



Gospel Light Baptist Academy

Earnestly contending for the faith in our generation.
JUDE 3

Dear Parents,

Thank you for your interest in Gospel Light Baptist Academy, a ministry of the Gospel Light Baptist Church. Enclosed is the information you need in considering GLBA for your child. The first step is to complete the application and return it to the school as soon as possible. After receiving and reviewing your application, you will be called to schedule an interview with the administrator. If at all possible, we would like for both parents to be present. It is required that your child be present.

Our Mission... the mission of the administration, faculty, and staff of Gospel Light Baptist Academy is to stand alongside you as a Christian parent, assisting you in the task of reproducing the mind of Christ in the lives of your children. A thoroughly Christian education is the only education that will prepare a child to find his or her place in the will of God, no matter where that may lead them. Our Academy is not meant to isolate your children from the world, but to equip them spiritually, academically, physically, and socially, so they can boldly engage the world for the cause of Jesus Christ.

Our Program... includes activities and curriculum that have been professionally designed to give your child an excellent foundation. We use the Abeka Book curriculum throughout our school. Kindergarteners become proficient readers before the school year ends.

Our Purpose... is to provide the highest quality education. We will teach your children self-discipline, respect for authority, respect for others, godly character and the highest level of academics. We are committed to instilling a love for God, family, and country, in the tender, moldable hearts of your children.

Our Motto is... Academic Excellence in a Caring Christian Environment.

Our Bible basis... "All thy children shall be taught of the Lord, and great shall be the peace of thy children." Isaiah 54:13

If you haven't visited us, please come by, or better yet, call and arrange for a tour of our facilities. Also, you can visit us online at www.glbacademy.com for more information. May God bless and direct you as you seek to do the very best for your children.

Sincerely,
Gary Bohman

Administrator



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ENROLLMENT PROCEDURES

TO APPLY:

Complete an **Application Packet** for each child you want to enroll and return it to the school office as soon as possible. **Applications** are available on our website or may be requested from the school office.

INTERVIEW:

The Academy will contact you to schedule a parent/child interview. At least one parent (preferably both) must be present at the interview. This interview will consist of: reviewing the Student Application and acquainting parent and child with our school policies. It is also a good time to familiarize you with our philosophy of discipline and classroom expectations.

ACCEPTANCE:

You will be informed of your child's acceptance into our school by phone or during the interview. Upon notification of acceptance, please submit the following to assure your child a place in our school:

- A. Registration Fee paid immediately upon acceptance.
- B. Book and Supply Fee must be paid by August 31 of the coming school year, or within two weeks of acceptance, if registering after August 31.
- C. Signed copies of the Financial Contract and Statement of Cooperation
- D. A copy of the Birth Certificate.
- E. A current Blue Immunization Certificate.
- F. A signed and notarized **Affidavit** must be turned in no later than September 15th for all students under the age of 6. This form is required by the State of Alabama for church run preschools and kindergartens that are exempt from state licensing and are available in the school office.

If you have any questions regarding the registration process, please contact us at 205.685.8450.



PHILOSOPHY OF DISCIPLINE

Building a foundation for life

The Academy strives to provide a safe, happy, and loving environment for every child that is enrolled. Believing that discipline is necessary for the welfare of the student as well as the entire school, each teacher is given the responsibility of making and enforcing classroom regulations in accordance with the Christian principles and discipline as set forth in the Scriptures. The teacher and administration take this responsibility seriously and will maintain communication with the parents regarding any discipline matters.

Child training and discipline is nurturing. Nurturing will be handled with kindness, love, and understanding. Attention will be given to specific needs of each child, while at the same time each child will be encouraged to become a part of the group through participation.

The Academy expects and needs the full cooperation of the students and the parents. If at any time the school believes this cooperation is lacking, the parent(s) will be asked to confer with the administrator and teacher in order to seek appropriate steps to bring about a positive change. If poor cooperation continues, the parent(s) will be asked to withdraw the student.

