



Stephenville Christian School

2023 - 2024

Returning Student Enrollment Packet

Grades PreK3 – High School

Stephenville Christian School
1120 CR 351, Stephenville, TX 76401

Phone: 254.965.4821 stephenvillechristianschool@gmail.com Fax: 254.965.6853

www.stephenvillechrisianschool.com

The School's Vision

The purpose of Christian schooling is to work with the Christian family and church while presenting our covenant children a unified, distinctively Christian view of the world and their unique place in it as God's people. Because Jesus Christ is sovereign Lord over all, He and His Word must be central and govern every area of life, especially our children's schooling where they form their understanding of the world. Our goal is to help every student grow into a responsible citizen of our world, nation, state, and community; and a responsible citizen of Jesus Christ's kingdom, willing and able to serve God and community.

Whereas the state has a secondary role in supporting and assisting parents in the provision and setting of standards for schooling, it is the parents to whom God has given the primary responsibility for their children's education and training. Parents have the responsibility and privilege of choosing schooling that is consistent with their Christian convictions. The essential relationship for effective education is a bond of trust between home and school, with the support of Christ's church.

Stephenville Christian School is committed to integrating biblical faith and learning, and to offering children a challenging education in a caring Christian atmosphere.

Our Mission

S.C.S. is dedicated to:

- Nurturing a Christian point of view within an environment that is sensitive to the needs of the whole child (spiritual, mental, physical, and social).
- Helping students develop a disciplined Christian mind characterized by reflective Christian thinking and active Christian service.
- Upholding high academic standards so that students are equipped to meet the challenges of a changing world and to compete on equal ground for the schools and/or goals of their choice.

Our Governing Principles

- Jesus Christ is sovereign Lord over everything in creation and culture.
- The Bible has relevant norms and rules for every situation.
- The School is to maintain an all-encompassing Christian perspective.
- Formal education is the organized process of encouraging and training students in the development of Christian moral and social values, and in academic knowledge.
- Teachers are professional educators as well as exemplary Christians who communicate and model Christian life and learning in the classroom and in the community.

Stephenville Christian School is an interfaith organization, and has no denominational affiliations. It is owned and operated by a self-perpetuating School Board, which is drawn from the Parent Association. S.C.S. maintains a membership with Christian Schools International (CSI), the oldest organization of Christian Schools in North America.

SCS Enrollment Checklist 2023-2024

Returning Student

Student Name: _____

Parent Name: _____

Below Items have been received

_____ **Completed Registration Form**

_____ **Non-Refundable \$250.00 Registration Fee**

_____ **Direct Debit Form (ACH Authorization Agreement)**

_____ **Pick-Up List**

_____ **Updated Immunization Records or
Current Notarized Exemption**

Stephenville Christian School

1120 County Road 351
Stephenville, Texas 76401

Phone: 254.965.4821 Fax: 254.965.6853 E-mail: stephenvillechristianschool@gmail.com

Website: www.stephenvillechristianschool.com

2023 - 2024 Registration Form

Student's Full Name _____ Birthdate _____

Student's Age by September 1, 2023 _____ Grade Level for 2023 - 2024 _____ Gender _____

Father's/Guardian's Name _____

Mother's/Guardian's Name _____

Student's Mailing Address _____ City _____ Zip Code _____

Physical Address (if different) _____ City _____ Zip Code _____

Home Phone Number _____ E-Mail Address _____

Student's Social Security # _____

Emergency Contact Information

Father's Employer/Occupation _____

Father's Work Phone# _____ Father's Cell Phone# _____

Mother's Employer/Occupation _____

Mother's Work Phone# _____ Mother's Cell Phone# _____

If parents cannot be reached, who else may the school contact in case of an emergency?

Name _____ Relationship _____

Home Phone# _____ Cell# _____ Work# _____

Name _____ Relationship _____

Home Phone# _____ Cell# _____ Work# _____

Which church do you attend? _____

Please complete the back of this page.

For PreK3 - 4, please circle the following program option that you prefer:

Full day / 5 days per week (Mon.-Fri.)
8:10am – 3:15pm

OR

Full day / 3 days per week (Mon., Wed., & Fri.)
8:10am – 3:15pm

Extended Care

Do you plan to put your child in our After School Extended Care program (3:30-5:30)? Y / N / As Needed

Authorization for Emergency Medical Attention

In the event I cannot be reached to make arrangements for emergency medical care, I authorize the person in charge to take my child to:

Name of Physician _____ Address: _____ Ph# _____

Name of Hospital _____ Address: _____ Ph# _____

List any special problems such as allergies, existing illness, previous serious illness, etc: _____

Please initial to show your agreement with each of the following statements:

_____ I give permission for my child's picture and/or name to be used in publications to promote the school or to inform the public about school activities, etc. These may be released through any form of media presentation.

