



New Life Christian School

Equipped to stand – Ephesians 6:13

Thank you for your interest in New Life Christian School! We are excited to welcome you, your family, and new student(s) to our family. Our mission is to facilitate the academic, social, and spiritual development of each student. We want to partner with you to ensure your child is cared for and prepared for the future.

Application Process

- Complete this Application Packet.
 - Read the New Life Christian School Handbook and the School Fees & Family Requirements Page.
 - Return completed Application Packet to the school office.
 - Make an appointment for an interview. We would like to meet with the parent/guardian and the applicant(s).
-

Please submit the following forms to the school office to continue the application process:

- Admissions Application
 - Medical Treatment Consent Form
 - Travel Form
 - Media Release Form
 - Google Workspace for Education Notice
 - Volunteer Driver Form
 - Student Conduct Contract (7th-12th grades)
 - Student Questionnaire Form (7th-12th grades)
 - Parent/Guardian Questionnaire Form
 - Parent/Guardian Commitment Form
 - Copy of most current Immunization Records
 - Copy of Birth Certificate
-

Your interview appointment is on _____



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Admissions Application

STUDENT INFORMATION

Today's Date: ____/____/____

Last Name _____ First Name _____ MI _____ Preferred Name _____

Age: _____ Date of Birth: ____/____/____ Birth Place: _____ Current Grade: _____

Current Physical Address: _____

Street

City

Zip

Mailing Address: _____

(If differs from above)

Street

City

Zip

Student Telephone/Cell: (_____) _____ Home Language: _____

Nationality: White Asian African American Hispanic Native American Multi-Racial Native Hawaiian/Pacific Islander

FAMILY INFORMATION

Student lives with: Both Parents Part-Time with each parent Mother Father Grandparent(s) Guardian

Parents divorced/separated Mother deceased Father deceased Mother remarried Father remarried

Preferred daytime telephone for Parent/Guardian: (_____) _____

Email for Parent/Guardian: _____

Other children under 18 years of age living with the family.

Name

Birthdate

School Attending

Custodial Father's Name: _____ Employer: _____

Home Address: _____ Phone Number: _____

Mailing Address: _____

(If differs from above)

Custodial Mother's Name: _____ Employer: _____

Home Address: _____ Phone Number: _____

Mailing Address: _____

(If differs from above)

Non-Custodial Parent's Name: _____ Employer: _____

Home Address: _____ Phone Number: _____

Mailing Address: _____

(If differs from above)

Should any information herein change, we kindly request immediate notification to be directed to the school office.



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Admissions Application (Continued)

Student First and Last Name: _____

ADDITIONAL PERSONS WHO MAY BE CALLED IN AN EMERGENCY

NAME	ADDRESS	TELEPHONE	RELATIONSHIP

PHYSICIAN OR DENTIST TO BE CALLED

PHYSICIAN	ADDRESS	MEDICAL PLAN/NUMBER	PHONE
DENTIST	ADDRESS	MEDICAL PLAN/NUMBER	PHONE

*IF PHYSICIAN CANNOT BE REACHED, WHAT ACTION SHOULD BE TAKEN?

CALL EMERGENCY HOSPITAL OTHER Explain: _____

Please list all allergies/medical conditions, which require attention from New Life Christian School and medical personnel:

NAMES OF PERSONS AUTHORIZED TO TAKE CHILD FROM THE FACILITY

(CHILD WILL NOT BE ALLOWED TO LEAVE WITH ANY OTHER PERSON WITHOUT WRITTEN AUTHORIZATION FROM PARENT OR AUTHORIZED REPRESENTATIVE)

NAME	PHONE NUMBER	RELATIONSHIP

SIGNATURE OF PARENT/GUARDIAN OR AUTHORIZED REPRESENTATIVE

DATE

Should any information herein change, we kindly request immediate notification to be directed to the school office.

