

MISSION POINT CHRISTIAN ACADEMY
Weekday Preschool
New Student Application



MISSION POINT CHRISTIAN ACADEMY

A ministry of First Baptist Canton

One Mission Point ♦ Canton, Georgia 30114

Phone 770.479.5538, x1345

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Christ-Centered Academic Excellence



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What We Believe

While he was chaplain to the US congress, Peter Marshall once prayed: “Lord, help us to stand for something lest we fall for anything.” Those who lack the conviction to stand for something make an easy prey to error.

Goethe wrote: “Three things are to be looked upon in a building: that it stand on the right spot; that it be securely founded; that it be successfully executed.” I cannot think of better advice for a church—we better stand on the right spot!

Where does First Baptist Canton stand? Here is a summary of our position on the fundamentals:

God—There is only one living and true God. He is sovereign, holy, perfect, and eternal. He is the creator and sustainer of all things. He expresses Himself in three persons: Father, Son, and Holy Spirit. Each person of the godhead is unique, fulfilling a different role, and yet they are one in purpose and essence.

Jesus Christ—He is God. Born of a virgin, He entered this world in human flesh. He lived a perfect life. He died for our sins on the cross. Three days later He actually and physically rose from the grave. He is coming again one day to establish His kingdom upon this earth.

The Holy Spirit—He is also God. He convicts the lost of their need for a Savior. He lives in the heart of every born-again believer. He enables and empowers believers to serve Christ and live for His glory.

The Bible—The Bible is God’s revelation of Himself to man. His truth is revealed to us without any elements of error. It is our guide in faith and practice both individually and corporately.

Salvation—Men outside of Christ are lost in sin. Jesus died to redeem them and offer an eternal and personal relationship with Him. To be saved, a person must repent of sin and personally trust Christ to come into his or her heart and be saved.

Eternal Security—When a person is saved by grace through faith in Christ, that person is eternally kept saved by God’s grace.

Baptism—Believer’s baptism is an act of obedience to Christ. Baptism does not save, but it is a symbol of the new life a person experiences through faith in Christ. The proper mode of baptism is immersion, because only immersion represents the death, burial, and resurrection of Christ and our union with Him. Christian baptism must come after salvation.

The Lord’s Supper—This is a reverential time of fellowship and remembrance. As Christians eat the bread and drink the juice, we demonstrate belief in the sin-cleansing power of Christ’s crucified body and shed blood.

The Church—The church is made up of baptized believers in the Lord Jesus Christ. The church is the local, visible expression of Christ’s body on this earth.

Archimedes, the ancient Greek mathematician and physicist, said, “Give me a place to stand, and I will move the earth.” This is where the First Baptist Church of Canton stands.

Mission Statement

"Building Today's Children to become Tomorrow's Leaders"

Building a GROWING Relationship with GOD

- ◆ The eternal God of the universe desires to have a personal relationship with each one of us. The revelation of this truth has through the centuries amazed many and eluded others. Yet this is what the Scriptures clearly teach us. We were created for fellowship with God.
- ◆ The answers to life's most profound questions, along with instruction for daily living, are found in the pages of the Bible. Our goal at MPCA is to encourage and equip our students to grow in their walk with Christ through worship, Bible study, daily devotion, and practical application of God's truth. *"Abide in Me . . ." (John 15:4).*
- ◆ Our curriculum is Christ centered and based on the true Word of God.

Building a LOVING Relationship in the HOME

- ◆ Love, commitment, and faith...these are some of the essential elements needed to build a strong family. The strength of the family bond is determined by the quality of these elements.
- ◆ God was the first "Family Planner," and He provided us with the ultimate "Family Instruction Guide" — the Bible. The Bible is God's instruction manual for building strong families. At MPCA we want to partner with you in building a family that will last forever. *"And regardless of what else you put on, wear love" (Col. 3:14, MSG).*

Building a NURTURING Relationship in the SCHOOL

- ◆ At MPCA we want to help you connect meaningfully with other people. We are an interdependent community of believers seeking to glorify God by nurturing one another to be more like Christ.
- ◆ We are here to support you and your family in providing a quality Christian education for your children. *"For we are members of His body" (Eph. 5:30).*