_____ I give permission for my child's picture (without a name) to be used on the school's website or other educational websites to promote the school.

_____ I give permission for my child to use the internet while at school with teacher supervision. (Does not apply to PreK – 6th grade).

_____ I give permission for my child to participate in school sponsored/supervised off campus field trips/activities.

_____ I have provided (will provide) SCS with a copy of my child's most recent immunization record that shows that he/she has received all of the required vaccinations. I understand that this copy must have a doctor's signature or clinic stamp to be valid.

_____ I understand that the parents/guardians of any students withdrawing during the school year are obligated to pay all of the tuition fees for the remainder of the school year. (Exceptions made only with board approval).

_____ My signature below indicates my agreement and willingness to comply with the SCS vision and policies, and my willingness to support SCS in my actions and prayers. I will faithfully uphold the Christian lifestyle in my home, and be faithful to my church.

Providing false information on any portion of the Registration or New Family Application may result in an immediate dismissal from Stephenville Christian School.

Signature _____ **Date** _____

**ACH Origination Agreement
Credit / Debit Authorization Form
Authorization Agreement for Direct Deposit / Payment**

I (We) hereby authorize Stephenville Christian School ("COMPANY") to initiate entries to my checking/savings accounts at the financial institution listed below (FINANCIAL INSTITUTION), and, if necessary, initiate adjustments for any transactions credited/debited in error. This authority will remain in effect until THE COMPANY is notified by me (us) in writing to cancel it in such time as to afford COMPANY and FINANCIAL INSTITUTION a reasonable opportunity to act on it.

Name of Parents:	
Name on Bank Account:	
Name of Financial Institution:	
Bank Routing Number:	
Bank Account Number:	
Type of Account:	() Checking () Savings
Amount for Tuition Payment:	
Amount for Extended Care Payment:	
Signature:	
Date:	

Tuition and Extended Care payments will be withdrawn from your account on the same date each month. Please provide a date for the payment to be withdrawn. Monthly payments can be on any day starting on the 1st through the 15th. No payments can be after the 15th of the month unless approved by Director or Bookkeeper.

Tuition date: _____

Extended Care date: _____

Tuition payments are for 12 months beginning on August 1st through July 31st.

Extended Care payments are for 9 months beginning on September 1st through May 31st.

All Extended Care balances have to be paid by the end of the school year. If you have overpaid on Extended Care the credit will be applied to your Tuition balance in the month of July and final tuition payment will be reduced unless otherwise discussed with Director or Bookkeeper.

*******Please return this form in a sealed envelope marked "Direct Debit"*******



Pick-Up List for 2023 - 2024

Please list your student(s) names & grade levels:

Student Name(s)	Grade Level
_____	_____
_____	_____
_____	_____
_____	_____

Parent (Primary Guardian) Phone Numbers:

(Please list all home and cell numbers where you can be reached.)

The people listed on the lower portion of this form have my permission to pick up my child/children from Stephenville Christian School during the 2023 – 2024 school year. ***I understand that it is my responsibility to keep this list current by notifying the school in writing about any changes. ** If there is a legal reason an adult is not allowed to pick up, legal documentation must be provided for the student's file.***

Anyone picking up students should be prepared to show a picture identification card.

Parent's Signature _____ Date _____

The following additional people are also authorized to pick up my child/children:

Names of All Other Authorized Adults	Phone Number(s)
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Only one form per family is required.



Stephenville Christian School

2023 - 2024 Tuition and Fee Schedule

Registration Fee: \$250.00 per student

Uniforms: \$15.00 per shirt

Uniform shirts are required for all students Monday – Thursday. A red uniform shirt is required on Monday. Shirts are required to be pre-ordered before the start of the school year and may be picked up during Open House. An order form will be provided to each family after registration fees have been paid.

Base Tuition:

Grade	Hours	Base Tuition	Monthly (Aug. – July)
Pre-K 3 and 4— full day	MWF 8:10am - 3:15pm	\$5,400.00	\$450.00
Pre-K 3 and 4—full day	M-F 8:10am - 3:15pm	\$5,400.00	\$450.00
Elementary: K - 6	M-F 8:10am - 3:15pm	\$5,400.00	\$450.00
Junior High: 7 - 8	M-F 8:10am - 3:15pm	\$5,400.00	\$450.00
High School: 9 - 12	M-F 7:55am - 3:15pm	\$5,400.00	\$450.00

ALL PARENTS are required to pay by Direct Debit (see attached form).