(Adapted May 2024)



Medical Treatment Consent Form

As part of our commitment to ensuring the safety and well-being of our students at New Life Christian School, we require your consent for medical assistance when necessary. Please carefully review the following disclosure:

Contacting Parent/Guardian: In the event of a medical emergency or when medical assistance is deemed necessary for your child, we will make every effort to contact you, the parent/guardian, immediately. It is imperative that the contact information provided to the school remains accurate and up to date to facilitate timely communication.

Medical Assistance: In situations where immediate medical attention is required, New Life Christian School reserves the right to administer first aid and seek further medical assistance for your child. This may include, but is not limited to, contacting emergency medical services, administering prescribed medication (if provided by the parent/guardian), or providing basic medical care as trained and authorized by the school staff.

Safety Priority: The safety and well-being of our students are of the utmost importance to us. We take every precaution to create a safe environment within the school premises and during school-sponsored activities. However, unforeseen medical situations may arise, and we prioritize prompt and appropriate responses to ensure the health and safety of all students.

I, the parent/guardian of the named student, give consent to New Life Christian School to administer emergency medical assistance to my child. I authorize New Life Christian School, by and through its faculty, to administer such medical treatment as is necessary for the health and welfare of my child. I will accept the responsibility of any expense incurred. I will not hold New Life Christian School or its employees accountable for any causes of action, damages, or injuries.

Student First and Last Name

Parent/Guardian Name: _____

Parent/Guardian Signature: _____

Date: ____/____/____



Travel Form

Student First and Last Name

Please check one of the following:

I, the parent/guardian of the named student,

DO grant permission

DO NOT grant permission

to participate in field trips and special events within city limits conducted away from the normal premises of New Life Christian School. Being fully aware that New Life Christian School will do everything in their ability to provide safety and assistance for my child, I will not hold New Life Christian School and/or the faculty responsible for any injury or physical harm that might result in the participation of such activities.

Parent/Guardian Name: _____

Parent / Guardian Signature: _____

Date: ____ / ____ / ____

All field trips outside of school premises will be notified to parents/guardians prior to travel.
Any field trips outside of city limits will require a signed permission slip.



Media Release Form

We are extremely proud of our students' and staff's accomplishments. We want the people who support our school to see and enjoy these accomplishments. Please consider allowing yours and/or your child's photographs, films, and/or interviews to be published in New Life Christian School's media.

Student First and Last Name

Please check one of the following:

ALL Media Use

- I, the parent/guardian of the named student, hereby grant permission for New Life Christian School to use my child's image and likeness in any form of media for promotional, educational, or other school-related purposes including [but not limited to] the school website, social media, and school newsletter.

LIMITED Media Use (Please specify)

- Student picture only
- Student picture and first name only
- Student picture and full name
- Student on video/audio

I, the parent/guardian of the above student, hereby grant LIMITED permission for New Life Christian School to use my child's image and likeness specified above for promotional, educational, or other school-related purposes including [but not limited to] the school website, social media, and school newsletter.

NO Media Use

- I, the parent/guardian of the above student, hereby DO NOT grant permission for New Life Christian School to use my child's image and likeness in any form of media for promotional, educational, or other school-related purposes.

Parent/Guardian Name: _____

Parent / Guardian Signature: _____

Date: ____/____/____



Google Workspace for Education Notice to Parents and Guardians

To parents and guardians,

At New Life Christian School, we use Google Workspace for Education, and we are seeking your permission to provide and manage a Google Workspace for Education account for your child. Google Workspace for Education is a set of education productivity tools from Google including Gmail, Calendar, Docs, Classroom, and more used by tens of millions of students and teachers around the world. At New Life Christian School, students will use their Google Workspace for Education accounts to complete assignments, communicate with their teachers, and learn 21st century digital citizenship skills.

The notice below provides answers to common questions about what Google can and can't do with your child's personal information, including:

- What personal information does Google collect?
- How does Google use this information?
- Will Google disclose my child's personal information?
- Does Google use student personal information for users in K-12 schools to target advertising?
- Can my child share information with others using the Google Workspace for Education account?

Please read it carefully, let us know of any questions, and then sign below to indicate that you've read the notice and give your consent. If you don't provide your consent, we will not create a Google Workspace for Education account for your child. Students who cannot use Google services may need to use home computers to complete assignments or collaborate with peers.

