

DESERT CHAPEL CHRISTIAN SCHOOL

EST. 1980

Dear Parent,

We are humbled and honored that you are considering our school for the academic and spiritual needs of your child. We know there are other options available, so when you choose to entrust your child into our care we take every step to assure that your child has a ***quality educational experience***.

For over 30 years, we have been committed to raising our educational standards, enhancing our academic environment and preparing our students to become the ***Christian leaders of tomorrow***. To accomplish that, we began with a solid *biblical foundation* and then established strong *educational programs in sports activities, music, and art*. All of which assure that the atmosphere on our campus remains challenging and inspiring both now and for generations to come.

We are sensitive to the financial sacrifice it takes to place your child in private school. It is with this in mind that our ***tuition*** is \$4,700 for Kindergarten and \$5450 for Grades 1 through 5. We remain committed to providing you and your family with both a ***reasonable and cost effective*** alternative to both private and public education here in the Coachella Valley.

A financial commitment of that magnitude means you must be confident that this is the right school for your child. As our staff continues to strive toward the best in quality Christian education, we hope you will agree that this is the best place for your child to attend school in the 2017-2018 school year.

Pastor Frank Marshall
Principal



Isaiah 40:31

630 S. SUNRISE WAY, PALM SPRINGS CA 92264 | (760) 327-2772 | DCEAGLES.ORG | INFO@DCEAGLES.ORG

DESERT CHAPEL CHRISTIAN SCHOOL
APPLICATION PROCESS
For Elementary School
2017-2018

The following steps must be completed to apply for enrollment at DCCS for the 2017-2018 school year:

Application for Enrollment: Complete and sign.

Student Recommendation Forms: To be completed by a past administrator or teacher, Pastor or Sunday school teacher, or daycare provider, and one may be filled out by a close family friend.

Parent Agreement: Read and Sign.

Once all of the above have been returned and reviewed by our Principal, the school office will contact you to set up a time for the assessment. When you come for the assessment, please bring the appropriate \$50 fee, and the most recent report card.

NOTE: Incoming Kindergarteners must be 5 years of age on or before September 1, 2016.

APPLICATION REVIEW PROCESS

We understand that the enrollment of our student is also dependent upon the results of an academic, financial and behavioral review.

The **Academic Review** includes the most recent report card, and a review of the assessment test results.

The **Behavioral Review** includes personal recommendations, attendance, tardiness, disciplinary referrals, suspensions, classroom attitudes, Christian character, moral values and influences that the student has upon others.

The **Financial Review** includes ability to fulfill tuition contract, stewardship and any benevolence that might be made available.

The findings of this review and this completed application will determine if Desert Chapel Christian School is best suited to meet the needs of our child.

Parent/Guardian Signature

Date

Parent/Guardian Signature

Date

Desert Chapel Christian School
Application for Enrollment 2017–2018 School Year

Date of Application: _____ Student's Birthdate: _____ Grade Applying for: _____
Month Day Year

Student Information

Student's Name: _____ M F
Last First Nickname

Address: _____
Street City State Zip

Mailing Address (if different) _____
Street City State Zip

Home Phone: _____ Email Address _____
Area Code Number

Parent/Guardian Information:

Father/Guardian Name: _____

Business Name: _____

Business Address & Phone: _____

Mother/Guardian Name: _____

Business Name: _____

Business Address & Phone: _____

Student Lives with: Mother _____ Father _____ Both _____ Other _____*

*Please explain _____

Ages of other children in the home: _____

Names and grades of siblings presently attending Desert Chapel Christian School: _____

Educational Information

School transferring from _____ Grade last attended _____

Address of school _____
Street City State Zip

Phone _____

**Complete address is needed for the transfer of cumulative files and transcripts

Additional Information

1. How did you learn about Desert Chapel Christian School? _____

2. Why do you want your child to attend Desert Chapel Christian School? _____

3. Has your child ever been suspended, expelled, or asked to withdraw from a school? Yes No

If yes, please comment on the circumstances: _____

4. If accepted, how long do you anticipate your child will attend DCCS? _____

5. What are the primary areas in which you hope to see your child develop while attending DCCS? _____

6. Has your child ever skipped or repeated a grade? Yes No

If yes, please indicate the grade(s) and briefly describe the circumstances _____

7. Has your child ever received any special tutoring? Yes No

If yes, please elaborate _____

8. What type of discipline is used at home when he/she is disobedient? Does it work? _____

9. Do you consider Biblical truths/standards to be an important part of education? Why? _____

10. Do you think DCCS differs from your child's previous school? How? _____

11. What are your long term academic goals for your child? _____

12. How would you explain the partnership between school, parent and student? _____

Church Affiliation:

What church does your family attend? _____

How long? _____ Pastor's Name: _____

What church activities does your child and/or family participate in? _____

Desert Chapel Christian Schools is a Christ-centered school with Christian educational goals and objectives. We intend to encourage and enable students to receive all that God has for them spiritually, academically, physically, and socially. We recognize this to be the primary responsibility of parents, and for this reason, we believe the close cooperation of school and family is essential. We rely seriously upon the fact that your signature below affirms your support of our goals and purposes as a Christian school as they relate to the instruction of your child.

