



CALVARY CHRISTIAN SCHOOL

PERSONAL DATA AND EMERGENCY INFORMATION FORM

A

Full Name of Pupil: _____ Grade: _____ DOB: _____
Last First Middle

Address: _____ City/State _____ Zip Code: _____

Home Phone: () _____

Medication Allergies: _____ Food Allergies: _____

Environmental Allergies: _____

Epi-pen? Yes ___ No ___ self-carry? Yes ___ No ___

Asthma? Yes ___ No ___ Inhaler? Yes ___ No ___ self-carry? Yes ___ No ___

Prosthetic Devices? If yes, please list: _____

Physician's Name: _____ Physician's Phone: _____

TO PARENT OR GUARDIAN: To serve your child in case of accident or sudden illness, it is necessary that you furnish the following information:

Mom's Name: _____ Dad's Name: _____

Home Address: _____ Home Address: _____

Work Phone: () _____ Cell: () _____ Work Phone: () _____ Cell: () _____

Email: _____ Email: _____

Mom's Employer: _____ Dad's Employer: _____

If you cannot be reached, please list persons authorized to pick up your child in case of emergency or illness. This person will only be contacted if neither the student's mom or dad can be reached at any of their provided telephone numbers. This person will be required to present proof of identification:

Name: _____ Phone: () _____ Relationship: _____

Name: _____ Phone: () _____ Relationship: _____

In case of emergency and neither parent nor the two people listed above can be contacted, I give permission for my child to be transported via ambulance to whatever local hospital deemed necessary for treatment.

Parent/Guardian Signature: _____ Date: _____

Does your child currently have any of the following conditions?

___ ADD/ADHD
___ Anxiety
___ Depression
___ Sensory Issues
___ Bone Fracture

___ Asthma
___ Reactive Airway Disease (RAD)
___ Congenital Heart Problem
___ Heart Disease
___ Heart Murmur

___ Epilepsy/Seizures
___ Allergic Reactions
___ Eczema
___ Sensitive skin
___ Arthritis

Please add any additional details on conditions that apply to your child from the list above:

Please list any other diseases, illnesses or problems which apply to your child not already mentioned above:

Does your child take any over-the-counter or prescription medications on a regular, daily, as-needed, or seasonal basis? If so, please list (include pills, tablets, capsules, liquids, inhalers, nebulizers, nasal sprays and injections; whether taken at home or at school):

NOTE: CCS does not provide voluntary medical insurance coverage for students. Should a student become injured on the premises or during a school-sponsored event, the student's family insurance is the primary carrier.

EMERGENCY INFORMATION AND TREATMENT RELEASE FORM

TO PARENT(S) OR GUARDIAN: To serve your child in case of ACCIDENT OR SUDDEN ILLNESS either at school, on a field trip, or any school sponsored activity, it is necessary that we have this release form signed.

I, the undersigned, do hereby authorize staff of Calvary Christian School to contact directly the persons named on this PERSONAL DATA FORM and do authorize medical personnel to render such treatment as may be deemed necessary in an emergency, for the health of said child. I further authorize staff of Calvary Christian School to release any medical information they deem necessary to the care of my child by medical personnel in the event of an emergency.

In the event parents or guardians named on this PERSONAL DATA FORM cannot be contacted, school officials are hereby authorized to take whatever action is deemed necessary in their judgement, for the health of the aforesaid child.

I will not hold Calvary Christian School financially responsible for emergency

Student Name: _____

Grade: _____

Signature of Parent or Guardian

Date

**B**

CALVARY CHRISTIAN SCHOOL PERMISSION TO ADMINISTER MEDICATION

Student Name: _____ **Grade:** _____ **School Year:** _____

Birthdate: _____ **Age:** _____ **Current Weight:** _____ lbs

Allergies to Medication? _____ Yes _____ No **If yes, please list** _____

Epi-Pen? _____ **Self-carry?** _____ **Asthma?** _____ **Inhaler?** _____

Medication Name	Permission to Give
Acetaminophen (Generic for Tylenol)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Ibuprofen (Generic for Advil or Motrin)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Diphenhydramine HCl (Generic for Benadryl)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Cough Drops (Any over the counter brand)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Calcium Carbonate Antacid (Generic for Tums)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Hydrocortisone Cream (0.5% - 1% Anti-itch cream)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Benadryl Cream/Spray (anti-itch cream/spray)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Bacitracin (antibiotic ointment)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Pseudoephedrine HCl (Generic for Sudafed)	<input type="checkbox"/> Yes <input type="checkbox"/> No