I give permission for New Life Christian School to create/maintain a Google Workspace for Education account for my child and for Google to collect, use, and disclose information about my child only for the purposes described in the notice below.

Thank you,
New Life Christian School Administration

Full name of student

Printed name of parent/guardian

Signature of parent/guardian

Date

This notice describes the personal information we provide to Google for these accounts and how Google collects, uses, and discloses personal information from students in connection with these accounts.



Using their Google Workspace for Education accounts, students may access and use the following “Core Services” offered by Google (described at https://workspace.google.com/terms/user_features.html):

- Assignments
- Calendar
- Classroom
- Cloud Search
- Drive and Docs
- Gmail
- Google Chat
- Google Chrome Sync
- Google Meet
- Google Vault
- Groups for Business
- Jamboard
- Keep
- Migrate
- Sites
- Tasks

Google provides information about the information it collects, as well as how it uses and discloses the information it collects from Google Workspace for Education accounts in its Google Workspace for Education Privacy Notice. You can read that notice online at https://workspace.google.com/terms/education_privacy.html. You should review this information in its entirety, but below are answers to some common questions:

What personal information does Google collect?

When creating a student account, New Life Christian School may provide Google with certain personal information about the student, including, for example, a name, email address, and password. Google may also collect personal information directly from students, such as telephone number for account recovery or a profile photo added to the Google Workspace for Education account.

When a student uses Google core services, Google also collects information based on the use of those services. This includes:

- account information, which includes things like name and email address.
- activity while using the core services, which includes things like viewing and interacting with content, people with whom your student communicates or shares content, and other details about their usage of the services.
- settings, apps, browsers & devices. Google collects information about your student’s settings and the apps, browsers, and devices they use to access Google services. This information includes browser and device type, settings configuration, unique identifiers, operating system, mobile network information, and application version number. Google also collects information about the interaction of your student’s apps, browsers, and devices with Google services, including IP address, crash reports, system activity, and the date and time of a request.



What personal information does Google collect? (Continued)

- location information. Google collects information about your student's location as determined by various technologies such as IP address and GPS.
- direct communications. Google keeps records of communications when your student provides feedback, asks questions, or seeks technical support

How does Google use this information?

In Google Workspace for Education Core Services, Google uses student personal information primarily to provide the core services that schools and students use, but it's also used to maintain and improve the services; make recommendations to optimize the use of the services; provide and improve other services your student requests; provide support; protect Google's users, customers, the public, and Google; and comply with legal obligations. See the [Google Cloud Privacy Notice](#) for more information.

Does Google use student personal information for users in K-12 schools to target advertising?

No. There are no ads shown in Google Workspace for Education core services. Also, none of the personal information collected in the core services is used for advertising purposes.

Can my child share information with others using the Google Workspace for Education account?

We may allow students to access Google services such as Google Docs and Sites, which include features where users can share information with others or publicly. For example, if your student shares a photo with a friend who then makes a copy of it, or shares it again, then that photo may continue to appear in the friend's Google Account, even if your student removes it from their Google Account. When users share information publicly, it may become accessible through search engines, including Google Search.

Will Google disclose my child's personal information?

Google will not share personal information with companies, organizations and individuals outside of Google except in the following cases:

With our school: Our school administrator (and resellers who manage your or your organization's Workspace account) will have access to your student's information. For example, they may be able to:

- View account information, activity and statistics;
- Change your student's account password;
- Suspend or terminate your student's account access;
- Access your student's account information in order to satisfy applicable law, regulation, legal process, or enforceable governmental request;
- Restrict your student's ability to delete or edit their information or privacy settings.

With your consent: Google will share personal information outside of Google with parental consent.

For external processing: Google will share personal information with Google's affiliates and other trusted third party providers to process it for us as Google instructs them and in compliance with our [Google Privacy Policy](#), the [Google Cloud Privacy Notice](#), and any other appropriate confidentiality and security measures.