Tuition Payments will be scheduled over 12 months, beginning Aug. 1, 2023 & ending July 31, 2024.

Extended Care:

	Hours	Weekly Fee	
All Grade Levels	Monday - Friday 3:30pm - 5:30pm	\$50.00	Or \$10 /day as needed

Note: Extended Care Fees are in addition to the Base Tuition fees.

\$100.00 Direct Debit will be required for Regular use of Extended Care Mon. - Fri. and will be adjusted accordingly for more/less days.

(A .0375% fee is charged for all credit card / debit payments)



Welcome to SCS Extended Care!

We are excited to have your student as a part of our Extended Care program.

Extended Care is offered from 3:30 – 5:30pm for students whose families are not able to pick up students at the regular 3:15pm dismissal time.

To sign up, you will need to complete a “Reservation Form” so that we can schedule the correct amount of adults for the amount of students staying each day.

Direct draft forms are required for families that will use extended care M-F or MWF on a regular basis. A base amount of \$200.00 (\$10/20 days) will be automatically drafted each month for M-F care and \$120.00 (\$10/12 days) for M/W/F care, and may be adjusted for holiday months with more or less extended care offered.

Parents who choose to use Extended Care on an “As Needed” basis will need to call the school in advance the day their student is to stay in extended care and will be charged \$10.00 per day and must pay charges on a weekly basis. (If extended care is used on Friday, payments may be made to the school office the following Monday).

If there is an emergency or you need to contact the extended care teacher after school hours, you can reach her on the school line at 254-965-4821 from 3:30pm – 5:30pm.

In the case of a question or concern about extended care, please email us at stephenvillechristianschool@gmail.com or call us directly at 254-965-4821 (during school hours).

Extended Care Reservation Form

Student(s) Name(s): _____

For the following week(s) or month(s): _____

M – F 3:30 – 5:30pm ____ **M/W/F 3:30 – 5:30pm** ____ **As Needed** ____

I understand that my signature on this form obligates me to pay for extended care as stated above. Non-payment of billing will result in temporary suspension from extended care until payment is received.

Parent Signature _____

Date _____

Stephenville Christian School



2023-2024 School Calendar

"TEACHING FOR ETERNITY"

School Board Approved on 07/21/23

July 2023						
S	M	T	W	T	F	S
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31					

August 2023						
S	M	T	W	T	F	S
		1	2	3	4	5
6	SD	SD	SD	SD	WD	12
13	SD	WD	(16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

September 2023						
S	M	T	W	T	F	S
					ER	2
3	H	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30

October 2023						
S	M	T	W	T	F	S
1	2	3	4	5	6	7
8	SD	10	11	12	13	14
15	(16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

November 2023						
S	M	T	W	T	F	S
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	ER	18
19	H	H	H	H	H	25
26	27	28	29	30		

December 2023						
S	M	T	W	T	F	S
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	ER	H	H	13
25	H	H	H	H	H	30
31						

January 2024						
S	M	T	W	T	F	S
	H	H	H	SD	WD	6
7	(8	9	10	11	12	13
14	H	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31			

February 2024						
S	M	T	W	T	F	S
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29		

March 2024						
S	M	T	W	T	F	S
					1	2
3	4	5	6	7	ER	9
10	H	H	H	H	H	16
17	(18	19	20	21	22	23
24	25	26	27	ER	H	30
31						

April 2024						
S	M	T	W	T	F	S
	BW	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30				

May 2024						
S	M	T	W	T	F	S
			1	2	3	4
5	6	7	8	9	10	11
12	BW	14	15	16	17	18
19	20	21	22	ER	WD	25
26	27	28	29	30	31	

June 2024						
S	M	T	W	T	F	S
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30						

Calendar Keys	
H	Student/Teacher Holiday
SD	Staff Development Days/ Student Holiday
WD	Work Day/ Student Holiday
BW	Bad Weather Day
ER	Early Release - 12:30 pm
()	Beginning/End of Quarter

Dates At a Glance	
Aug 16	First Day of School
Sep 4	Holiday- Labor Day
Nov 20-24	Holiday- Thanksgiving Break
Dec 21-Jan 5	Holiday- Christmas Break
Jan 15	Holiday- MLK Day
Mar 11-15	Holiday- Spring Break
Mar 29	Holiday- Good Friday
Apr 1	Bad Weather Day
May 13	Bad Weather Day
May 23	Last Day of School/ Graduation

Quarter Dates		
1st Quarter	Aug 16 - Oct 13	
2nd Quarter	Oct 16 - Dec 20	
3rd Quarter	Jan 8 - Mar 10	
4th Quarter	Mar 18 - May 23	
Total Days	Students	Teachers
	171	182

