

# Enrollment Procedures

Acceptance into Island Christian School is granted to those students who with their parents demonstrate a sincere desire to have a Biblically-based education and who meet the high standards of entrance into Island Christian School.

## All applicants must submit the following to the admission committee for review:

- Completed application - All students applying must also include the application fee.
- Copy of birth certificate
- Emergency treatment release form
- Florida state school physical and FHSAA sports physical for grades 6 – 12
- Florida state immunization record (blue card)
- Parental pledge
- A certified copy of any court order of final judgment if parents are divorced or separated which specifies custody of the children

## Students applying for grades 1 - 12 must also arrange for the following:

- ICS entrance testing
- School records
- Transcripts indicating courses taken with grades for at least two years
- Standardized test results for achievement, ability, and intelligence which could include the FCAT
- Letter of explanation from the current school for grading scale and graduation requirements
- Schedule an interview with the Principal just prior to the Admissions Committee review of the file

## Students applying for grades 9 – 12 must also submit the following:

- Completed recommendation forms - These must be mailed directly to the admissions office from your school counselor or principal, English teacher, another recent teacher (preferably math), and youth pastor or mentor.

Once all of the required materials are received by the admissions office, the file will be reviewed by the admissions committee. Students applying for grades 1–12 must be achieving at or above grade level. The admissions committee accepts students on a nine week probationary status in order to perform at levels for success at Island Christian School.

Upon successful review of the file, a student may be offered an enrollment contract. ***Students may officially enroll and attend classes only after all registration fees have been paid and tuition payments have been arranged.***

Attendance at Island Christian School is a privilege. Students forfeit this privilege if they do not conform to the standards and ideas of work and life of the school. The school may insist on the withdrawal of a student at any time if, in the opinion of the school, the student does not conform to the spirit of the ministry.

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





# Application for Admission

## Student Information

**Please Type or Print Clearly • Use Additional Paper as Needed**

Date \_\_\_\_\_

Application for Grade \_\_\_\_\_ Date of Projected Entry: Month \_\_\_\_\_ Year \_\_\_\_\_

Applicant Name: \_\_\_\_\_  
Last First Middle Preferred

Male  Female Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_

Church Attended \_\_\_\_\_ Nationality \_\_\_\_\_

Present Grade in School \_\_\_\_\_ Student's S.S. # \_\_\_\_\_

Student Resides With:  Mother and Father  Mother  Father  Guardian

Will the Student Require Bus Service in the Morning?  Yes  No In the Afternoon?  Yes  No

Physical Address of Home \_\_\_\_\_ MM \_\_\_\_\_  Ocean  Bay

### Father Information

### Mother Information

Name \_\_\_\_\_

Name \_\_\_\_\_

S.S. # \_\_\_\_\_

S.S. # \_\_\_\_\_

Mailing Address \_\_\_\_\_

Mailing Address \_\_\_\_\_

Ph \_\_\_\_\_ C \_\_\_\_\_ W \_\_\_\_\_

Ph \_\_\_\_\_ C \_\_\_\_\_ W \_\_\_\_\_

Occupation/Position \_\_\_\_\_

Occupation/Position \_\_\_\_\_

Name of Business \_\_\_\_\_

Name of Business \_\_\_\_\_

Correspondence Should be Addressed to:  Mother  Father  Both

Other Children At Home/Ages \_\_\_\_\_

**How did you hear about Island Christian School?** \_\_\_\_\_

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

Name of Present School \_\_\_\_\_ Years Attended \_\_\_\_\_

Address of School \_\_\_\_\_

Previous Schools \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

\_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

\_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

Has the Applicant Ever Repeated a Grade:  Yes  No If yes, which Grade? \_\_\_\_\_

Has the Applicant Ever Been Dismissed From Any School for Any Reason?  Yes  No Suspended?  Yes  No  
Asked to Withdraw?  Yes  No Received Severe Disciplinary Censure?  Yes  No  
If Yes, Please Give Full Details Including Name of School and Principal \_\_\_\_\_  
\_\_\_\_\_

Has the Applicant Ever Been Diagnosed as Having a Chronic Medical Problem?  Yes  No  
Emotional Disorder?  Yes  No Learning Disability?  Yes  No Allergies: \_\_\_\_\_

List Any Medication Taken Regularly \_\_\_\_\_

List Books, Aside from Required Texts, Applicant Has Read in the Last Year \_\_\_\_\_  
\_\_\_\_\_

List Any Extracurricular Activities \_\_\_\_\_  
\_\_\_\_\_

List Any Special Honors or Awards the Applicant Has Received \_\_\_\_\_  
\_\_\_\_\_

Why Do You Want Your Child to Attend Island Christian School? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Island Christian School requests that you list two names and local phone numbers to be placed on file so that they can be used when assisting your child in the event of sudden illness or other emergency.