For legal reasons: Google will share personal information outside of Google if they have a good-faith belief that access, use, preservation or disclosure of the information is reasonably necessary for legal reasons, including complying with enforceable governmental requests and protecting you and Google.



What choices do I have as a parent or guardian?

First, you can consent to the collection and use of your child's information by Google. If you don't provide your consent, we will not create a Google Workspace for Education account for your child, and Google will not collect or use your child's information as described in this notice.

If you consent to your child's use of Google Workspace for Education, you can access or request deletion of your child's Google Workspace for Education account by contacting New Life Christian School. If you wish to stop any further collection or use of your child's information, you can request that we use the service controls available to access personal information, limit your child's access to features or services, or delete personal information in the services or your child's account entirely. You and your child can also visit <https://myaccount.google.com> while signed in to the Google Workspace for Education account to view and manage the personal information and settings of the account.

What if I have more questions or would like to read further?

If you have questions about our use of Google's Google Workspace for Education accounts or the choices available to you, please contact [insert contact information for the school administrator]. If you want to learn more about how Google collects, uses, and discloses personal information to provide services to us, please review the Google Workspace for Education Privacy Center (at <https://www.google.com/edu/trust/>), the Google Workspace for Education Privacy Notice (at https://workspace.google.com/terms/education_privacy.html), and the Google Privacy Policy at <https://www.google.com/intl/en/policies/privacy/>), and the Google Cloud Privacy Notice at (<https://cloud.google.com/terms/cloud-privacy-notice>).

The Core Google Workspace for Education services are provided to us under Google Workspace for Education Agreement (at https://www.google.com/apps/intl/en/terms/education_terms.html) and the Cloud Data Processing Addendum (as <https://cloud.google.com/terms/data-processing-addendum>).



Volunteer Driver Form

We are excited to partner with you! The desire to serve and partner with New Life Christian School welcomed, and it is expected that the families of NLCS will make every effort to participate in the volunteer events.

Here are some things for our volunteers to know:

- New Life Christian School wants to give the students a Christian environment. In order for us to keep this environment, we ask that those who volunteer be examples of Christian growth and maintain a lifestyle which is a Biblical role model for our students to follow, including abiding by the school’s rules and dress code, and being free from the influence of any substances at school events (1 Tim. 4:12, Tit. 2:7).
- Please, do not hesitate to communicate any problems to our staff! If any conflicts arise while volunteering, we will use the Matthew 18 principle.
- If you have any questions about what needs to be done while volunteering, do not hesitate to ask! We want to communicate fully and clearly, so please ask.
- But mostly, enjoy helping the students (Eph. 6:7-8)!

Please complete the following to participate in NLCS events/field trips as a volunteer driver:

This form authorizes _____ to transport students

First and Last Name

participating in school trips/events.

Vehicle Information:

YEAR: _____ MAKE: _____ MODEL: _____

LICENSE NUMBER: _____

*** Please include a copy of your current insurance and a copy of your driver’s license.**

* California legislation makes automobile insurance compulsory.

* The owner of the vehicle must be at least 25 years of age.

I hold an unrestricted driver’s license and am authorized to drive in California. My vehicle is insured by a valid automobile liability insurance policy as required by California law. My vehicle described above is mechanically fit and there are seat belts in working condition for all passengers.

Signature Driver

Date

I have authorized _____ to drive my vehicle to transport students participating in the

Name

school trip/event. He/She holds an unrestricted driver’s license, is authorized to drive, and is insured as an operator under the vehicles liability insurance. The vehicle described above is mechanically fit and there are seat belts in working condition for all passengers.

Vehicle Owner Signature (If driver does not own vehicle)

Date

*****Should any information herein change, we kindly request immediate notification to be directed to the school office.*****



Student Conduct Contract

New Life Christian School - 7th through 12th Grade Students

A copy of this is to be signed yearly by all Students/Parents in the 7th through 12th grades.
As a student of New Life Christian School, I pledge to uphold the high standards of Jesus Christ and New Life Christian School on or off campus (Deut. 6:17-18). I realize that attending this school is a privilege, and I will strive to live in such a way as to glorify God (Phil. 1:20).