******Medication will be administered based on age/weight dosing on packaging for the over-the counter medications.

NOTE: For prescription medications, your student's name must be on the label and the label must match the directions on a signed note from the parent/guardian. The initial dose cannot be administered at school. Please fill out the Medication Permission Slip. This can be found under Forms & Downloads on the CCS webpage.

In signing this form, I (parent) acknowledge that I give permission for the above prescription and/or over the counter medications to be administered to my child as indicated; I further acknowledge that I release Calvary Christian School and its staff members/employees from any liability of any nature that might result from the administration of medication to my student.

Signature of Parent or Guardian: _____ **Date:** _____



Calvary Christian School
5955 Taylor Mill Road
Covington, KY 41015

C

Information for Individual Background Check

If you will be volunteering at CCS or participating as a chaperone on school trips, you must fill out the information below and **check which payment type you prefer.**

Information on individual whose record is being checked (please print clearly):

Social Security # _____

Name: _____

Date of Birth: _____

Maiden or Alias Names: _____

Street Address/P.O. Box: _____

City, State, ZIP: _____

E-mail Address: _____

I hereby give Calvary Christian School of Covington, Kentucky, permission to use the previous information.

Signature

Date

Bill my FACTS account the \$10 fee. If a relative, what family should we bill?

Check/cash is attached for \$10 fee. Check Number _____

I am a coach or bus driver. (No cost)

CCS Staff Member. (No cost)

6/2023



Calvary Christian School

Computer/Mobile Device/Internet Permissible Use Policy

(Grades 1-3)

Student Name: _____

Grade: _____

Calvary Christian School believes that the Internet has much to offer with its wide variety of resources. Access to the Internet provides a wealth of information resources, research opportunities, communication services and international exposure in ways that would be otherwise unavailable.

Because there is such a wealth of information available on the Internet, material not considered to be of educational value is also available. Some material may contain items that are inaccurate, offensive, satanic or illegal. We have taken precautions to limit access to such materials through the use of Internet filters. It is, however, impossible to control all access to such information and a user may find such material either deliberately or by accident. We believe, however, the benefits to students from on-line access outweigh the possibility that a user may obtain material inappropriate for an educational setting.

We desire that this resource be used in a manner that ensures the continued smooth operation of our computer network and that it will fit into our overall goals and objectives for students at CCS. The Internet user is held responsible for his/her actions when on-line. All users, therefore, must abide by the guidelines as outlined in this policy. If a user violates these guidelines, further access to the Internet and/or use of computers at CCS may be denied. Additional discipline may be administered in accordance with the Parent/Student Handbook.

Guidelines:

- A. Access is a privilege, not a right. This privilege requires consideration and responsibility on the part of the user. Inappropriate use will result in suspension or cancellation of computer privileges. The school administration and system administrator will determine what is inappropriate. The administration, faculty or staff may request that the system administrator deny a specific user access. This applies to school computer equipment and personal computer equipment used at school.
- B. Internet access will be permitted only for those who are authorized to use the system and only for an authorized purpose.
- C. Students are expected to use good behavior, proper etiquette and act responsibly, politely and ethically as they use the Internet.
- D. Users are not permitted to use the school computer resources for commercial purposes, product advertising, political campaigning or lobbying.
- E. Network users are not permitted to transmit, receive, submit, or publish any defamatory, inaccurate, abusive, obscene, profane, sexually oriented, threatening, offensive or illegal material.
- F. Physical or electronic tampering with computer equipment is not permitted. This includes, but is not limited to, deliberate changing of settings, activating screen savers, installation of unauthorized software, vandalism, "hacking" or other disruption in the operation of the computer or network. Users shall be responsible for damages to equipment, systems and software from deliberate acts. Any and all costs incurred by CCS for repairs, and/or replacement of software, hardware, and data files shall be the responsibility of the user who created the problem.