Parent/Guardian Signature Date

Parent/Guardian Signature Date

Note: Applications are considered per "date received".

Office Use Only:

- Application Received: _____
- Assessment Test Date: _____ Time: _____
- Interview Date: _____ Time: _____

Accepted: YES or NO
Date: _____
Administrative Signature: _____

DESERT CHAPEL CHRISTIAN SCHOOL
PARENT AGREEMENT 2017-2018

STATEMENT OF FAITH

1. We believe in the *inspiration of the Bible*, equally in all parts and without error in its origin;
2. We believe in the *one true God*, eternally existent Father, Son and Holy Spirit, who created man by a direct and immediate act;
3. The pre-existence, incarnation, virgin birth and sinless life, miracles, substitutionary death, bodily resurrection, ascension to Heaven, and the second coming of *the Lord Jesus Christ*;
4. The fall of man, *the need of regeneration* by the operation of the Holy Spirit on the basis of grace alone, and the resurrection of all to life or damnation; and
5. The spiritual relationship of all believers in the Lord Jesus Christ, living a life of righteous works, separated from the world, and witnessing of His grace through *the ministry of the Holy Spirit*.

STANDARDS AND POLICIES

We understand that the standards of DCCS do not tolerate profanity, obscenity in word or action, dishonoring God or the Bible, or disobedience and disrespect to the personnel of the school. We agree to support the DCCS Statement of Faith, and the Standards and Policies of DCCS.

We agree not to participate in destructive criticism of the school or staff, and if a problem arises, to go directly to the teacher or principal in a Christian manner as indicated in Matthew 18:15.

PARENT ACKNOWLEDGEMENT

We hereby release DCCS from any liability in the event of any harm to our child (ren) if our child disobeys rules or leaves campus without permission. We also agree to withdraw our child in the event that we are unable to support the policies and procedures of the school or support the Biblical instruction of the school.

Parent/Guardian Signature

Date

Parent/Guardian Signature

Date

DESERT CHAPEL CHRISTIAN SCHOOL
STUDENT AGREEMENT
2017-2018

STATEMENT OF FAITH

1. We believe in the *inspiration of the Bible*, equally in all parts and without error in its origin;
2. We believe in the *one True God*, eternally existent Father, Son and Holy Spirit, who created man by a direct and immediate act;
3. The pre-existence, incarnation, virgin birth and sinless life, miracles, substitutionary death, bodily resurrection, ascension to Heaven, and the second coming of *the Lord Jesus Christ*;
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5. The spiritual relationship of all believers in the Lord Jesus Christ, living a life of righteous works, separated from the world, and witnessing of His grace through *the ministry of the Holy Spirit*.

STANDARDS AND POLICIES

I understand that the standards of DCCS do not tolerate profanity, obscenity in word or action, dishonoring God or the Bible, or disobedience and disrespect to the personnel of the school. I agree to support the Statement of Faith, and the Standards and Policies of DCCS.

I agree to not participate in destructive gossip and criticism about the school or staff and if a problem arises, to go directly to the teacher or administrative staff in a Christian manner as indicated in Matthew 18:15.

STUDENT ACKNOWLEDGMENT

I have read the Statement of Faith of Desert Chapel Christian School, accept it, approve of it and I am willing to be educated in accordance with it.

Student Signature

Date

Desert Chapel Christian School

STUDENT RECOMMENDATION FORM

(For Non-Family Members to Complete)

Student Name: _____

Applying for Grade _____

School Year _____

The student named above has applied for admission to Desert Chapel Christian School. In helping us to make an evaluation of this applicant, we ask that you fill out this form to the best of your knowledge. We will appreciate your careful consideration of his or her intellectual and personal qualities, as your recommendation will be a very important part of our evaluation and will be kept in the strictest of confidence. PLEASE RETURN THIS FORM DIRECTLY TO DESERT CHAPEL CHRISTIAN SCHOOL.

CHARACTERISTICS:

From the list below, choose THREE words that best describe the applicant. Please circle your choices.

Agreeable	Disobedient	Humorous	Patient	Troubled
Aggressive	Distractible	Hyperactive	Perfectionist	Trustworthy
Ambitious	Energetic	Industrious	Prompt	Untrustworthy
Athletic	Generous	Late	Rebellious	Underachiever
Attentive	Happy	Lazy	Slow	Other: _____
Consistent	Healthy	Obedient	Sneaky	_____
Daydreamer	Honest	Overachiever	Supportive	_____

PERSONAL QUALITIES

Compared to all students this age with whom you have dealt, please rate this student in the following areas:

	Truly Outstanding	Excellent	Good	Average	Below Average	Poor	Not Known
Integrity	<input type="checkbox"/>						
Self-discipline	<input type="checkbox"/>						
Perseverance	<input type="checkbox"/>						
Concern for Others	<input type="checkbox"/>						
Reaction to Criticism	<input type="checkbox"/>						
Respect for Authority	<input type="checkbox"/>						
Tolerance of Peers	<input type="checkbox"/>						
Common Sense	<input type="checkbox"/>						
Energy	<input type="checkbox"/>						
Creativity	<input type="checkbox"/>						
Leadership	<input type="checkbox"/>						
Respect of Peers	<input type="checkbox"/>						
Sense of Humor	<input type="checkbox"/>						
Christian Values	<input type="checkbox"/>						
Relationship w/Parents	<input type="checkbox"/>						
Choice of Friends	<input type="checkbox"/>						
Emotional Stability	<input type="checkbox"/>						

