Grades Completed	
	ACKGROUND age - Circle the grade	e in each subject a	area w	hich	corre	spoi	nds to the	last grad	ing period.	
		_		1	1	spoi		last grad	ng period.	
		e in each subject a Reading Mathematics	area w	hich	corre	espoi	nds to the	last grad	ing period.	
		Reading	А	В	C C	D	F F	last grad	ing period.	
		Reading Mathematics	A	ВВ	C C	D D	F F	last grad	ing period.	
cholastic Aver		Reading Mathematics Science History	A A A	B B B	C C C	D D D	F F F			
cholastic Aver	age - Circle the grade	Reading Mathematics Science History pairments, learning	A A A A ag disa	B B B	C C C C	D D D	F F F F	ychologic	al disorders.	
cholastic Aver	age - Circle the grade	Reading Mathematics Science History pairments, learning	A A A A ag disa	B B B	C C C C	D D D	F F F F	ychologic	al disorders.	
cholastic Aver	age - Circle the grade	Reading Mathematics Science History pairments, learning	A A A A ag disa	B B B	C C C C	D D D	F F F F	ychologic	al disorders.	
Impairments - *Please includ	age - Circle the grade	Reading Mathematics Science History pairments, learning	A A A A ag disa	B B B abilition, s	C C C c es, be	D D D D ehav	F F F roioral or ps	ychologic pecial ed	al disorders.	
Impairments - *Please includ	age - Circle the grade List any physical imple any current or pre	Reading Mathematics Science History pairments, learning	A A A A ag disa	B B B abilition, s	C C C c es, be	D D D D ehav	F F F roioral or ps	ychologic pecial ed	al disorders.	

STODENT QUESTIONNAIRE "Required to be completed by prospective students (grades 6"" – 12")
Why do you want to attend Ripley Christian Academy?
Salvation Experience: Briefly relate your salvation experience. Feel free to include scripture.
Are you actively involved in any church or youth group? If so - where, and how often do you attend?
What is your favorite and least favorite subject in school, and why do you like/dislike them?
What three adjectives best describe your personality?
Tell us more about what you do outside of school.
What leadership roles or opportunities have you experienced?
What personal achievement are you most proud of?
In your opinion, what does it mean to be a good member of a community?
I have accurately provided the application information

Student Signature

Date

112 Jackson Avenue Ripley, WV 25271

P: (304) 786-1234 office@ripleychristian.com F: (304) 786-1121

Family Information

FAMILY DATA (family with whom the	e applic	ant lives	5)					
Parent/Guardian #1								
Relationship to Student	Title		Name					
Home address	l		City				State	Zip
Cell Phone	Home Pl	hone				Email		
Occupation	Employe	er				Work Phone		
Parent/Guardian #2								
Relationship to Student	Title		Name					
Home address	1		City				State	Zip
Cell Phone	Home Pl	hone				Email		
Occupation	Employe	er				Work Phone		
List any other legal guardian(s)								
Relationship to Student	Name							
Home address		(City, State, Zip				Phone	
Any legal reason this individual should not have	If yes, ple	ase explain:						
access to information about this student? No Yes								
L NO L TES								
Children Living at Home								
Name		Age		Grade		School Attending		
Name	Age			Grade		School Attending		
Name Age		Age		Grade		School Attending		
Name	me Age			Grade		School Attending		

Church Background			
Church Attending		Minister or Pastor	Phone
Describe your church attendance All services regularly	Some services regularly (1 - 2 per week)	Attend services occasionally (1 - 3 per month)	■ Do not attend church
Other Information			
Emergency Contact	Address	Relationship	Daytime Phone
Emergency Contact (alternate)	Address	Relationship	Daytime Phone
Family Doctor	Address		Phone
Tuition Payment			
Indicate Your Preferred Payment Plan			
☐ Payment in full by 8/18/2023	☐ Payment plan (through FA	ACTS)	☐ Need information on Grants & Financial Aid
Briefly describe your family	s church/faith backgro	ound.	
What do you feel is your chi	ld's biggest strength a	nd weakness? Briefly des	scribe them.
What are you hoping your c	hild, if accepted, gains	from attending Ripley C	hristian Academy?
		= -	agreement with its content and spirit. te, and understand RCA will verify.
Father's Signature			Date
Mother's Signature			Date