- G. Users must not violate copyright laws in the use, installation, distribution, duplication or modification of copyrighted material. Plagiarism will not be tolerated.
- H. Internet users will in no wise use the network for financial gain or carry out financial transactions of any kind.
- I. If a user discovers a security problem in the school's computer network, he or she will notify the system administrator. They will not demonstrate the problem to others. Users shall not attempt to "hack" the computer system.
- J. Users must not use another's account or password nor reveal passwords to others. A user must not attempt to impersonate another person nor use the network to disrupt the work of others or use others' folders, work, data or files.
- K. Students shall not use a computer logged in under another student's name. Users are not to use a computer logged in under a teacher's name.
- L. Users are not to post notes to newsgroups or bulletin boards nor enter any chat rooms. Internet users shall not reveal addresses, phone numbers or other personal information to others on the Internet. Students are not to access social media sites such as Facebook, Twitter, etc., without teacher permission. Devices should be used for "school-related purposes."
- M. Information retrieved by a user is that person's responsibility and at his own risk. Calvary Christian School assumes no liability for the accuracy of any information from the Internet. CCS is not responsible for the loss of data, delays, lack of delivery of information or service interruptions. Although every effort will be made to insure a reliable connection, there may be times when the Internet service is "down" or unavailable.
- N. Students may not download files from the Internet nor upload to/through the school network unless granted permission from a faculty member. Any such files must be checked by a virus scan.
- O. Users shall realize that communications over the network are not guaranteed to be private. System administrators may review files, messages, or data to insure that the system is being used responsibly. Messages supporting illegal activities may be reported to the authorities.
- P. Users shall not load unauthorized games, programs, files or any other media on any school computer system. The computers at CCS are educational tools and are not to be used for one's personal recreation.
- Q. Posting of pictures or videos of students, faculty, or staff without their permission, is strictly forbidden.
- R. Use of personal computers, phones, iPads, etc. are subject to the same above policies when being utilized during CCS hours. Permission for use of these items is managed by the CCS administration and teachers. Teachers maintain final authority for the educational use of technology in their classroom.

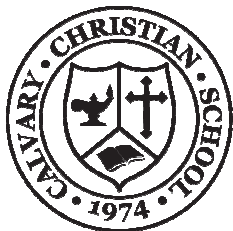
Any violations of the above guidelines may result in loss of computer access, as well as other disciplinary or legal action that is consistent with and in accordance with the Parent/Student Handbook. Your signature below signifies your agreement to comply with this policy.

Student Signature

Date

Parent Signature

Date



HOMEROOM PARENT (Preschool – 6th Grade)

Very often we have parents who express an interest and desire to help in classroom activities during the school year. We count it a real privilege to work with you and we truly appreciate your invaluable assistance and help in so many areas. During the year we have a number of parties, projects, outings and special activity days, for which we need the help of party planners, coordinators, chaperones, drivers, etc.

Please Note: Classroom parties are for the enjoyment of the classroom students, teacher, and attending parents. For that reason, younger siblings attending any classroom party are asked to be well-behaved and under the direct supervision of the parent. The principal and teachers have the option of requesting that no younger siblings attend a classroom party due to the various nature of a said activity.

If you have the time and would be interested in serving as a room parent, we would appreciate your involvement with us this school year. We understand, of course, that family, job and other obligations sometimes prohibit parents' participation. We do appreciate not only your practical help, but also your prayer support.

Please look over the list below and check the space that indicates what you would like to do:

- ☐ I can serve as head room parent
- ☐ I can serve as room parent – assist head room parent
- ☐ I could help furnish refreshments
- ☐ I could provide supplies such as paper plates, napkins, etc.
- ☐ I could be a chaperone on field trips
- ☐ I cannot participate in any of the above activities, but I will be with you in spirit.

Parent's Name (print) _____

Child's Name _____ Grade _____ Teacher _____

Home Phone _____ Cell Phone _____

Email Address _____

Thank you for giving of your valuable time and willingness to help. We consider it such a privilege to work with you and your child.