Name \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

Doctor's Name \_\_\_\_\_ Phone \_\_\_\_\_

List those adults who have your permission to pick up your child from school \_\_\_\_\_  
\_\_\_\_\_

**Please recommend any other families that might be interested in Island Christian School:**

Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

Phone Number \_\_\_\_\_ Alt. Phone \_\_\_\_\_

Names and Grades of Children \_\_\_\_\_

Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

Phone Number \_\_\_\_\_ Alt. Phone \_\_\_\_\_

Names and Grades of Children \_\_\_\_\_



## Island Christian Parental Pledge

We do hereby state that we have made a thorough investigation of Island Christian School and do hereby pledge to make it our glad-hearted choice for our child's education. We pledge to support its programs, discipline, and standards. We, as parents who are accepting the challenge to "provoke not our children to wrath, but bring them up in the nurture and admonition of the Lord", (Ephesians 6:4), do state that this training will be carried on in the home. We shall place our trust in Island Christian School to extend that training more completely.

We pledge that our child(ren) will bring to the school a heritage of Christian culture. We promise that the home will provide a secure haven of safety—free from the influences that are recognized as harmful. We agree to uphold and support the high academic standards of Island Christian School by providing a place at home for our child(ren) to study and by giving our child encouragement in the completion of homework and assignments.

We recognize that for our child(ren) to make good progress in his/her work, it is essential that he/she have confidence in his/her teachers and school. Therefore, we will do all in our power to see that our child(ren) respect(s) and obey(s) the school staff and rules. We agree that if our child(ren) should become involved in any difficulty with other children in the school, we will in no case complain to any parent, but with prayerful Christian spirit will register necessary complaints only with the teacher involved. We understand that being critical or gossiping about the school or its teachers will have a negative result in our child's response. For this reason we will take problems and criticism only to those who can effectively solve them.

We pledge that if for any reason our child does not respond favorably to the school we will, in the interest of our child, cooperate fully with the school in correction, instruction, and if necessary, withdraw him/her from the school.

We, as parents, acknowledge that enrollment will be a contract with the school and that we will subscribe to the policies of the school. Furthermore, we understand that attendance at Island Christian School is a privilege. Students forfeit this privilege if they do not conform to the standards and ideas of work and life of the school. The school may insist on the withdrawal of a student at any time the student, in the opinion of the school, does not conform to the spirit of the ministry.

We realize and accept that Island Christian School is unashamedly a Christian School where school officials make it their goal to introduce Jesus Christ to the young people entrusted to their care. Every effort is made to present Christ in such a way that it becomes our child's desire to live for Him and experience great success in whatever vocation they choose. When it appears that our student is antagonistic to, or troubled by, Biblical instruction or the Gospel of Christ, it becomes the school's responsibility to inform us as parents and to ask if attendance at Island Christian School is in the best interest of all involved. Our student cannot be forced to grow spiritually, but the school cannot allow him/her to be antagonistic to primary beliefs of Island Christian School and the goals of the families and children of Island Christian School.

The last thing in the world we as parents or the school wants is to bring the values of the home into conflict with the values of the school. The unity and harmony of the home and providing a healthy environment for our child's spiritual, intellectual, and emotional development are far more important than the school they attend.

We, as parents, support Island Christian School in their efforts to provide a chemical-free environment for our students. The school's position is that the use of alcohol, tobacco or any illicit drug, or the misuse of prescribed and/or over-the-counter drugs, is detrimental to the health and the well-being of the individual and is incompatible with the belief that our bodies are "a temple of the Holy Spirit." We are "fearfully and wonderfully made" and we are to respect this body which we have been given.

Therefore, we agree to the school policy (which is applied usually only in grades 6 - 12) that states: *During a school year, the administration of Island Christian School may periodically ask any student to submit to a drug screening. Families not wishing to comply with this school policy may be asked to withdraw the student from Island Christian School for lack of philosophical agreement. A student showing positive results on the drug screening, which indicates possible drug use, will be suspended until the administration schedules a meeting with the discipline review committee. The administration and review committee will determine the final discipline which will include as a minimum probationary status, regular drug tests and could decide on dismissal from Island Christian School.* (Island Christian School Parent Student Handbook, Substance Abuse Policy).

**Please complete the other side.**

As a part of the year's registration fees which we pay for our child(ren), a student accident insurance plan is established for my child(ren) while attending Island Christian School. This is a secondary policy and will pay only those claims not covered by other personal insurance which we may have. Students participating in any school sport are expected to have personal insurance. Island Christian School will make available to me the opportunity to purchase special student insurance in the case we do not carry accident insurance.

We are excited to have our child(ren) enjoy a complete learning environment while attending Island Christian School. We realize that regular field trips in the Florida Keys will greatly enhance the learning environment. We grant permission for our child(ren) to participate in field trips scheduled between the north end of the Seven Mile Bridge and Mile Marker 107 in Key Largo. We realize that our child(ren) will be transported on Island Christian School busses and will be properly chaperoned by school staff members. Field trips out of this area will require special and separate permission forms.

We will be fully responsible for all financial commitments as outlined in the registration and admissions material and detailed in the Financial Handbook including all legal and collections fees deemed necessary by Island Christian School.

In conclusion, we pledge our loyal support to Island Christian School through praying for its program, supporting fund-raising projects, and paying the tuition payments regularly and on time.

Student's Name \_\_\_\_\_

Father's Signature \_\_\_\_\_

Mother's Signature \_\_\_\_\_

### **Mission Statement**

*Providing quality Christian education to the families of the Florida Keys; educating the mind, body and spirit while developing a closer relationship with Jesus Christ.*



# Authorization of Consent for Emergency Treatment of Minor



Date \_\_\_\_\_

I (We) \_\_\_\_\_

being the parent(s) and/or legal guardian(s) of \_\_\_\_\_  
Student's Legal Name

hereby authorize emergency room medical/surgical treatment of the above named minor.

Our family doctor is \_\_\_\_\_

This permission is to be used in the event of my/our absence and with the understanding that an earnest effort has been made to contact me/us. Island Christian School/Island Community Church and its individual staff members will in no way be held liable for emergency room treatment.

Our family is insured with \_\_\_\_\_ Policy Number \_\_\_\_\_

The number for authorization if needed is \_\_\_\_\_. Island Christian School students are also covered under a secondary accident insurance policy to assist with payment after the family's primary insurance pays according to the stated policy. Claim forms and information are available through the school office.

Please list all known allergies and special physical limitations \_\_\_\_\_

Parent or legal guardian signature \_\_\_\_\_

Phone \_\_\_\_\_ Cell \_\_\_\_\_ Work \_\_\_\_\_

Sworn to (or affirmed) and subscribed before me

State of Florida

this \_\_\_\_\_ day of \_\_\_\_\_  
Day Month Year

County of \_\_\_\_\_

by \_\_\_\_\_  
Name of Person Swearing or Affirming

\_\_\_\_\_  
Signature of Notary Public

Notary Public - State of Florida

\_\_\_\_\_  
Name of Notary Typed, Printed or Stamped

\_\_\_\_\_ Personally Known

\_\_\_\_\_ Produced Identification: \_\_\_\_\_







# Records Release

## High School Campus

83400 Overseas Highway | Islamorada, FL 33036 | T: (305) 664-4933 | F: (305) 664-8170

## Elementary School Campus

83250 Overseas Highway | Islamorada, FL 33036 | T: (305) 664-2781 | F: (305) 664-9536

## Student Information

**Please Type or Print Clearly • Use Additional Paper as Needed**

Date \_\_\_\_\_

Student Name \_\_\_\_\_  
Last First Middle Preferred

Date of Birth \_\_\_\_\_ Student's SS# \_\_\_\_\_

Mailing Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone / Beeper \_\_\_\_\_

Name of Present School \_\_\_\_\_ Grade \_\_\_\_\_

### Please Send the Following Records at Your Earliest Convenience:

- Transcript of credits and grades
- Date of enrollment and withdrawal
- Total Cumulative Absences for year to date
- Psychological Evaluations, if any
- Health records, Immunizations, Birth Certificate
- Community Service Hours
- Interpretation of your grading system
- Grades to date of withdrawal

### Please Mail Records to:

## Island Christian School

Admissions Office  
83400 Overseas Highway, Islamorada, FL 33036

Thank you for your cooperation in this matter. The new Federal Law 99.21 states:  
"No parent signature required for educational records sent to another educational agency."

**A separate form for each minor is required each year** \_\_\_\_\_  
(date)



# Pastor/ Youth Leader/Mentor/ Employer

Island Christian School is accredited by the:

- Florida Association of Christian Colleges and Schools
- International Association of Christian Colleges and Schools
- National Council for Private School Accreditation

## All information will be kept Confidential

\_\_\_\_\_ entering grade \_\_\_\_\_ has applied for admission to our school. The Admissions Committee greatly appreciates you rating this student on the following chart by checking the appropriate box.

How long have you known the applicant? \_\_\_\_\_

Areas	Below Average	Good	Excellent	Outstanding	Not Observed
Personal Conduct					
Relationships With Others					
Integrity					
Leadership Potential					
Initiative and Drive					
Positive Influence on Others					
Independent Work Habits					
Recommendation as a Student					
Recommendation as a Person					

### Mission Statement

*Providing quality Christian education to the families of the Florida Keys; educating the mind, body and spirit while developing a closer relationship with Jesus Christ.*

**Please fill out the reverse side**

What adjectives come to mind when you first think of this applicant? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

<b>I recommend this candidate for admission to Island Christian School:</b>			
In the Area of:	With Confidence and Enthusiasm	With Reservation	Difficult to Recommend
Academics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Personal Character	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall Recommendation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Name (please print) \_\_\_\_\_

Relationship to the Applicant \_\_\_\_\_

Address \_\_\_\_\_

Phone Number \_\_\_\_\_ Alt. Phone \_\_\_\_\_

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



# Teacher Reference

Island Christian School is accredited by the:

- Florida Association of Christian Colleges and Schools
- National Council for Private School Accreditation
- International Association of Christian Colleges and Schools

**All information will be kept Confidential**

\_\_\_\_\_ entering grade \_\_\_\_\_ has applied for admission to our school.  
The Admissions Committee greatly appreciates you rating this student on the following chart by checking the appropriate box.

## Academic Qualities

Areas	Below Average	Good	Excellent	Outstanding	Not Observed
Motivation					
Achievement in Relationship to Ability					
Punctuality in Completing Assignments					
Attention Span					
Ability to Work Independently					
Intellectual Curiosity					
Basic Knowledge of Subject Matter					
Ability to Organize and Communicate Ideas					
Intellectual Curiosity					
Written Expression					
Oral Expression					

What adjectives come to mind when you first think of this applicant? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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

\_\_\_\_\_

\_\_\_\_\_

**Please fill out the reverse side**

## Personal Qualities

Areas	Below Average	Good	Excellent	Outstanding	Not Observed
Classroom Conduct					
Relationships with Others					
Integrity					
Leadership Potential					
Relationships with Teachers					
Positive Influence on Others					
Independent Work Habits					
Recommendation as a Student					
Recommendation as a Person					

<b>I recommend this candidate for admission to Island Christian School:</b>			
In the Area of:	With Confidence and Enthusiasm	With Reservation	Difficult to Recommend
Academics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Personal Character	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall Recommendation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Name (please print) \_\_\_\_\_

Relationship to the Applicant \_\_\_\_\_

Address \_\_\_\_\_

Phone Number \_\_\_\_\_ Alt. Phone \_\_\_\_\_

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



# Confidential School Report

## High School Campus

83400 Overseas Highway | Islamorada, FL 33036 | T: (305) 664-4933 | F: (305) 664-8170

Grade for which applying \_\_\_\_\_

## Parent/Guardian Release Form

I/We hereby authorize Island Christian School to contact schools and other sources to obtain information to support this application and I/we release every person and institution from any and all liability resulting from or pertaining to the furnishing of records, documents, and other information provided to Island Christian for that purpose.

In order to complete this application, I/we authorize the release of my/our child's academic records and psychological testing scores as requested by Island Christian School. After acceptance has been offered, I/we authorize release of the full record when transfer to Island Christian occurs.

Date \_\_\_\_\_ Signatures of both parents or guardians \_\_\_\_\_

## School Information

This student is seeking admission to Island Christian School. We are a fully accredited college-prep high school owned and operated by Island Community Church, Islamorada, FL. Please complete this form and mail it to Island Christian School with the following:

- 1) your school form showing a transcript of grades earned for the past two years and the current year to date,
- 2) the grading scale you use,
- 3) all standardized test scores for achievement, ability, and intelligence, FCAT, PSAT/NMSQT, psychological testing, and the College Board SAT and/or ACT.

This form is to be completed by the Director, Principal, or Guidance Counselor of the applicant's most recent school. Please mail the confidential reference directly to Island Christian School. A parent cannot "hand carry" this form to Island Christian School. This form will only be used for the admissions process and will not become part of the student's permanent school record. The admission committee cannot act until this information has been received.

Dear Director, Principal, or Guidance Counselor:

We would appreciate your observations of the areas listed below and on the back of this sheet. Your candid estimate of the applicant will be an invaluable assistance to the Admissions Office, is confidential and cannot be released to anyone.

How would you describe the applicant's course of study within your school's curriculum for college bound students?

- unusually rigorous – most advanced in each core subject
- rigorous – some advanced levels
- standard college prep
- minimal requirements for graduation

Date \_\_\_\_\_ Signature \_\_\_\_\_ Phone \_\_\_\_\_

Name (Please Print) \_\_\_\_\_ Title \_\_\_\_\_

School \_\_\_\_\_ Address \_\_\_\_\_

**Please complete the other side**

Please complete the following chart. Indicate your rating with the numbers 1 – 5 in the column to the right. Please mark a question mark where you have insufficient evidence to make a judgment, sign the form, and note your telephone number. The Director of Admissions will contact you if necessary.

Areas	5	4	3	2	1	Rating
Academic Ability	Exceptionally promising, high honor roll	Fine student, probably honor roll	Capable of satisfactory work, but not honors	Marginal ability or questionable motivation	Academic risk	
Extracurricular Activities	Outstanding leader	Real contributor	Fairly active	Minor participation	Few or no activities	
Conduct	Outstanding in every respect	Generally excellent	Good or acceptable	Marginal	Needs improvement	
Initiative and Drive	Outstanding, resourceful	Well above average	Generally strong enough	Occasionally weak or lacking	Very weak	
Personal Qualities	Outstanding person in all respects	Considerable appeal generally quite strong	Generally good no strengths or weaknesses	Not very appealing, immature	Poor impression, unstable, very immature	
Independent Work and Study Habits	Excellent	Well above average	Average	Weak	Unsatisfactory	
Recommendation as a Student	Outstanding	Excellent	Good	Fair	Poor	
Recommendation as a Person	Outstanding	Excellent	Good	Fair	Poor	

How would you consider the applicant's parents?

Exceptionally Cooperative     Generally Cooperative     Rarely Cooperative     Rather Apathetic

Have the parents met financial obligations?     Always     Most of the Time     Does Not Apply

Has this student qualified for any special academic support programs?     Yes     No

Has this student qualified for any special accelerated programs?     Yes     No

Is the applicant eligible to re-enter your school next term?     Yes     No

Has the applicant been involved in the use of alcohol or drugs?     Yes     No

Has the applicant participated in or stimulated disorderly, disruptive or unmannerly conduct?     Yes     No

Has the applicant exhibited unsatisfactory adjustment to other students?     Yes     No

Has the applicant had health problems?     Yes     No    Emotional?     Yes     No

Has the applicant been disciplined by administrative officers or by a student judiciary?     Yes     No

Suspended?     Yes     No    Expelled?     Yes     No

Please explain any answers or make any comments that would be helpful to our Admissions Committee. What are some thoughts that come to mind when describing this student? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

If there is anything you prefer to discuss by telephone, please check here.