Discipline shall be age and developmentally appropriate. We realize that children need to be taught right from wrong. With the Bible as our basis, we will endeavor to "train up a child in the way he should go." Proverbs 22:6

How will our teachers deal with bad behavior? A time out and/or loss of a privilege for a short period of time will be used to help correct a negative behavior. Also, 5th grade and up use the demerit system. Discipline will not be associated with food, rest, snacks, or nap time. We do not spank or physically punish children in any way. Our emphasis is on a positive environment: where there is praise, prayer, encouragement, sensitivity, respect, and most of all love that cares.

If there is an incident, the teacher will send a discipline report or a Brightwheel notification to the parents that day. If there is a very serious matter, the teacher will call one of the parents.

We believe that the training your child receives at home, at church, and at school will mold his/her character for the rest of his/her life. With God's help, and partnering together, we can be assured that the very best is being done for your child.

Thank you for allowing us to be an integral part of your child's life.



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STATEMENT OF FAITH

What We Believe

- We believe in the divine authority and inspiration of the Scriptures. (II Timothy 3:16)
- We believe in the personality, deity, and present work of the Holy Spirit. (John 7:38-39)
- We believe in the total depravity of man. (Genesis 6:5)
- We believe that there is a literal hell, a place for the eternal and conscious punishment of all the unsaved. (Matthew 25:41)
- We believe in the virgin birth and deity of Jesus Christ. (Matthew 1:18-25)
- We believe that salvation is by grace through faith in Jesus Christ. (John 3:16, John 5:24, I John 4:17)
- We believe in the security of the believer. (Luke 10:20, John 3:36)
- We believe that once a person is saved, they should be baptized by immersion. (John 3:23, Acts 2:41, Romans 6:3-6)
- We believe literally in the Genesis account of creation. (Genesis 1:1, Genesis 2:21-23, Exodus 20:11, Acts 4:24, Hebrews 11:3)
- We believe in the pre-tribulational, pre-millennial coming of the Lord Jesus Christ. (Matthew 28:18-20, Luke 12:35-40, II Timothy 3:1-5, Revelation 19:11-16)
- We believe that God created only two genders, male and female. (Genesis 1:27)

This Statement of Faith does not exhaust the extent of our faith. The Bible itself is the sole and final source of all that we believe.



HOW WE DRESS

*"Whether therefore ye eat, or drink, or whatsoever ye do, do all to the glory of God."
-1 Corinthians 10:31*

Gospel Light Baptist Academy believes that this command has a practical application to the dress and grooming of students. Modesty, neatness, and cleanliness are the foundational principles for the Academy Dress Code. God is glorified when our dress is modest and appropriate for the occasion and free from distracting or offensive peculiarities or extremes. In this regard, we believe that parents have the primary responsibility for teaching their children this principle and insuring that students come to school properly dressed.

For your child's safety on the playground, flip-flops and open-toed shoes/sandals are not allowed. Comfortable sneakers or shoes are to be worn. If your child cannot tie his/her shoes, consider shoes with velcro. In cold weather make sure your child is dressed for the cold and wearing a coat or jacket. All clothing should be marked with your child's name. Clothing or school supplies with questionable messages, symbols, and pictures will not be allowed.

DRESS FOR K5-12th Grade*

BOYS

Shirts: Collared shirts, polo shirts, or dress shirts may be worn. Shirts must be tucked in at all times and no t-shirts or sleeveless shirts are allowed. All young men must wear the school navy blue polo on chapel day, and the school t-shirt to all school field trips unless otherwise specified. They are also permitted to wear the school t-shirt each Friday.

Pants: Boys are to wear khaki-style pants of any color, or dress pants. Camouflage clothing is not allowed. Pants must never be tattered or faded. Belts are to be worn with pants that have loops.

Grooming: Hair should be neat, off the collar, and off the ears. Hair must fall at least one half inch above the eyebrow. Sideburns may not extend below the middle of the ear or be cut above the top of the ear. Hair coloring is not permitted. Mustaches and beards are not allowed. Boys must be clean-shaven at all times. Boys may not wear jewelry of any type except for watches. No earring holes or tattoos are allowed. Brown or black casual or dress shoes may be worn. Sandals and flip flops are not permitted. Boys in preschool through sixth grade may wear athletic shoes. Boys in 7th-12th grades may not wear shoes with athletic soles to class.