Specifically, I will (please sign with student initials)

- _____ 1. Abstain from the use or possession of legal or illegal drugs, including but not limited to: marijuana, any kind of vapes, alcohol, and tobacco (Rom. 13:13-14, Eph. 5:17-18).
- _____ 2. Abstain from, nor encourage others to partake in, entertainment that will tear down what the Lord is seeking to build in me (Psalms 101:3).
- _____ 3. Abstain from accessing websites, phone-apps, and content on the internet and/or social media that does not adhere to the above guidelines. I will not encourage others to do so (Eph. 5:11-12).
- _____ 4. Recognize the importance of what I say (Phil. 1:27) verbally, on social media, and/ or electronically. I will abstain from swearing, dirty or off-color jokes, gossip, and back-biting against authority and other students (Ex 20:7, Eph. 5:4).
- _____ 5. Conduct myself properly in my relationships with members of both sexes, (Rom.1:26-32). I will conduct myself in such a manner that there will be no question about my moral purity. (Isa. 55:7, 1 Tim. 5:22, 4:12, Titus 2:7)
- _____ 6. Realize that I am representing Jesus Christ and this school while I am on or off school grounds. (Phil. 2:14).
- _____ 7. Handle all negative feelings toward the staff and the school in a scriptural manner by addressing them directly and respectfully. (Matt. 18, Lev. 19: 16-18, Phil. 2:14) I will not discuss my negative feelings with other students or with any other person except my parents and the person with whom I have the issue. (Student: I will attempt to solve issues myself by talking to the person concerned in a respectful manner.) I have read the electronic device policy (cell phone, etc.) and agree to abide by it.
- _____ 8. Not cheat or plagiarize.

Student Printed Name: _____

Student Signature: _____ Date: ____ / ____ / ____

Parent/Guardian's Printed Name: _____

Parent/Guardian's Signature: _____ Date: ____ / ____ / ____



Student Questionnaire Form

Secondary Level (Grades 7th-12th)

To be filled out by the student applicant personally

Full Name: _____ Date: ____/____/____

Age: _____ Date of Birth: ____/____/____ Current Grade: _____ Applying Grade: _____

Address: _____
Street City Zip Code

Last School Attended: _____

Is it your own personal desire to attend this school? Yes No

What provoked your interest in New Life Christian School?

Have you had friends/family who have attended or currently attend? List up to four names.

Where do you attend church? _____

How often do you attend? Regularly Occasionally Never

Please mark any extracurricular activities you are interested in.

- Art Computer Programming Drama Music
- Student Government Woodworking Yearbook

Please mark any athletic programs you are interested in.

- Archery Basketball Track Volleyball Rodeo (applies only to 6th-12th grades)

Have you won any special awards in school? Yes No

If so, what? _____

Have you held any office position (i.e. student council) at school or church?

If so, what? _____

Student Questionnaire Form Continued

What are some of your favorite subjects? _____

Have you ever been absent from school for a long period of time? Yes No

If so, explain: _____

Have you ever had a suspension, expulsion, referral, or probation from school? Yes No

If so, explain: _____

Have you ever, for any reason, been in trouble with school authorities? Yes No

Have you ever, for any reason, been in trouble with law enforcement? Yes No

If so, explain: _____

Have you ever had difficulty with teachers or fellow students in a previous school? Yes No

If so, explain: _____

Have you had any difficulties in your academics? Yes No

If so, explain: _____

What are solutions the school can accommodate to ensure nothing hinders your quality of work?

Have you read the New Life Christian School Handbook? Yes No

Do you have any questions or concerned about any rules or regulations in the handbook ? Yes No

If so, what and why? _____

What is your definition of a Christian? _____

Are you a Christian? Yes No

If so, when and how did you become a Christian? _____

Student Signature: _____ Date: ____ / ____ / ____



Parent/Guardian Questionnaire Form

The following information is needed for the school records and is requested for in this way in order to insure accuracy. By drawing a line through the space or writing “none” in spaces not relating to you, we know you have not omitted anything.

