

Student's Full Name: _____

Today's Date ____/____/____ Start Date: ____/____/____

Grade Applying for _____



School Year 2023-2024

Kindergarten – 12th Grade Application for Enrollment

Sonshine was established in 1986 as a ministry outreach of Crossroads Church (Formerly, First Assembly of God in Callahan).
45082 Frank Brookins Drive PO Box 5026
Callahan, Florida 32011
PHONE (904) 879-1260
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www.sonshinechristian.com

Sonshine Christian Academy & Preschool is accredited by (LCS) League of Christian Schools & Cognia.
LCS Preschool Certification # 4558/Academy Certification # 4557

Sonshine Christian Academy Mission Statement

SCA partners with families to provide an outstanding Biblically-integrated education that equips students to: succeed professionally, know God personally, serve God passionately, and edify others persistently.

Sonshine Christian Academy Vision Statement

SCA will dynamically impact the world for the glory of God by producing academically equipped, spiritually-shaped, and Holy Spirit empowered individuals for strengthening the Body of Christ, The Church.

Non-Discrimination Policy

Sonshine Christian Academy & Preschool admits students of any race, color, nationality, and ethnic origin to all the rights, privileges, programs, and activities generally afforded or made available to students at the school. It does not discriminate in the administration of its educational policies, athletics, and other school administrative programs.

As a religious entity, SCA is legally permitted to make enrollment decisions based upon religious criteria, including doctrinal and lifestyle issues. It is the policy of SCA to enroll students who subscribe without reservation to SCA's Statement of Fundamental Truths, Sexuality Policy, and Standard of Conduct.

FOR OFFICE USE

New Student Enrollment Requirements:

All forms must be originals.

___ Birth Certificate ___ Social Security Card ___ Immunization Record (HRS 680) ___ Current Well Check (HRS 3040)

___ Current Grades ___ Last Report Card (Transcript) ___ Parent ID

___ Homeschooled Students require an official portfolio and/or proof of compliance with home school policies of their county.

Interview Date _____ Time _____ Interviewed by _____

Testing Date _____ Time _____ Tested by _____

___ Immunization Record update required for new and current students entering Kindergarten and the 7th grade (HRS 680)

STUDENT ENROLLMENT INFORMATION

One sheet per student required.

Student's Full Name				Preferred Name	2023-24 Grade	DOB	Gender	Age	
Student's Physical Address		City	State	Zip	Student's Mailing Address (if different)		City	State	Zip

STUDENT HEALTH INFORMATION

Physician name and phone number				Student Health insurance Company and Group/policy #				
Student Ethnicity: African American/African/Black/Caribbean		Asian/Pacific Islander	Caucasian	Hispanic/Latino	Other _____	Prefer not to answer		

Exceptional Student Educational Policy
 Students with identified exceptional needs will receive services within the scope and sequence of the Sonshine Christian Academy and Preschool curriculum and staffing. Admission for students with special needs is limited and based upon staffing and resources. The SCA educational program is based upon a mainstream classroom setting.

Name any medical conditions, past or present, which would restrict physical or academic activities at School. (for example- diabetes, seizures, asthma, etc) _____

Name any behavioral conditions, past or present, which would restrict physical or academic activities at School. (for example- emotional disorders, ADHD, ADD, etc) _____

Is the student taking any prescription medications? If yes, please specify _____

Does the student have allergies to medications? If yes, please specify _____

Does the student have other allergies? If yes, please specify _____

Does the student receive special services such as speech, language, or physical therapy? If yes, please specify _____

Please explain any other important health information that was not listed above. _____

PARENT/LEGAL GUARDIAN INFORMATION (WHOM THE CHILD LIVES WITH)

Parent/Guardian #1	Full Name			Parent/Guardian #2	Full name		
Mailing Address	City	State	Zip	Mailing Address	City	State	Zip
Best Contact #	Next Best Contact #			Best Contact #	Next Best Contact #		
Email Address	(will be used for communication and billing)			Email Address	(will be used for communication and billing)		
Place of Employment	Phone #			Place of Employment	Phone #		
<ul style="list-style-type: none"> If Student does not live with both parents, please circle the applicable reason: Parent Deceased Parents Divorced Parents Separated Other Explain _____ If parents are separated or divorced, who has legal custody? _____ Is there a court order on file? If so please provide documentation and specify _____ 							