Since fads change continually, the administration reserves the right to address the appropriateness of such trends as they arise.

GIRLS

Skirts & Dresses: Girls are not permitted to wear pants, only skirts or dresses. Skirts and dresses must come to the bottom of the kneecap and touch the floor when kneeling. Skirts must not have a slit that goes above the knee. Jumpers or sleeveless dresses may be worn, but must be worn with a blouse, shirt, or acceptable cover. Tank tops and sleeveless shirts are not allowed. All blouses must be loose-fitting and not excessively tight.

Necklines of all shirts must be no lower than one inch below the collarbone. T-shirts may be worn if they are neat in appearance. See-through shirts or shirts with sheer or thin material (including lace) may not be worn.

Girls are not to wear clothing that exposes the midriff. Girls may wear shorts underneath their dresses for playground activities. If wearing shorts, tights, or leggings, skirts and dresses must still be knee-length. All young ladies must wear the school navy blue polo on chapel day, and the school t-shirt to all school field trips unless otherwise specified. They are also permitted to wear the school t-shirt each Friday.

Grooming: Hairstyles must be conservative and consistent with a traditionally feminine appearance. Proper, age-appropriate undergarments must be worn at all times. Girls in kindergarten through 6th grade may not wear make-up or lipstick. Make-up may be worn conservatively in 7th-12th grades. Nail polish must be traditional in color - reds, pinks, and pastels are permitted. No black or dark colors are permitted. Jewelry must be conservative in both quantity and style. Clothing or school supplies with questionable messages, symbols, and pictures will not be allowed.

Since fads change continually, the administration reserves the right to address the appropriateness of such trends as they arise.

*Uniforms coming soon!

TUITION AND FEES

	<u>REGISTRATION</u>	<u>BOOK/SUPPLIES</u>
Infants (6 wks - 24 mo)	\$100.00	-
2 Yr Old Class (Must be 2 by Sept. 1)	\$150.00	\$100.00
3 Yr Old Class (Must be 3 by Sept. 1)	\$150.00	\$100.00
Kindergarten 4 Yr Olds (Must be 4 by Sept. 1)	\$150.00	\$150.00
Kindergarten 5 Yr Olds (Must be 5 by Sept. 1)	\$150.00	\$150.00
1st-12th Grades	\$150.00	\$375.00

(Grade 1 children must be 6 yrs old by Sept. 1)

Registration fees are non-refundable and paid immediately upon acceptance.

TUITION	FULL TIME TUITION	PART TIME TUITION
Infants	\$209 weekly	\$125 weekly (up to 25 hrs a week)
TUITION	ANNUAL TUITION	10 MONTHLY PAYMENTS
Preschool 2 & 3 yr olds (Half Day)	\$4,500.00	\$450.00
Kindergarten 4 & 5 yr olds (Half Day)	\$3,400.00	\$340.00
Elementary and up	\$3,990.00	\$399.00

Tuition payments are made August through May for the school year (10 payments)

Students may be dropped off as early as 7:00 a.m. at no additional charge.

All classes are five days a week. Instructional program begins at 8:00 for K5-12th and at 8:30 for 2 and 3 yr old classes. Summer day camp is available in June and July, but is not included in annual tuition costs (which includes August-May school days only)

TUITION DISCOUNTS are only for full-time students.

- Oldest child in GLBA is full price.
- 2nd oldest child - 10% discount. 3rd oldest child - 20% discount.
- 10% Paid-in-Full discount applies for tuition paid by August 31 for August-May

AFTER SCHOOL CARE

12:00-3:00.... \$150.00 monthly

3:00-6:00.... \$150.00 monthly

OCCASIONAL LATE PICK-UP ARRANGEMENTS - *This is for needs arising on an occasional basis and when you pre-arrange with the office and pay at least one day in advance.*

One time late pick-up is \$4.00 per hour. A week of late pick-up is \$3.00 per hour.