CCS EXTENDED CHILD CARE (ECC)

H

Calvary Christian School offers to parents an Extended Child Care (ECC) service for their CCS children in grades K3-12 **after** school hours. The ECC program includes a snack, supervised study time and limited recreation activities. ECC is only available to CCS students. The ECC program follows the same school calendar and observes the same holidays and days off as CCS. Elementary, MS and HS athletes utilizing ECC while waiting for practices will be charged at regular ECC rates. **There is no ECC on half days!**

ECC DAILY HOURS: 3:30 – 6:00 pm

ECC CHARGES:	<u>Per Half Hour</u>	<u>Per Hour</u>	<u>After 6:00pm</u>
Cost per child	\$ 3.50	\$ 7.00	\$ 10.00 every 15 minute interval

ECC is in operation until 6:00 pm. Students not picked up at school by 3:30 pm will be directed to the ECC room and assessed the appropriate charges. There is a grace period from 3:10-3:30 pm each day, but charges will begin at 3:30 pm; with a half hour per student minimum.

AFTER 6:00 PM THERE IS A CHARGE OF \$10.00 PER CHILD FOR EVERY 15 MINUTE INTERVAL. (Minimum charge of \$10.00)

NOTE: *ECC charges will be billed to your family's FACTS account at the end of each month.*

AFTER SCHOOL CHILD CARE REGISTRATION

Student's Name: _____ Grade: _____

Student's Name: _____ Grade: _____

Parent's Name _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Parent's email: _____

List Any Allergies? _____

Emergency Contact Person: _____

Cell Phone: _____ Home Phone: _____

Names of any persons that do NOT have permission to pick up my child from ECC:

✓ *I understand the guidelines and agree to pay all charges occurred on behalf of my child(ren).*

Parent's Signature _____ Date _____



VOLUNTEER AT CCS

I

One of the major factors of Calvary's success is our incredible parental involvement & support!
Please check the school events below that you would like to help with this year and submit with your
Orientation forms.

Remember to submit your Background Check Form "C" in order to volunteer.

Thank you so much for supporting the ministry of Calvary Christian School!

Volunteer in CCS Departments:

____ LIBRARY ____ LUNCHROOM ____ NURSE'S OFFICE ____ T.R.I.P. OFFICE
____ ATHLETICS ____ BUS DRIVER ____ OFFICE HELP ____ MAINTENANCE

Volunteer for PTCA Events:

____ CHRISTMAS BOUTIQUE
____ FAMILY MOVIE NIGHT
____ TALENT SHOW
____ MOTHER/SON DANCE
____ FATHER/DAUGHTER DANCE

Volunteer at School Events:

____ THANKSGIVING FEAST
____ HS PLAY/MUSICAL

Name of Volunteer: _____ Primary Phone: _____

Email: _____

Relationship to CCS: ____ Parent ____ Grandparent ____ Relative ____ Alumni ____ Friend



CCS PRIVATE MUSIC LESSON REGISTRATION REQUEST

I desire to have (student) _____, who is in grade _____, HR teacher _____, enrolled for private music lessons for the school year. The cost will be \$17.50 per piano lesson, voice or instrument lesson. I will pay the appropriate fee billed to me through FACTS or given to the music teacher (payable to CCS). I would prefer, if schedule permits, to have the lessons (Check all that apply):

_____ During school _____ After school _____ During blocks ____ or ____ (7-12 only)

_____ Voice _____ Piano _____ Brass Instrument (Trumpet, French Horn, Trombone, Euphonium or Tuba)

Comments: _____

Parent Name (please print): _____

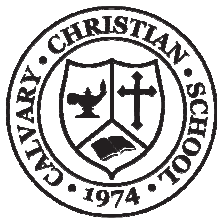
Date: _____ Phone: _____ Email: _____

****Return upper portion to the CCS office****

****Keep lower portion for your records****

MUSIC LESSON POLICY

- | | |
|------------------------|---|
| 1. PAYMENT: | Lesson fees will be billed to your FACTS account or collected by the teacher depending on the regularity of the lessons. All are payable to CCS. |
| 2. LESSON TIME: | The instructor will contact you to schedule a time after consulting with your teachers. |
| 3. EXCUSED ABSENCES: | Due to sickness by student or teacher, injury, field trips, special school activities, or vacation. Please contact the teacher 24 hours in advance, if at all possible. Excused if CCS administration cancels school. |
| 4. UNEXCUSED ABSENCES: | Forgetting lesson, lack of practice, last minute cancellations except emergencies, will be unexcused and the lesson possibly forfeited and no refund given. |