Full Name: _____

Date: ____/____/____

How did you hear about our school? (Check all that apply)

- Friends/Family referral Website Church Flyers Social Media Radio
 Other (please specify)

State briefly your reason for changing schools and wanting your child enrolled in New Life Christian School:

Please share the student’s special interests, skills, or hobbies:

How often does your family attend church?

- Twice or more a week Weekly Monthly Holidays Only Never

If so, what church(s) does your family attend? _____

Parent(s)/Guardian(s): _____

Student (if different from above): _____

Is the student accustomed to prayer and Bible reading in the home? Yes No

Has the student had any academic difficulties in school? Yes No

Has the student had to repeat any grades? Yes No

If applicable, include relevant information.

Does the student have a 504 or an IEP? Yes No

If yes, the school must have a copy on file.

Parent/Guardian Questionnaire Form Continued

Has the student had any disciplinary difficulty in school? Yes No

If so, explain:

Are there any solutions that NLCS can accommodate?

Has the student ever had a suspension, expulsion, referral, or probation from school? Yes No

If so, please explain:

Has the student had any involvement with drugs, smoking, or alcoholic beverages? Yes No

If so, please explain:

Has the student had any extended absences from school? Yes No

If so, please explain:

Does the student have any physical, emotional, or other problems that may affect attendance or behavior?

Yes No

If so, please explain:

Does the student have any legal protective orders? Yes No

If so, the school must have a copy on file.

Parent/Guardian's Name (Print): _____

Parent/Guardian's Signature: _____ Date: ____/____/____



Parent/Guardian Commitment Form

1. We have read and understand the school's philosophy of Christian education and its statement of faith, and we are in agreement with the purpose and philosophy of New Life Christian School.
2. We, as parents, accept the challenge to "train up a child in the way he should go" (Proverbs 22:6), and we do state that this training will be carried on in the home. We place our trust in New Life Christian School to extend that training more completely.
3. We do hereby state that we have made a thorough investigation of the school's program, curriculum, discipline, dress code, etc., and we agree to make them our glad hearted choice for the coming school year.
4. We understand that we have an obligation to be actively involved in the education of our children. We agree to uphold and support the high academic standards of the school by providing a place at home for our child to study, and to give our child encouragement in the completion of homework assignments.
5. We will faithfully support the school through our prayers and positive attitude, and in keeping with Matthew 18:15, we are committed to giving a good report by sharing any complaints and negative comments only with the people involved. Unresolved issues will be taken care of by using the school's chain-of-command.
6. We understand that the standards of New Life Christian School do not tolerate profanity, obscenity in word or action, dishonor to the Holy Trinity and the Word of God, disrespect to the personnel of the school, or continued disobedience to the established policies of the school.
7. We pledge that if, for any reason, our child does not respond favorably to the school, we will do everything in our power to cooperate with the school to help our child make the necessary adjustments. In some circumstances, a nine week probation period may be required for new students. If these adjustments cannot be made, then we agree to quietly withdraw our child.
8. We understand that assessments will be made to cover damages to the school, including breakage of windows, book damage, and abuse of other personal property.
9. We will support the school by involvement in Parent-Teacher Conferences, Open House, Parent-Teacher Fellowship activities, work days, and other school-sponsored meetings and activities.
10. We understand that the school does not provide student medical insurance for field trips, sports, or other school-related activities and that it is our responsibility to provide our own.
11. We understand and will fulfill our commitment to 24 or more hours of volunteer time and fundraising. We understand that if we do not meet these goals, we will be required to pay the lacking amount.

I/we, as parent(s)/guardian(s) of the student applicant, sincerely give our pledge to the above items. I/we understand that failure of the parent(s)/guardian(s) or child to comply with the established regulations and discipline, parental commitment, or failure to meet financial obligations will forfeit the student's privilege of attending.

Father's Signature

Mother's Signature

*Both parents must sign if living in the same household

Guardian's Signature

Date ____/____/____