HOLIDAYS and PDD - While monthly tuition K2-12th does not include care on holidays and during professional development, most weekdays that there is no school, childcare is available for \$20/day if arranged in advance, or \$35/day if reserved after the cut-off day.

LATE PICK-UPS There is a late pick-up fee of \$1.00 per minute for the first five minutes and \$5.00 per minute thereafter. In the event of an emergency, please call the school. Late pick-up fees apply to children being picked up at 12:00, 3:00, or 6:00.

PAYMENT POLICIES

- K2-12th grade tuition is paid monthly. Payment is due on the first of the month, and is late after the tenth. *Late payments will be charged a \$25.00 fee.* If payment isn't made by the fifteenth of the month, your child will be withdrawn from the school until finances are settled with the school. Infants pay each Friday for the upcoming week. If payment is not made by Monday, your child will not be permitted to return on Tuesday.
- Payment methods: Check, card, or cash payments are accepted. *Returned checks will be charged a \$25.00 fee.*



STUDENT APPLICATION

Preschool: 2 yrs. ____ 3 yrs. ____
Kindergarten: K4 ____ K5 ____
Graded Levels: Grade 1 ____ 2 ____ 3 ____
4 ____ 5 ____ 6 ____ 7 ____ 8 ____
9 ____ 10 ____ 11 ____ 12 ____

After School Care Needed:

____ 12:00-3:00 Cost: \$150/month

____ 3:00-6:00 Cost: \$150/month

Drop Off Time: _____

Pick Up Time: _____

Date of Application _____

All questions must be answered before application will be considered.

STUDENT INFORMATION *Please give legal name of student.*

Last Name _____ First _____ Middle _____

Preferred Name _____ DOB _____ Age ____ Male ____ Female ____ Soc. Sec # _____

Address _____

Street

City

State

Zip Code

How did you find out about GLBA? _____

FAMILY INFORMATION

Father's Name: _____ Living with family? _____

Address _____

Home Phone _____ Cell _____ Work Phone _____

Mother's Name: _____ Living with family? _____

Address _____

Home Phone _____ Cell _____ Work Phone _____

Place(s) of Employment Father: _____ Mother: _____

PARENTS' MARITAL STATUS: Married ____ Separated ____ Divorced ____ Widowed ____ Single ____

Who has legal custody of this child? _____

FAMILY'S E-MAIL ADDRESS: _____

Last daycare or school attended? _____

Name

Address

Previous director or principal: _____ Phone _____

Reason(s) for leaving: _____

GENERAL INFORMATION

Why do you want your child to attend Gospel Light Baptist Academy? _____

Briefly state your philosophy of child discipline: _____

Has this child experienced academic, social, or disciplinary problems in his/her previous school?
Yes_____ No_____ If yes, identify the areas and explain:_____

Has your child been diagnosed as having a learning disability or other conditions that would affect educational performance? Yes_____ No_____ If yes, please explain: _____

Is this child currently taking any prescription medications? Yes _____ No _____ If yes, please identify and explain: _____

Does the family attend Sunday school or church regularly? Yes_____ No_____

The family's church:_____ Pastor:_____

Are you a Christian? If yes, on what do you base your answer?

Father: Yes_____ No_____ Basis: _____

Mother: Yes_____ No_____ Basis: _____

PERMISSIONS

- I give my child, _____, permission to go on any field trip with GLBA and to ride the GLBA transportation.
- Yes, I give my permission to have my child's picture posted on the school website and social media.

REFERENCES

Two friends or associates (not relatives) who know you well:

Name	Address	Phone
Name	Address	Phone

We appreciate your consideration of Gospel Light Baptist Academy for your child. Please sign below and return the application to the school. Your application will be reviewed and you will be contacted by phone or letter regarding the status of your child's admission.

To the best of my knowledge, the information given on this application is true and accurate.