NON-CUSTODIAL PARENT INFORMATION (WHOM THE CHILD DOES NOT LIVE WITH)

Non-Custodial Parent #1	Full Name			Non-Custodial Parent #2	Full name		
Mailing Address	City	State	Zip	Mailing Address	City	State	Zip
Best Contact #	Next Best Contact #			Best Contact #	Next Best Contact #		

EMERGENCY CONTACTS AND TRANSPORTATION INFORMATION

EMERGENCY CONTACTS FOR PICK-UP: Please list in order of call preference persons to contact in case parents listed above cannot be reached.

NAME AS LISTED ON ID	RELATIONSHIP TO STUDENT	PHONE NUMBER
1.		
2.		
3.		

TRANSPORTATION ONLY: Please list (using their name as it appears on their ID) persons allowed to pick up your student (do not include parents or contacts listed above).

1.	2.	3.
4.	5.	6.

SCA STATEMENT OF LIABILITY AND PARENT/GUARDIAN CONTRACT

I understand that I have or will receive the current "Parent / Student Handbook" upon enrollment and realize that my child and I are responsible to read and abide by the policies therein and to be in harmony and cooperative with the administration, faculty, mission, and vision of Sonshine Christian Academy & Preschool. My child and I will be an encouragement to others by abiding by the policies of SCA. The SCA "Parent / Student Handbook" is revised annually.

I do hereby agree to hold Crossroads Church and Sonshine Christian Academy & Preschool, and its agents, employees, and volunteers harmless from, and to indemnify for, any and all liability, actions, causes of actions, claims, expenses, including attorneys fees, and damages on account of injury to my child, even injury resulting in death, which I now have or which may arise in the future in connection with my child's participation in the academy and any other associated activities. I further agree to hold Crossroads Church and Sonshine Christian Academy & Preschool, and its agents, employees, and volunteers harmless from, and to indemnify for, any and all liability, actions, causes of actions, claims, expenses, including attorneys fees, and damages on account of injury to a third party or his property which may arise in the future in connection with my child's participation in the academy and any other associated activities.

I expressly agree that this release, waiver, and indemnity agreement is intended to be broad and inclusive as permitted by the law of the State of Florida and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect. This release contains the entire agreement between the parties hereto and the terms of this release are contractual and not a mere recital.

Consent Agreement

- Parents have the responsibility in guiding their child's behavior at home and influencing his/her conduct at Sonshine Christian Academy & Preschool. Parents should make sure that the student arrives on time and is properly dressed. Appropriate rules of conduct will be applied to all students at SCA. Students are expected to comply with all rules in a respectful manner.
- Upon acceptance of my child into SCA, I am obligated to pay the tuition and all other fees when due. The school will make no refund of these fees.
- I will support SCA's enforcement of rules of conduct as listed in the Parent/Student Handbook and as the school administration deems necessary.

Signature of Parent/Guardian Date

Signature of Parent/Guardian Date

SWORN AND SUBSCRIBED BEFORE ME THIS _____ DAY OF _____ 20_____.

BY _____

PERSONALLY KNOWN: _____ PRODUCED IDENTIFICATION: _____ TYPE: _____

NOTARY PUBLIC, STATE OF FLORIDA Notary's Name (printed)
NOTARY PUBLIC STATE OF FLORIDA AT LARGE

Sonshine Christian Academy
Kindergarten- 12th Grade 2023-2024 Tuition and Fee Agreement

Responsible Parent/Legal Guardian Name(s): _____

STUDENTS NAME _____ **DOB** _____ **GRADE** _____

REQUIRED FEES AND TUITION ARE NON-REFUNDABLE, NOT TRANSFERABLE, AND NOT PRORATED.

Fees and Tuition schedule does not cover the full cost of Sonshine Christian Academy education.