ACADEMIC WORK:

Compared to all students this age with whom you have dealt, please rate this student in the following areas:

	Truly Outstanding	Excellent	Good	Average	Below Average	Poor	Not Known
Reading Ability	<input type="checkbox"/>						
Reading Achievement	<input type="checkbox"/>						
Writing Ability	<input type="checkbox"/>						
Writing Achievement	<input type="checkbox"/>						
Math Ability	<input type="checkbox"/>						
Math Achievement	<input type="checkbox"/>						
Study Habits	<input type="checkbox"/>						

COMMENTS:

The following space may be used to briefly share any comments you feel would help us in making a decision regarding the candidate:

RECOMMENDATION:

How do you recommend this candidate for admission to Desert Chapel Christian School?

With Enthusiasm _____ With Confidence _____ With Reservations _____ Not Recommended _____

Comments: _____

In what capacity do you know this candidate? _____

How long have you known the candidate? _____

Your Name _____ Title _____ Address _____

School/Church Name _____ Address _____

Your signature _____

Date _____ Phone number _____

DESERT CHAPEL CHRISTIAN SCHOOL DAILY SCHEDULE

8:10	School Starts with pledges
9:45-10:15	Kindergarten Recess
10:00-10:20	AM Recess (1st and 2nd Grades)
10:20-10:40	AM Recess (3rd - 5th Grades)
12:00	Kindergarten Dismissal
11:40-12:20	First Lunch (1st, 2nd, 3rd Grades)
12:05- 12:45	Second Lunch (4th and 5th Grades)
2:25	Warning Bell
2:30	Dismissal
2:30-3:00	Student Pick-up
3:00-5:30	After School Care
12:00	Minimum Day Dismissal

PARENTS' GUIDE TO IMMUNIZATIONS REQUIRED FOR SCHOOL ENTRY



Requirements by Age and Grade Entering:

Vaccine	4-6 Years Old Elementary School at Transitional-Kindergarten/ Kindergarten and Above	7-17 Years Old Elementary or Secondary School	7th Grade*
Polio (OPV or IPV)	4 doses (3 doses OK if one was given on or after 4th birthday)	4 doses (3 doses OK if one was given on or after 2nd birthday)	
Diphtheria, Tetanus, and Pertussis (DTaP, DTP, DT, or Tdap)	5 doses (4 doses OK if one was given on or after 4th birthday)	3 doses (4 doses required if last dose was before 2nd birthday. At least one dose must be Tdap or DTaP/DTP given on or after 7th birthday for all 7th-12th graders.)	1 dose of Tdap (Or DTP/DTaP given on or after the 7th birthday.)
Measles, Mumps, and Rubella (MMR or MMR-V)	2 doses (Both doses given on or after 1st birthday. Only one dose of mumps and rubella vaccines are required if given separately.)	1 dose (Dose given on or after 1st birthday. Mumps vaccine is not required if given separately.)	2 doses of MMR or any measles-containing vaccine (Both doses given on or after 1st birthday.)
Hepatitis B (Hep B or HBV)	3 doses		
Varicella (chickenpox, VAR, MMR-V or VZV)	1 dose	1 dose for ages 7-12 years. 2 doses for ages 13-17 years.	

*New admissions to 7th grade should also meet the requirements for ages 7-17 years.

WHY YOUR CHILD NEEDS SHOTS:

The California School Immunization Law requires that children be up-to-date on their immunizations (shots) to attend school. Diseases like measles and whooping cough (pertussis) spread quickly, so children need to be protected before they enter. California schools are required to check immunization records for all new student admissions at Kindergarten or Transitional Kindergarten through 12th grades and all 7th graders before entry.

THE LAW:

Health and Safety Code, Division 105, Part 2, Chapter 1, Sections 120325-120380; California Code of Regulations, Title 17, Division 1, Chapter 4, Subchapter 8, Sections 6000-6075

WHAT YOU WILL NEED AT REGISTRATION:

Bring your child's Immunization Record. You cannot register without it. The Immunization Record must show the date for each required shot above. If you do not have an Immunization

Record, or your child has not received all required shots, call your doctor now for an appointment.

If a licensed physician determines a vaccine should not be given to your child because of medical reasons, submit a written statement from the physician for a medical exemption for the missing shot(s).

Until 2016, if a vaccine is contrary to your personal beliefs, you may submit form CDPH 8262 for the missing shot(s). The form must include the signatures of both a parent and an authorized health care practitioner. For details, see: ShotsForSchool.org/laws/faqs/pbe.

You must also submit an immunization record for all required shots not exempted.

Questions? Visit ShotsForSchool.org or contact your local health department (bit.do/immunization).