EMERGENCY - PERMISSION FORM

Provider's Name: Gospel Light Baptist Academy **Date:** _____

Address: 5781 Roy Drive, Helena, AL 35080

Child's Name: _____

Hair Color: _____

Eye Color: _____

Birth Date: _____

Address: _____

Home Phone: _____

Mother's Name: _____ **Work Phone:** _____

Father's Name: _____ **Work Phone:** _____

Mother's Home Phone: _____ **Father's Home Phone:** _____

Emergency Contact: _____ **Phone:** _____

Child's Doctor: _____ **Phone:** _____

Insurance Company _____ **Policy #** _____

Allergies: _____

Medication: _____

Medical Condition: _____

It is the child care provider's policy to notify a parent when a child is ill or in need of medical attention. In the event that we are unable to contact parents, we may need to get immediate help for the child.

Our procedure is to have the child taken to the nearest emergency service by ambulance. (Ambulance fee is the parent's responsibility.)

If an ambulance is not available, the child care provider/staff of the school will transport the child.

I hereby give permission to the child care provider/staff of Gospel Light Baptist Academy to make necessary transportation arrangements for my child who has become ill or injured.

Signature of parent/guardian

Signature of parent/guardian

Date

Date

Patient's Health History

Provider's Name: _____ Group/Practice Name _____

Type of Provider: Doctor Physician's Assistant Nurse Practitioner Location _____

Other than at birth, has the child been hospitalized? No Yes

Reason: _____

Location: _____ Age: _____

Has the child had any surgery? No Yes Describe: _____

Has the child had any x-rays? No Yes Describe: _____

It the child allergic to any of the following: (Please list type of reaction)

Medications No Yes _____

Injections No Yes _____

Foods No Yes _____

Other No Yes _____

Does the child take: Vitamins Iron Fluoride Other Medications _____

Has the child ever had any of the following: (Check as many as apply)

- | | | |
|--|---|---|
| <input type="radio"/> Anemia | <input type="radio"/> Arthritis | <input type="radio"/> Frequent Nose Bleeds |
| <input type="radio"/> Asthma | <input type="radio"/> Diabetes | <input type="radio"/> Chronic Cough |
| <input type="radio"/> Allergic rhinitis | <input type="radio"/> Strep Throat or Scarlet Fever | <input type="radio"/> Frequent Stomach Ache |
| <input type="radio"/> Atopic Dermatitis (Eczema) | <input type="radio"/> Broken Bones | <input type="radio"/> Frequent Vomiting |
| <input type="radio"/> Urinary Tract Infections | <input type="radio"/> Head Injuries | <input type="radio"/> Frequent Diarrhea |
| <input type="radio"/> Pneumonia | <input type="radio"/> Cuts Requiring Sutures | <input type="radio"/> Constipation |
| <input type="radio"/> Croup | <input type="radio"/> Loss of Consciousness | <input type="radio"/> Bed Wetting |
| <input type="radio"/> Seizures | <input type="radio"/> Accidentally Taken Medication or Poison | <input type="radio"/> Dental Problems |
| <input type="radio"/> Heart Murmur | <input type="radio"/> Vision Problems | <input type="radio"/> Chicken Pox |
| <input type="radio"/> High Blood Pressure | <input type="radio"/> Hearing Problems | <input type="radio"/> Other _____ |
| <input type="radio"/> Hepatitis or Jaundice | <input type="radio"/> Frequent Headaches | |

Was there any delay in the child's learning to: Sit Walk Talk

Does the child have difficulty in school with: Not in School Learning Behavior Other _____

How many days of school has the child missed in the past 6 months? _____

Describe the child's behavior by marking the appropriate category:

	No Problem	Minor Problem	Major Problem
Short Attention Span	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cannot Sit Still	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Aggressive	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Unusually Quiet	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Overly Active	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Extremely Poor Loser	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Difficulty Getting Along With Others	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Additional Concerns: _____



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PERMISSIONS FORM

Student Name _____ Class to Enter _____
Last First Middle

Parents' or Guardians' Names: _____

• **SPECIAL PICKUP AUTHORIZATION:**

NAMES OF PERSONS AUTHORIZED TO PICK UP YOUR CHILD	RELATIONSHIP TO CHILD	THE PERSON'S PHONE NUMBER

• **AUTHORIZATION FOR MEDICAL TREATMENT**

In the event of an emergency requiring a physician's care, would you like us to call your family physician? Yes _____ No _____ If yes, please provide the following information.