112 Jackson Avenue Ripley, WV 25271

P: (304) 786-1234 office@ripleychristian.com F: (304) 786-1121

Church Leader Recommendation – CONFIDENTIAL

Family Information *Please complete this section and give to your Church Leader

Parent's Name(s)		Child's Name(s)	
The family named above has applied for econsidering a family for admission, we ap Recommendation is confidential and will review this recommendation.	preciate any info I not be shared w	rmation that would b	e helpful in making that decision.
Church Background *To be complete	d by Church Led	<mark>ider</mark>	
Name of Church	Your Name & Po	sition Held	Preferred Contact Number
• •	ervices regularly per week)	☐ Attend services occ (1 - 3 per mo	casionally Do not attend regularly onth)
Other Information			
How long have you known the family?			
Is the family involved in any church activ	rities other than v	vorship services? If so	o, please describe these activities:
Please share with us your insight of the f	amily's commitm	ent to Christ:	
On the basis of what the student can con	tribute to Ripley	Christian Academy, I:	
☐ Highly recommend for enrollm	ent 🗖 Recomm	nend for enrollment	☐ Do not recommend for enrollment
On the basis of what Ripley Christian Acad	demy can contrib	ute to the student, I:	
☐ Highly recommend for enrollm	ent 🗖 Recomm	nend for enrollment	☐ Do not recommend for enrollment
Please feel free to make any other comm	ents which you fe	el would be valuable	in helping us to become better
acquainted with this family:			
□ (OPTIONAL) I would like to discuss this	recommendation	. Best number to con	 tact:
,			

Please return this form as soon as possible to us so that we may review it with the student's application. You can email, fax, mail, or deliver in person to the above address. Thank you for your time and cooperation!

Signature of Church Leader: ______ Date: _____

112 Jackson Avenue Ripley, WV 25271

P: (304) 786-1234 office@ripleychristian.com F: (304) 786-1121

Teacher Recommendation – CONFIDENTIAL

Child's Name	te this section di	Child's Current Grade	
The student named above has applied fo form and fax or mail it to us as soon as posocial skills are important factors in consihelpful in making that decision. Recomm parties. Only school administration will in the student of the st	ossible so we may dering a family fo endation is confi	review it with the studer admission, we appredential and will not be	dent's application. Since academics and ciate any information that would be
Teacher Recommendation *To be c	ompleted by a t	<mark>eacher</mark>	
School Name	Your Name & Po	sition Held	Preferred Contact Number
Other Information			
How long and in what relationship have	you known this s	tudent?	
	• •	e the student in the cat r 2 - Below Average	_
Academics Academic Potential Reading Sk	ill Written E	xpression Math Sk	cill Works at Grade Level
Work Habits			
Initiative Works independently	Listens atten	tively Ability to st	ay on task Handles frustrations
Social & Emotional			_
Relationship with peers Conduc	ct Emotional	reactions Handles	s correction Respectful
Please feel free to make any other comm helping us better know the student:	ents (or observat	ions not listed above)	which you feel would be valuable in
□ (OPTIONAL) I would like to discuss this	s recommendatio	n. Best number to con	tact:
Signature of Teacher:			Date:

Please return this form as soon as possible to us so that we may review it with the student's application. You can email, fax, mail, or deliver in person to the above address. Thank you for your time and cooperation!

6

112 Jackson Avenue Ripley, WV 25271

P: (304) 786-1234 office@ripleychristian.com F: (304) 786-1121

Student Records Request

Parents: Please fill out the information below, sign the bottom of this page, and return to RCA.