REQUIRED FEES AND TUITION		
STUDENT APPLICATION FEE <i>(New Students applying to SCA for the first time)</i>	\$100/ STUDENT (applies to all new applicants regardless of scholarship status) * is not part of the cost listed below.	
ANNUAL STUDENT ENROLLMENT FEE <i>(Due with application annually for all students)</i>	\$100/ STUDENT (applies to all enrolling students regardless of scholarship status) * is not part of the cost listed below.	
GRADE	TOTAL TUITION PER STUDENT FOR 10 MONTHS	MONTHLY TUITION PAYMENT DUE AUGUST 1ST – MAY 1ST
KINDERGARTEN – 8 TH GRADE	\$8,300.00	\$830.00/month
9 TH GRADE	\$8,400.00	\$840.00 /month
10 TH GRADE	\$8,500.00	\$850.00 /month
11 TH GRADE	\$8,600.00	\$860.00 /month
12 TH GRADE	\$8,700.00	\$870.00 /month
Optional: Aftercare (based on availability) Kindergarten – 5 th Grade Only _____ Initial to enroll and circle option.	Full-Time Option available 3:15-5pm Mon-Thurs. Aftercare is not available on Fridays or other early dismissal days. Drop-In Option available if enrollment is open.	\$240/ month / student Full-Time \$25 / day / student Drop-In

WHAT IS INCLUDED?

- Sonshine Christian Academy & Preschool strives to provide an excellent value for your student’s Christian school education. The total cost listed above will include (unless otherwise advised) required curriculum, tuition, testing, technology, and student accident insurance.
- Student supplies, field trips, memory items, uniforms, and optional purchases such as concessions and fundraisers are not included.
- Families will be notified in advance when additional fees are assessed for programming not already included in your monthly tuition.
- Families who enroll after the first day of school or withdraw before the last day of school forfeit any items that are ordered or delivered beyond the months of enrollment.

TUITION ASSISTANCE & SCHOLARSHIPS

- We accept a limited number of the following scholarships: Step Up for Students (FTC) and (FES) an (UA). Scholarship award letters and enrollment and application fees are due upon enrollment when the application is turned in.
 - Applications will not be accepted without the required fee.
 - If you are a scholarship recipient, our bookkeeping office will provide a scholarship statement to you within the first month of school that will outline your scholarship award and any estimated remaining balance due.
 - Family balances less than \$300 are due by September 1st.
 - Family balances that exceed \$300 may be paid in full by September 1st or split into 9 equal payments due September 1st – May 1st.
 - Scholarship tuition is billed based on the quarterly schedule provided by SUFS. Scholarship students who withdraw or are dismissed from SCA will be billed for the full quarter regardless of days attended.
 - Parents are responsible to know and follow the SUFS payment verification window dates. Funds not issued to the student account by SUFS (regardless of the reason) become the parent out of pocket responsibility.
 - Any change in your scholarship amount will be calculated and will affect your out of pocket cost.
- If your family does not qualify for a scholarship, a 10% discount will be extended to your monthly payment when paid before the due date. To receive this discount, families must provide a SUFS scholarship denial letter or submit documentation to our office to exclude your qualification of scholarship programs. Please call our office to begin the qualification process. The monthly discount becomes void for payments received on or after the 1st of the month.
- Our Academy offers tuition discounts to siblings, Crossroads Members, Nassau County teachers, Nassau County First Responders, local Clergy, active military, and to families who pay tuition early. Please stop by our office for more information. Discount offers cannot be combined.

STATEMENT OF PAYMENT TERMS

- Tuition is due in full regardless of student attendance.
- For students who withdraw or must be dismissed from school, all yearly fees and tuition through the current quarter are due, curriculum must be returned, and all items for future disbursement are forfeited.
- Monthly payments are always due in advance by the first of the month. Late Fees will be assessed on the 10th day to accounts that are not paid by the due date. Students with overdue accounts will be withheld from attending.
- A service charge will be assessed for all checks returned by the bank. All future payments will be in the form of cash/money order.
- Students who are not enrolled into aftercare services and not picked up on time from dismissal will be assessed a late pick up fee of \$15 per quarter hour. All financial obligations are to be cleared with the school office before the last day of school. Students will not be allowed to start school or continue during the year if financial obligations are not current.

ACKNOWLEDGEMENT

We/I, the undersigned, having carefully read this entire Tuition Agreement, hereby acknowledge that we fully understand and will adhere to the terms and conditions of this agreement as set forth herein.

Parent/Guardian’s Name (Please Print)

Parent /Guardian’s Signature

Date