Physician's Name: _____ Phone Number: _____

Address: _____ City: _____ State: _____ Zip: _____

- I give my permission to use my child's image taken/recorded during school events for advertising purposes.

Parent/Guardian's Signature Date Parent/Guardian's Signature Date



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FINANCIAL AGREEMENT **TUITION AND FEE PAYMENT POLICY**

1. I understand that payments for tuition and fees can be made with check, card, cash, or auto-draft. Payments may also be mailed to *Gospel Light Baptist Academy, 5781 Roy Drive, Helena, AL 35080*. All checks should be made out to **Gospel Light Baptist Academy**.
2. I understand that payments for K2-12th grade are paid monthly and are due in the school office on the first of the month. A payment is late when paid after the 10th *unless prior arrangements have been made with the office*. A late payment fee of \$25.00 will be charged. If payment isn't made by the 15th of the month, your child will have to withdraw from school until finances are settled with the school. Infant Tuition is due each Friday for the upcoming week. Payment must be made by Monday in order for infants to return on Tuesday.
3. I understand that there will be a charge of \$25.00 for any check returned due to insufficient funds.
4. I understand that registration fees and re-enrollment fees are not refundable except in the event the family or student moves out of the area before school begins.
5. I understand that no reductions are allowed for absences from school or holidays.
6. I understand that in case of withdrawal from GLBA, all payments must be made to ensure release of report cards, records, and transcripts.
7. Late Pickup: I understand that I will be charged (and agree to pay) a late pick-up fee of \$1.00 per minute for the first five minutes and \$5.00 per minute thereafter. In the event of an emergency, I will call the school.
8. Withdrawal: If I plan to withdraw my child from the Academy, I will submit a written notice at least two weeks in advance and will be financially responsible to GLBA for my student until that time.
9. I understand that tuition and fees for the school year must be paid in a timely manner. **Accounts that do not stay current after the first late fee will be required to enroll for auto-draft payments.**

We have read the above stated policies and hereby agree to its terms:

Parent/Guardian's Signature

Date

Parent/Guardian's Signature

Date

Financially Responsible Party-if other than Parent/Guardian

Date



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STATEMENT OF COOPERATION

We, the parents/guardians of _____,
Student(s) Name (s)

commit to the following:

We agree that the spiritual development of our child(ren) is the responsibility of the home, church, and school. We will endeavor to be involved in each of these areas.

We agree with and support the mission, vision, and purpose of Gospel Light Baptist Academy.

We pledge our loyalty to the faculty, staff, and administration of GLBA and will bring any concerns to the person(s) involved.

We understand and will encourage the importance of our child developing respect for those who have been placed in authority over them and respect the rights and property of others.

We understand that parent support and cooperation is vital for the success of the school and the child. We therefore pledge our attendance at parent meetings and special programs that our children participate in and when available, will go on our child's field trips.

We understand that the Academy staff agrees to work closely with the parents or guardians in all areas of school life and will communicate in a timely fashion any school-related problem or concern.

We understand that Gospel Light Baptist Academy is a ministry of Gospel Light Baptist Church and operates on the principle of faith. Tuition and fees are set according to an approved budget in an effort to make quality Christian education affordable to those who desire it for their children.

As the Lord provides, we will prayerfully consider gifts of time, talent, and finances to help meet needs and make improvements in the Academy. We also commit to upholding GLBA in prayer.

We understand that attendance at GLBA is a privilege and not a right.

We will do our best to tell others about the excellence in childcare and Christian education that our child is receiving at GLBA.

We have read the Parent Statement of Cooperation and hereby agree to its terms:

Parent/Guardian's Signature

Date

Parent/Guardian's Signature

Date



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RECEIPT OF PARENT/STUDENT HANDBOOK

Child's Name: _____

Parents' Name: _____

_____ I have received and read the Gospel Light Baptist Academy Parent/Student Handbook.

_____ I understand that if I have any questions on any policies or procedures I may make an appointment with the Administrator to get further clarification.

Parent Signature: _____

Date: _____