Building a WITNESSING Relationship with the WORLD

- ◆ As we grow in Christ we develop a common purpose. It is to fulfill Jesus' commission to go and tell others of His love and how they may know Him. We are told to make disciples of all nations.
- ◆ Our mission is the same for our school—to lead others to Jesus, to baptize in His name, and to instruct from His Word. This is our one mission and purpose.
- ◆ Our goal is to instill in our students a growing desire to be salt and light to the world.
- ◆ We are located at "One Mission Point" as our reminder that everything in which we invest ourselves is to have that one mission at its core. *"Open your eyes and take a good look at what is right in front of you...It's harvest time" (John 4:35, MSG)*

Application Procedure

The following checklist is designed to help you submit a complete application. An incomplete application can cause delays in processing and jeopardize your child's enrollment. If unable to complete all checklist items, please explain in writing with your application.

- Submit the Enrollment Application with the following attachments:
- Registration Fee of \$100 (non-refundable)

Open enrollment begins on February 1, but the MPCA Weekday Preschool office will be glad to receive student applications at any time. Priority will be given to currently enrolled MPCA Weekday Preschool students before that date, but all other applications will be numbered in the order in which they are received.

The Admissions Committee will review your application. At that time, the following information will need to be provided in order to complete the enrollment process.

- Certificate of Immunization (Form 3231)

If you have any questions about the application and/or enrollment process, please call the school at 770.479.5538, x1345. We look forward in assisting you with the Christian education of your child.

Mission Point Christian Academy admits students of any race, color, national, and ethnic origin to all the rights, privileges, programs, and activities made available to students of the school. It does not discriminate on the basis of race, color, or national and ethnic origin in administration of its educational and admission policies, or other school-administered programs.

General School Policies

- ◆ According to the Bible, parents are responsible for the training of their children (Deuteronomy 6:1-7; Proverbs 22:6; Ephesians 6:1-4). Mission Point Christian Academy Weekday Preschool serves as partners with parents in providing a Christ-Centered, excellent education consistent with biblical truth. Harmony between home and school provides the best environment for godly education and training to take place. We seek to establish a covenant with you in the nurturing development of the following essential character traits of your student (s): Integrity; Respect; Thankfulness; Service; and Eternal Values.
- ◆ Mission Point Christian Academy Weekday Preschool believes that an integral part of providing a Christ centered, academically excellent education is establishing an environment of learning where children exhibit godly self-discipline. Training children in the “discipline and instruction of the Lord” cannot be separated from education. The whole training and education of children relates to the cultivation of mind and morals, and employs for this purpose commands and admonitions, reproof and punishment. MPCA Weekday Preschool communicates student behavioral expectations to parents and expects that parents and school covenant together in the full education of the child. When behavioral expectations are not met, graduating forms of discipline commensurate with the offense are administered. All discipline is grounded and balanced by biblical principles of love, justice, restitution, mercy, and grace.
- ◆ Due to resource limitations, MPCA Weekday Preschool is unable to accommodate students with extreme learning disabilities, severe hyperactivity, emotional disturbances, severe visual or hearing impairment, or retardation.
- ◆ Children being enrolled in the 3- or 4-year-old programs must be potty trained.

School Year: 2007-2008

Application Date: _____ Registration Fee: _____

Received by: _____ Book/Activity Fee: _____

Registering for what age group: _____

Student Information

Last Name: _____

First Name: _____ Middle Name: _____

Preferred Name: _____ Age: _____ DOB: ____/____/____

Gender: Boy Girl Race: _____

Residential Address: _____

City: _____ County: _____ State: _____ Zip: _____

Home Telephone: _____ Neighborhood: _____

Student lives with: Both Parents Mother Father Other _____

Do any court-ordered restrictions apply? Yes No If yes, please provide documentation.