Student			
Name	Date of Birth	Grade	School Currently Attending
Name	Date of Birth	Grade	School Currently Attending
Name	Date of Birth	Grade	School Currently Attending
Name	Date of Birth	Grade	School Currently Attending
Name	Date of Birth	Grade	School Currently Attending

School: Please send the items below for the student(s) shown.

Records should be faxed or mailed to the above address.

Thank you for your cooperation and timely response.

- Office Transcript grades and credits earned
- Progress grades to date of withdrawal
- Immunization Records
- State/Standardized Test scores (when applicable)
- Attendance records
- Special Education/Psychological Test records

Parent Signature	Date

Ripley Christian Academy Parent and Student Statement of Cooperation 2023-2024 School Year

- 1. We will always attempt to speak the truth in love. (Ephesians 4:15, 25).
- 2. We will encourage, inspire, and lift up others through our communications. (Ephesians 4:29; Romans 14:19).
- 3. We will avoid gossiping and arguing, but instead promote a spirit of unity. (Psalm 133:1; 2 Corinthians 12:20; 2 Timothy 2:23-24; 1 Corinthians 1:10).
- 4. We will be quick to listen, restrain the tongue, and practice self-control. (James 1:19-20).
- 5. We will resolve issues and offenses. We will seek forgiveness and desire reconciliation. (Matthew 5:23-24; Matthew 18:15).
- 6. We will show kindness, compassion, and forgiveness to others. (Ephesians 4:32).
- 7. We will respect others as fellow creations of God in His image, considering others higher than ourselves. (Philippians 2:3).
- 8. We will not slander anyone, and never condescend or demean them. We will display true humility toward others. (Titus 3:1-2).
- 9. We will use contacts with other parents, students, teachers, support staff, administrators, and board members as an opportunity to pray for and with them. (2 Thessalonians 1:11; Ephesians 6:18).
- 10. We will focus on things that are true, noble, just, pure, lovely, and of good report things that are excellent and praiseworthy. (Philippians 4:8).
- 11. We understand that RCA is a <u>Christian</u> School and therefore Christian principles are incorporated in all curriculum and extracurricular activities.
- 12. We understand that our child will be expected to participate in all aspects of the educational program including chapel and other school activities.
- 13. We agree that we will devote time to our children in our home to help with schoolwork that may be difficult for them. We recognize that combined efforts of teacher and parent are important for children to be successful.
- 14. We agree to support the rules and regulations set forth by the school, and we will support and uphold the principles, practices, and educational policies of the school.

- 15. Should there be any questions or concerns involving the school, I agree to contact the teacher or administration, without involving other school families or outside parties, in an attempt to resolve the concern.
- 16. We agree that the administration has full responsibility for placing my child in the proper grade.
- 17. The school reserves the right to dismiss any student or family who is not united with the rules, policies, or spirit of Ripley Christian Academy.
- 18. We give permission for our child to take part in all school activities, including sports and school-sponsored trips, and absolve the school from liability because of any injury to my child or myself sustained at school or during any school activity.
- 19. Permission is given to use my child's picture or audio in school brochures, videos, or other promotional publications, unless a separate written notice is given to the school.
- 20. We agree that this Statement of Cooperation only covers this current school year only. Its acceptance is left totally to the discretion of RCA and is no guarantee of re-admission in subsequent years.

Parent Signature:	Date:
Parent Signature:	Date:

ALL parents/step-parents/guardians are REQUIRED to sign. If a child resides in more than one home, each household must discuss and complete a form with their family.

Student Commitment

Student signature is REQUIRED for students in all grades (except Kindergarten).

I understand that it is a privilege to attend Ripley Christian Academy. It is my responsibility to do my best work, respect my peers and the faculty, and abide by the rules and policies of the school as stated in the handbook.

By signing below, I am indicating that it is my personal desire to attend Ripley Christian Academy and understand that if I fail to fulfill my responsibilities, I may be dismissed from the school.

Student Signature:	Date:
Student Signature:	Date:
Student Signature:	Date: