



**Grace Baptist Academy**  
**2499 Waldron Road, Kankakee, IL 60901**  
**Phone: (815) 939-457 Fax: (815) 939-1334**  
**Administrator: Stephen M. Bull**

## APPLICATION FOR STUDENT ENROLLMENT

### STUDENT INFORMATION:

Student's full name \_\_\_\_\_ Name student prefers \_\_\_\_\_

Date of Application \_\_\_\_\_ Date of Birth \_\_\_\_\_ Sex \_\_\_\_\_ Home Phone \_\_\_\_\_

Address/City/State/Zip \_\_\_\_\_

Has student repeated any grades?  No  Yes If yes, please explain \_\_\_\_\_

School previously attended \_\_\_\_\_ Dates \_\_\_\_\_

Reason for non-return \_\_\_\_\_

Does any outstanding balance exist with other schools?  No  Yes If yes, please explain \_\_\_\_\_

How did you learn about Grace Baptist Academy? (i.e. newspaper, friend, advertisement, etc...)

Has the student ever been suspended, expelled, or any discipline of emotional problems?  No  Yes

If yes, please explain \_\_\_\_\_

### FAMILY INFORMATION:

Parental Status:  Married  Separated  Divorced  Father deceased  Mother deceased

Mother's full name \_\_\_\_\_ SS# \_\_\_\_\_

Father's full name \_\_\_\_\_ SS# \_\_\_\_\_

Guardians' full name \_\_\_\_\_ SS# \_\_\_\_\_

Who does the student live with? \_\_\_\_\_

Church affiliation \_\_\_\_\_ Where do you attend? \_\_\_\_\_

Results of Administrative Review and Evaluation:  Accepted  Not Accepted

Comments:

# Grace Baptist Academy

## Application / Enrollment Process

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We appreciate your interest in applying to Grace Baptist Academy. If you have questions during the application process, please contact the school at (815) 939-4579 for assistance.

Your child's application is considered complete and ready to process when the school has received the following items:

### IF APPLYING FOR K3 OR K4

- |   |  |
|---|--|
| <input type="checkbox"/> completed enrollment card                        | <input type="checkbox"/> copy of certified birth certificate                                     |
| <input type="checkbox"/> registration fee (\$150, <i>non-refundable</i> ) | <input type="checkbox"/> Teacher Reference Form* (if previously enrolled in a preschool program) |
| <input type="checkbox"/> completed application                            | <input type="checkbox"/> medical records/proof of immunizations                                  |
| <input type="checkbox"/> student health information and authorization     |  |

\* Teacher Reference Forms should be completed by those individuals and returned directly to the school by mail or fax.

### IF APPLYING FOR K5 - 12<sup>TH</sup> GRADES

- |   |   |
|---|---|
| <input type="checkbox"/> completed enrollment card                        | <input type="checkbox"/> report cards (two years including current)         |
| <input type="checkbox"/> registration fee (\$150, <i>non-refundable</i> ) | <input type="checkbox"/> complete transcript ( <i>grades 11-12</i> )        |
| <input type="checkbox"/> completed application                            | <input type="checkbox"/> Teacher Reference Form*                            |
| <input type="checkbox"/> copy of certified birth certificate              | <input type="checkbox"/> Code of Conduct Form signed ( <i>grades 7-12</i> ) |
| <input type="checkbox"/> records request signed                           | <input type="checkbox"/> medical records/proof of immunizations             |
| <input type="checkbox"/> student health information and authorization     |   |

\* Teacher Reference Forms should be completed by those individuals and returned directly to the school by mail or fax.

***The School Office must receive these documents before testing or interviews are scheduled.  
The Application Process continues as outlined below:***

**Testing:** ALL students are evaluated. Only K5-12<sup>th</sup> graders are tested. **GBA Initials:** \_\_\_\_\_

**Interview:** After you have submitted the above items, you will be contacted to schedule a parent interview with the administrator. In grades 6-12 a student interview is also required. You will be asked to share why you are interested in Grace Baptist Academy. The administrator will briefly explain the purpose of Christian education; provide an overview of our program, and give you time to ask whatever questions you may have concerning the school. **GBA Initials:** \_\_\_\_\_

**Finances:** Parents will also meet with the business office to discuss financial arrangements. **GBA Initials:** \_\_\_\_\_

**Admissions Committee:** After completion of all of the above, your application is sent to our Admissions Committee. You are then notified in writing as to your child's acceptance. If your child meets the admission requirements but there are no spaces currently available in that grade, you are given an opportunity to keep your application active. **GBA Initials:** \_\_\_\_\_

**Enrollment:** After receiving your acceptance letter, applicable fees and the first months' tuition must be paid to the business office before your child is officially enrolled. At least one parent *must* attend the New Student Orientation before school begins. **GBA Initials:** \_\_\_\_\_

# Grace Baptist Academy

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The school maintains its viability as an institution because its mission and purposes are clearly understood and supported by its community. The admissions policies are designed to admit families who desire and support the philosophy, purpose, and standards of the school. Grace Baptist Academy does not discriminate on the basis of race, nation, or ethnic origin in its admission policies, or in the administration of its programs.

## **Purpose and Philosophy: An Academic Focus – A Christian Foundation**

**Purpose:** The purpose of Grace Baptist Academy is to assist parents in providing a sound education for their children through the integration of faith and learning. GBA is committed to teaching a Biblical worldview throughout the development of basic spiritual, intellectual, physical and social skills.

**Assisting Parents:** GBA endeavors to function as an extension of the home, supporting parents in the Biblical mandate giving them ultimate responsibility for the education of their children. Faculty and staff assist families in their knowledge and understanding of the Lordship of Jesus Christ as revealed in the Scripture and common commitment to the work of education. In order to serve these families with Biblical instruction and Godly examples, the school employs administrators, faculty and staff who are active in a Bible-believing local church, serve as a role model in their Christian walk, their professional life and Christian faith.

**Integration of Faith and Learning:** The curriculum is rooted in a God-centered view of life, allowing students the opportunity to understand themselves and the world around them from a Biblical perspective, so that they can develop the skills to think Biblically, and become disciples for Christ. All truth is found in God. The Bible is God's Holy Word, without error, and is the sole authority for life. The integration of Biblical faith and learning is the primary function and responsibility of the teachers at GBA.

## **Admission Standards**

**Shared goals:** GBA is most effective when working with families who share our commitments. The integration of faith and learning through a Biblical worldview is the foundation of the overall program.

**Cooperative Spirit:** Each family and each student admitted to GBA is expected to exhibit a cooperative spirit. Parents and students should read the Parent/Student Handbook for a description of the school's standards and expectations. The school only admits students who want to attend GBA. Negative attitudes about the Christian faith or the school prevent admission. A student application, interview, and references are used to determine a student's suitability for admission.

**Academic Record:** An applicant's academic record must indicate that the student is adequately prepared for the instructional program at GBA. Students are expected to take their academic responsibilities seriously.

**Disciplinary Record:** GBA may not admit students who have a history of disciplinary problems. Students who have been expelled from other schools may not be admitted.

**K3, K4, K5, and First Grade:** Students must meet the age and maturity standards of the school. All immunizations and required physical examination must be documented prior to final admission.

## **Trial Period**

A trial period of eighteen weeks (two quarters) is required for all new students. The workload, discipline and environment require a considerable adjustment for many students. Should a change be necessary at the end of this period, a conference with the parent will be arranged.

## **Financial Commitment**

Christian education involves financial sacrifice for many families. The school works hard to plan effectively and control tuition costs. It is essential that families meet their obligations to the school in order to maintain financial stability. Please note that if a student is withdrawn during a semester, the full semester's tuition is due.

# Teacher Reference Form (1<sup>st</sup>-12<sup>th</sup> Grades)

Name of Student \_\_\_\_\_ Grade to which applying \_\_\_\_\_

To The Teacher:

This student is seeking admission to Grace Baptist Academy. We would appreciate your evaluation of the areas listed below. **You may indicate your ratings by numbers (1-5) in the right-hand column. Please use a question mark to indicate insufficient evidence on which to make a judgment.** We cannot act on the student's admission until this information is received. GBA will need one completed form from a teacher who knows the student well.

AREAS	1	2	3	4	5	Your Rating
Academic Ability	Exceptional high honor roll	Fine student, honor roll	Average ability	Marginal ability	Academic risk	
Extracurricular Activities	Outstanding leader	Very involved	Fairly active	Minor participation	Few or no activities	
Reading Skill and Interest	Exceptional skills, loves to read	Above average, independent reader	Average ability	Slow reader, needs help with skills	Comprehension difficulty, requires assistance	
Initiative and Drive	Outstanding, resourceful	Well above average	Generally strong	Occasionally weak or lacking	Very weak	
Personal Qualities	Very mature	Making progress	Average maturity	Immature	Very immature	
Emotional stability	Exceptionally stable	Well-balanced	Usually well- balanced	Excitable or unresponsive	Hyper-emotional or apathetic	
Recommendation as a student	Outstanding	Excellent	Good	Fair	Poor	

Always      Often      Sometimes      Never

A. Accepts authority

B. Concentrates on tasks without difficulty

C. Cooperative

Is the student in good standing and eligible to re-enter your school at the next grade level?

Yes    No    If no, please explain: \_\_\_\_\_

Has any disciplinary action involving suspension or exclusion been taken with this student?

Yes    No    If yes, please explain: \_\_\_\_\_

Has the student had disciplinary or attendance (tardiness) problems?

Yes    No    If yes, please explain: \_\_\_\_\_

Are the parents cooperative?    Yes    No

Is the student involved in any special program? (circle any that apply)    ESE Resource    Speech/Language Therapy

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

Printed Name \_\_\_\_\_

School \_\_\_\_\_ Phone Number \_\_\_\_\_

Address \_\_\_\_\_ Zip Code \_\_\_\_\_

The student's application cannot be processed until this information is received. Please mail or fax this form to:  
 Grace Baptist Academy • 2499 Waldron Road • Kankakee, IL • 60901 • (815) 939-4579 • Fax (815) 939-1334  
 If you prefer to give the recommendation over the phone, please call Stephen Bull, Administrator.

# Teacher Reference Form

## K-3, K-4, K-5 Students

Name of student \_\_\_\_\_ Grade to which applying \_\_\_\_\_

To the Teacher:

This student is seeking admission to Grace Baptist Academy. We would appreciate your evaluation of the areas listed below. For the following items, please circle the response that best describes the applicant.

<b>Learning Ability</b>	Exceptional Ability	Average Ability	Marginal to Academic Risk
<b>Motivation</b>	Outstanding	Generally Strong	Weak
<b>Emotional Maturity</b>	Very Mature	Usually Well-Balanced	Hyper-emotional Apathetic
<b>Self-Confidence</b>	Healthy	Needs some support	Seems overly confident/ Poor self image
<b>Concentrates on Tasks without difficulty</b>	Always	Often	Seldom to Never
<b>Social Relationship with Peers</b>	Excellent	Average	Poor
<b>Accepts Authority of Teacher</b>	Always	Often	Seldom to Never
<b>Check the box that best describes your program</b>	Centers and free choice	Balance between independent and teacher directed academics	Teacher directed

Are parents cooperative?      Yes      No

Has the student had disciplinary problems?      Yes      No

If yes, please explain: \_\_\_\_\_

**Kindergarten only:** At this time, would you recommend this student for a full-day, academic kindergarten?    Yes    No

Student's toiletry habits (check all that apply):    Potty trained      Occasional accidents      Needs assistance

Printed Name \_\_\_\_\_ Title \_\_\_\_\_

School \_\_\_\_\_ Phone \_\_\_\_\_

We cannot process the student's application until this information is received. Please mail or fax this form to:  
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 If you prefer to give the recommendation over the phone, please call our administrator, Stephen Bull.

# Administering Medication To Students

Parents/Guardians have the primary responsibility for the administration of medication to their children. The administration of medication to students during regular school hours and during school related activities is discouraged unless necessary for the critical health and well being of the student. The administration of medication to students is subject to guidelines established by the school, in keeping with state agency recommendations (e.g., Illinois Department of Professional Regulation, Illinois Department of Public Health, and Illinois State Board of Education).

## Procedures and Guidelines

1. **Student Health and Emergency Care Information** – School personnel shall not administer to any student, nor shall any student possess or consume any prescription or non-prescription medication except after completing the appropriate information. This authorization and any subsequent changes shall include:
  - a. physician or dentist written prescription with child’s name, medication name and dosage, and date of order
  - b. administration instructions (route, time or intervals, duration of prescription)
  - c. intended effects and possible side effects
  - d. parent/guardian written permission and phone number in case of emergency

The administration will review the written authorization and will consult with the parent/guardian, licensed prescriber, or pharmacist for additional information as necessary.

2. **Appropriate Containers** – Medication and refills are to be provided in containers which are:
  - a. Prescription-labeled by a pharmacy or licensed prescriber
  - b. Manufacturer-labeled for non-prescription over the counter (OTC) medication with the child’s name on the container
3. **Administration** – Medication is administered by the administration. Grace Baptist Academy does not provide medical personnel to administer medicine. For field trips and other off campus activities, other school personnel will assist in medication administration. The administration and school personnel retains the discretion to deny requests for dispensing of medication.
4. **Self-Administration** – A student (7<sup>th</sup>-12<sup>th</sup> grade) may self-medicate at school. The *Self-Administration Authorization* must be signed by the parent / guardian.
5. **Stock Medication** – As a convenience for families, Acetaminophen (Tylenol) 325 mg, Ibuprofen (Advil) 200 mg, Benadryl 25 mg, and Tums are kept in stock in the school office. **A completed Student Health Information Form must be completed in the school office.** In the absence of a completed Student Health Information Form, families may fax a signed medication order.
6. **Storage and Record Keeping** – Medication is stored in a locked cabinet. Medications requiring refrigeration are in a secure area. Each dose is recorded. To assist in the safe monitoring of side effects and / or intended effects of the treatment with medication, faculty and staff may be informed regarding the medication plan.
7. **Documentation, Changes, Renewals, and other Responsibilities** – To facilitate needed documentation, physician orders, any changes in the orders, and parent permissions may be faxed (815-939-1334). It is the responsibility of the parent / guardian to assure that all physician orders and permission are brought to school and refills provided when needed, and to inform the administration of any significant changes in the students’ health.

*Medication remaining at the end of the school year must be picked up by the parent or designated responsible adult. Any medication not picked up is destroyed.*

**For the safety of all, medication must be brought to school by the parent or another designated responsible adult.**

Authorization and permission forms must be renewed annually at the beginning of the school year.

# Grace Baptist Academy

**NEW FAMILIES ONLY:**

**(attach a separate sheet if necessary)**

Please discuss briefly why you want your child(ren) to attend Grace Baptist Academy.

## GRACE BAPTIST ACADEMY - STATEMENT OF FAITH

- We believe the Bible to be inspired by God and the authoritative Word of God and the standard by which all knowledge is judged and taught.
- We believe in one God, eternally existent in three persons: Father, Son and Holy Spirit.
- Jesus Christ is God's Son. He was born of a virgin as both God and man, lived a sinless life, died to pay the penalty for the sins of man, was buried, rose from the grave, and ascended into heaven where He will continually minister as our Great High Priest and Advocate.
- Salvation is a gift through repentance toward God and faith in Jesus Christ, and every person who truly is saved is eternally secure in the Lord Jesus Christ and will spend eternity in heaven, while those who die without salvation in Jesus Christ will spend eternity in hell.
- We believe in the ministry of the Holy Spirit by whose indwelling in the Christian is enabled to live a Godly life.
- We believe in the resurrection of the saved to life, and the lost to damnation.
- We believe in the spiritual unity of all believers in our Lord Jesus Christ.

## GRACE BAPTIST ACADEMY – ENROLLMENT AGREEMENT

- \_\_\_\_\_ 1. I understand that my child will be taught Biblical principles in accordance with the school's Statement of Faith.
- \_\_\_\_\_ 2. I will allow the school administration to place my child in the grade and classes most appropriate for him / her.
- \_\_\_\_\_ 3. I understand that the school sets forth its standards of conduct both on and off campus in the Parent / Student Handbook, and I agree to teach my child to live obediently within those guidelines.
- \_\_\_\_\_ 4. I understand that my child is accountable to comply with the conduct expectations as described in the Parent / Student Handbook and that the school may dismiss my child from GBA when his/her conduct on or off campus demonstrates disregard for the educational process, the testimony of the school, or for their responsibilities as a member of the school community.
- \_\_\_\_\_ 5. I understand that full cooperation and a spirit of mutual respect is an integral part of building partnership between school staff and parents. I will endeavor to address problems that arise at the lowest levels with communication with the person directly involved before involving the administration. I understand that courtesy and good manners should characterize all communications both written and spoken.
- \_\_\_\_\_ 6. I understand that if my child is placed on Probation, he/she will be carefully reviewed prior to being re-enrolled for the next semester of year.
- \_\_\_\_\_ 7. I will remember the school in prayer, promote it in public relations, and support the teachers as they train my child.
- \_\_\_\_\_ 8. I will pay my tuition and fees when they are due. If my child is withdrawn any time during a semester, I understand that the full semester's tuition is due, and no records are released until the school bill is paid.
- \_\_\_\_\_ 9. I understand that my tuition does not cover all of the expenses of the school; therefore, as God enables me, I will give as I can.
- \_\_\_\_\_ 10. From time to time, GBA will use images of students and student activities to include in school publications and promotional materials. I give general parental consent for my child to be photographed or videotaped in the course of school activities and for GBA to use those images in these publications or promotional materials.

\_\_\_\_\_  
Head of Household Signature

\_\_\_\_\_  
Spouse Signature

**(SIGNATURE OF BOTH PARENTS PREFERRED)**

\_\_\_\_\_  
Secondary Student (7<sup>th</sup> - 12<sup>th</sup> grade) Student Signature