Parent Information

Father First Name: _____ MI: _____ Last Name: _____

Marital Status: Married Divorced Separated Remarried Widowed Single

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

Home Phone: _____ Cell Phone: _____

E-mail: _____

Occupation: _____

Employer: _____

Work Phone: _____ Allowed to pick up child? Yes No

Emergency contact? Yes No

Mother First Name: _____ MI: _____ Last Name: _____

Marital Status: Married Divorced Separated Remarried Widowed Single

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

Home Phone: _____ Cell Phone: _____

E-mail: _____

Occupation: _____

Employer: _____

Work Phone: _____ Allowed to pick up child? Yes No

Emergency contact? Yes No

Send all official school correspondence to (check all that apply):

Student Address Father Address Mother Address

Other _____

Grandparent Information

Maternal Full Name: _____ Phone: _____

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

Paternal Full Name: _____ Phone: _____

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

Siblings

Name			
_____	_____	_____	_____
Age/Gender	_____	_____	_____
School	_____	_____	_____

People Authorized to Pick Up Your Student:

Name

Relationship

Phone

1. _____

2. _____

3. _____

4. _____

5. _____

Health and Emergency Information

Please list allergies (including food allergies), drug allergies, or medications taken on a regular basis and dosage given _____

Will the child require medication during school hours? _____

If yes, please list type and dosage _____

Do you grant permission for weekday preschool staff to administer that medication as needed? Yes No

If no, please indicate how you want such medication handled _____

Please note if your child has any illness, physical disability, hearing loss or difficulties, or vision difficulties that you would like the school to know about in order to better care for your child. This information will be kept strictly confidential.

Children entering our 3- and 4-year-old program must be potty trained.

Is your child potty trained? Yes No

A completed Georgia Department of Human Resources School Certificate of Immunization (Form 3231) **must** accompany your child's registration. A recent physical examination, while not required for application, is encouraged for each student.

Names of two to five persons to call if parent cannot be reached in an emergency (list non-parents only).

	Name	Relationship	Phone
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____

In case of accident or serious illness, I request the school to contact me or one of my emergency contacts. If the school is unable to reach me, I hereby authorize the school to get appropriate medical help and make whatever arrangements are necessary

Parent's Signature _____

Social and Physical Growth

Is your child . . . : Right-handed Left-handed Well-coordinated
 Impulsive Shy Talk well

What problem does your child have that concerns you most? _____

What do you feel are his or her special abilities or capabilities? _____

Experiences with Others

What are your child's favorite toys? _____

Special interests? _____

Foods? _____

Is your child enrolled with a special group (such as dancing, baseball, etc.)? _____

How does your child react when he/she doesn't get his/her way? _____

Fun things you do together _____

Educational Information

Name of Preschool previously attended _____ Complete Address _____ City _____ State _____ Zip _____

Does your child have any specific learning challenges? Yes No
If Yes, please explain nature and type(s) of test(s) that have been administered _____

Has the student ever been suspended, expelled, or asked to withdraw from any school for any reason? Yes No If Yes, please describe _____

What particular strengths and weaknesses does your child have that would allow our school to accentuate the strengths and help negate the weaknesses?

Weakness(es) _____

Strength(s) _____

Please list any hobbies, talents, or interests of your child _____

Survey Information

How did you hear about us?

- Friend/Family Member Web Site Ad—Magazine _____
 Other _____

Are you interested in working as a substitute (lead teacher or asst)? Yes No

Would you be willing to volunteer your time working at the school? Yes No

If Yes, in what way? _____

Additional Comments

Certification

To the best of my knowledge, the information provided in this application is true and accurate. I have read the application packet and agree with the Statement of Faith and General School Policies as printed in this application package. I understand that a complete Georgia Department of Human Resources Certificate of Immunization (Form 3231) **must** accompany this application.

Signature of Parent / Date

Signature of Parent / Date

Age Group for which Child Is Being Registered

- | | |
|---|--|
| <input type="checkbox"/> Parents Morning Out—2-11 months | <input type="checkbox"/> 3 Year, 2 day |
| <input type="checkbox"/> Parents Morning Out—12-18 months | <input type="checkbox"/> 3 Year, 3 day |
| <input type="checkbox"/> Parents Morning Out—19-24 months—MW | <input type="checkbox"/> 4 Year Pre-K, 3 day |
| <input type="checkbox"/> Parents Morning Out—19-24 months—TTh | <input type="checkbox"/> 4 Year Pre-K, 4 day |
| <input type="checkbox"/> 2 Year—MW | <input type="checkbox"/> 4 Year Pre-K, 5 day |
| <input type="checkbox"/> 2 Year—TTh | |