Calvary Christian School

5955 Taylor Mill Road
Covington, KY 41015

K

PHOTO & VIDEO RELEASE FORM

During the school year, Calvary Christian School and media representatives may want to interview, photograph, or videotape your child(ren) for use in publications, television reports, school website pages, social media, and public presentations or live stream of school events. The pictures and videos may be of groups of students or individuals, and the students' name may be used.

NOTE: *CCS is not responsible for pictures posted by parents on social media.*

Please complete the section below and return the form to the office.

_____ I give permission for my child to be photographed, interviewed and permission to have my child's name used.

_____ I **do not** give permission for my child to be photographed, recorded during events, or interviewed and I do not want my child's name used on any publications.

Note: *This does not include yearbook.*

Student's Name (Print)

Teacher/Grade

Signature of Parent/Guardian

Date

Print Name of Parent/Guardian



CALVARY CHRISTIAN SCHOOL PARENT/STUDENT AGREEMENT 2023-2024

M

Student Name: _____ Grade: _____

In making this application, I/We agree that:

1. We will accept the challenge to “train up a child in the way he should go” and state that this training will be carried on in the home. We shall place our trust in Calvary Christian School to extend that training more completely.
2. At least one parent of the applicant is a Christian, having accepted Jesus Christ as personal Savior (Romans 10:9-13). Salvation is by faith alone in the death, burial and resurrection of Jesus Christ (I Corinthians 15:3-4), and is not of works (i.e. baptism, sacraments, confirmation, and church membership).
3. We will faithfully attend the services of a Bible-believing church. The Bible, consisting of 66 books from Genesis to Revelation, is the inspired Word of God and our authority in all matters of faith and practice.

Church Name: _____ Pastor's Name: _____

4. We have read the updated Parent/Student Handbook on the school website and agree to abide by all standards, procedures and regulations therein.
5. We will pray for the school's staff.
6. We will not foster or exercise at CCS any personal religious doctrinal belief or practice contrary to that which is promoted by CCS.
7. The school personnel are authorized to discipline our child(ren) in accordance with the Parent/Student Handbook.
8. If for any reason our child does not respond favorably to the school's standards, guidelines, or expectations, we will withdraw him/her.
9. We will pay all tuition and fees promptly and according to school policies. Late fees will be added to payments received after the due date. When a tuition account is in arrears, the student(s) may be asked to withdraw from CCS, and all records, except medical, will be held until required payments are made in full. Graduating students will not receive a diploma or transcripts until all tuition and fees are paid and CCS property is returned.
10. If our student is withdrawn, we will notify the school office **in writing before the first of the month** in order to avoid paying the entire month's tuition.
11. Our child(ren) will participate in scheduled field trips, class trips and other school activities.
12. We understand that CCS does not provide voluntary medical insurance coverage for students. Should a student become injured on the premises or during a school-sponsored event, the student's family insurance is the primary carrier.
13. We will promote the spirit of unity within the school by following the Matthew 18 principle. If a problem arises, we will first contact the school personnel who can help (rather than those not involved). We will follow the proper chain of command when necessary until the problem is resolved. The parties to this agreement adhere to Christian principles and believe that the Bible commands them to make every effort to live at peace and to resolve disputes with each other in private or within the Christian community in

conformity with the biblical injunctions of I Corinthians 6:1-8, Matthew 5:23-24, and Matthew 18:15-20. Therefore, the parties agree that any claim or disputes arising out of or related to this agreement, including but not limited to, claims arising from statute, ordinance, regulation, case law or any other source shall be settled by biblical based mediation. If resolution of the dispute and reconciliation do not result from such effort, the matter shall then be submitted to an independent and objective arbitrator for binding arbitration. The parties agree that the mediation and arbitration process will be conducted in accordance with the “Rules of Procedure for Christian Conciliation” contained in the Peacemaker Ministries booklet, *Guidelines for Christian Conciliation*, which both parties will have had an opportunity to review. The parties agree that these methods shall be the sole remedy for any controversy or claim arising out of this agreement and expressly waive their right to file a lawsuit against one another in any civil court for such disputes except to enforce a legally binding arbitration decision. Each party, regardless of the outcome of the matter, agrees to bear one-half of the fees and costs of the arbitrator and any other arbitration expense. The parties to this agreement have had an opportunity to consult legal counsel before signing this agreement.

14. In our emails, phone calls and face-to-face conversations, we will approach teachers, administration and other parents in a respectful manner.
15. We will avoid posting or responding to negative social media posts about CCS.
16. We will support the fundraising efforts of the school, as the Lord allows.
17. We will support Calvary Christian School’s scriptural stance on marriage and gender regarding co-habitation, any LGBTQ lifestyle choice and same-sex marriage, understanding that the practice of these lifestyle choices is inconsistent with the teachings of Scripture and inconsistent with enrollment at CCS. (Genesis 2 and Ephesians 5) This applies to both students and parents.
18. Parents/Guardians of current CCS students are to be continuous role models of Christ-like behavior to their children and to the members of other school families. Expected to faithfully practice biblical standards in their home, church and community, parents are expected to glorify God in all that they do (I Corinthians 10:31), including striving to be godly examples in their dress (I Peter 3:3, 4), their words (James 3:5-12, Luke 6:45), their actions (James 3:14-18), and in their attitude (Philippians 2:1-16). Should a parent neglect one or more of these responsibilities, it may become incumbent upon the school administration and CCS Executive Committee to exercise the appropriate measures to resolve the situation in accordance with the decision of the board. If the situation cannot be resolved peaceably, then said parent[s] and/or guardian[s] will be expected to quietly withdraw their children from the school.
19. We understand that CCS offers Continuous Enrollment and that our FACTS account will be billed the Continuous Enrollment fee in March each year.
20. Recommendation for admission of the applicant is at the discretion of the CCS Administration. Outstanding tuition, fees and fines, may jeopardize a student’s reenrollment. Final approval of admission, including reenrollment, is determined by the administration and CCS Admissions Committee.

*I/We have carefully read the above guidelines and have completed all required items in the application process.
I/We agree to uphold all guidelines as part of the CCS family.*

Father’s Name (print)

Father’s Signature

Student’s Signature (7-12)

Mother’s Name (print)

Mother’s Signature

Student Name

Date



CALVARY CHRISTIAN SCHOOL MEDICATION PERMISSION SLIP

I give permission for school personnel at Calvary Christian School to administer the following medication to my student:

Name of student: _____

Name of medication: _____

Dose of Medication (mg, ml, etc): _____

Time(s) or time frame medication is to be given: _____

Date to begin medication: _____ Date to end medication: _____

Is medication given daily or just as needed? _____

Reason for medication: _____

Special Instructions: _____

The initial dose cannot be given at school

I will provide this medication in the original, properly labeled manufacturer container/packaging (non-prescription medication) or pharmacy labeled container (prescription medication). I agree to notify the school when the drug is to be discontinued and/or the dosage or time changed. If the dose or time is changed, I will need to complete a new form. I release school personnel from any liability in relation to the administration of this medication at school.

Parent/Guardian Signature: _____ Date: _____



Calvary Christian School

5955 Taylor Mill Road
Covington, KY 41015

O

Live Stream Release Form

Throughout the school year, we have various events (daily classroom, musical programs, sporting events, etc.) that are live-streamed to the general public. The programs or videos will be published to platforms such as YouTube, Google Drive or Calvary Christian School social media channels.

Please complete the section below and return the form to the office.

_____ I give permission for my child to participate in live and/or recorded school events. *(Note: these videos are the property of CCS and any usage of these videos in part or whole without the expressed written consent of CCS is prohibited.)*

_____ I DO NOT give permission for my child to participate in live and/or recorded school events.

Student's Name (Print)

Teacher

Grade

Signature of Parent/Guardian

Date

Print Name of Parent/Guardian