



## RETURNING STUDENT RE-APPLICATION FORM

### APPLICATION INFORMATION

To complete this application please submit the following to the school office.

#### One per family

- Returning Student Application Form
- Statement of Faith
- Parental Understanding and Commitment
- Financial Commitment Form

#### One per student re-enrolling

- Medical Information Form
- Permission Slips Form

### FAMILY INFORMATION

#### Father

Father's First Name: \_\_\_\_\_

Father's Last Name: \_\_\_\_\_

Lives with student:  Yes  No

Employer: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

#### Mother

Mother's First Name: \_\_\_\_\_

Mother's Last Name: \_\_\_\_\_

Lives with student:  Yes  No

Employer: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

### CONTACT INFORMATION

Home Phone: \_\_\_\_\_

I give permission for my home phone # to be published on a list issued to school families.  Yes  No

### CHURCH AFFILIATION

Church Name: \_\_\_\_\_

Complete Address: \_\_\_\_\_

Pastor's name: \_\_\_\_\_

Phone #: \_\_\_\_\_

Church Attendance:

Attend Regularly  No Church Home

### ADDRESS

#### Home Address

Apartment Number: \_\_\_\_\_

Street address: \_\_\_\_\_

City/ Town: \_\_\_\_\_

Postal Code: \_\_\_\_\_

#### Mailing Address (If different from Home Address)

PO Box Number: \_\_\_\_\_

Other: \_\_\_\_\_

City/ Town: \_\_\_\_\_

Postal Code: \_\_\_\_\_

## STUDENT INFORMATION

### *First Child*

Child's full name: \_\_\_\_\_

Date of Birth (dd/mm/yyyy): \_\_\_\_\_

Grade completed: \_\_\_\_\_

### *Third Child*

Child's full name: \_\_\_\_\_

Date of Birth (dd/mm/yyyy): \_\_\_\_\_

Grade completed: \_\_\_\_\_

### *Second Child*

Child's full name: \_\_\_\_\_

Date of Birth (dd/mm/yyyy): \_\_\_\_\_

Grade completed: \_\_\_\_\_

### *Fourth Child*

Child's full name: \_\_\_\_\_

Date of Birth (dd/mm/yyyy): \_\_\_\_\_

Grade completed: \_\_\_\_\_



## STATEMENT OF FAITH

### PREAMBLE

Oceanview Christian Academy is non-denominational in its teaching approach and in its acceptance of constituents. OCA adheres to and teaches basic tenets of the Christian faith only, not denominational positions.

All faculty, staff and council members must be able to sign the Statement of Faith without reservation. Each parent must be able to sign either that s/he agrees with the Statement of Faith, or that s/he agrees with the school's right to uphold the Statement of Faith.

### STATEMENT OF FAITH

1. We believe that the Scriptures of the Old and New Testament are verbally inspired by God and inerrant in the original writing, and that they are of supreme and final authority in faith and life. (2 Timothy 3:16)
2. We believe in one God, eternally existing in three persons: Father, Son, and Holy Spirit. (Matthew 28:19, John 1:1&2, John 14: 8-26)
3. We believe that Jesus Christ was begotten by the Holy Spirit and born of the Virgin Mary and is true God and true man. (Luke 1:26-28)
4. We believe that man was created in the image of God, that he sinned and thereby incurred not only physical death, but also spiritual death, which is separation from God; and that all human beings are born with a sinful nature, thus being sinners in thought, word, and deed. (Romans 3:23, Ephesians 2:1-3)
5. We believe in the personality of Satan. (John 8:44)
6. We believe that the Lord Jesus Christ died for our sins, according to the scriptures, as a representative and substitutionary sacrifice; and that all who believe in Him are justified on the ground of His shed blood. (Romans 5:8-11)
7. We believe in the resurrection of the crucified body of our Lord, in His bodily ascension into Heaven, and in His present life there for us as High Priest and Advocate. (I Corinthians 15:3&4, 1 John 2:1)
8. We believe in the "Blessed Hope" - the personal and imminent return of our Lord and Saviour Jesus Christ. (I Thessalonians 4:13-17)
9. We believe that only through faith alone in the person and work of Jesus Christ alone and repentance from sin can one be reconciled to God and experience true life and joy (John 3:18, 14:6; Acts 4:12; Romans 3:21-26; 1 Timothy 2:5-6).

*OCA Statement of Faith*

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10. We believe in the present ministry of the Holy Spirit, by who's indwelling the Christian is enabled to live a godly life and bear fruit which will remain. (1 John 3:24)
11. We believe in the bodily resurrection of both the just and the unjust - the just to everlasting bliss in Heaven and the unjust to everlasting punishment in Hell. (Revelation 20:11-15)
12. We believe baptism is intended only for those who have professed faith in Jesus Christ and can give sufficient testimony to the basics of Christian beliefs. We also believe in baptism by immersion because it is the original meaning of the word and best symbolizes the reality to which baptism points: our death and resurrection in Christ (Matthew 28:18-20; Acts 2:38; Romans 6:1-11).
13. We believe that God has established marriage as an exclusive relationship between one man and one woman, and that all intimate sexual activity outside the marriage relationship, whether heterosexual, homosexual, or otherwise, is sin. We believe that God created the human race man and female and that all conduct with the intent to adopt a gender other than one's birth gender is sin (Gen. 2:24-25; Ex. 20:14, 17, 22:19; Lev. 18:22-23, 20:13, 15-16; Matt. 19:4-6, 9; Rom 1:18-31; 1 Cor. 6:9-10, 15-20; 1 Tim. 1:8-11; Jude 7; Gen. 1:27; Deut. 22:5).
14. We believe that Church attendance is not just a "good suggestion"; it is God's will for believers. Church attendance, participation, and fellowship should be regular aspects of a believer's life. Someone who belongs to Christ should have a desire to worship God, receive His Word, and fellowship with other believers regularly. (Hebrews 10:24-25; 1 Corinthians 12:12-27; Acts 2:41-42; Ephesians 2:19-22)

**Each parent please sign one option for the statements below.**

*Option 1*

I have read and agree with the OCA Statement of Faith:

\_\_\_\_\_

Father

\_\_\_\_\_

Date

\_\_\_\_\_

Mother

\_\_\_\_\_

Date

*Option 2*

I have read the OCA Statement of Faith and agree with the school's right to uphold this statement:

\_\_\_\_\_

Father

\_\_\_\_\_

Date

\_\_\_\_\_

Mother

\_\_\_\_\_

Date



## PARENTAL UNDERSTANDING AND COMMITMENT FORM

We understand that a basic responsibility of Christian parents is to “train up a child in the way he should go...that when he is old he will not depart from it.” (Proverbs 22:6) Oceanview Christian Academy is a school seeking to mold your children’s lives after God’s fashion. Successful Christian living hinges on three areas: the home, the church, and the school. These institutions must work cooperatively together. Parents should not give their responsibility to the Christian school and let them train the children alone. Both the home and the school share this responsibility. Therefore, as parents we pledge to do our part and enter into covenant with OCA.

- It is my choice as a parent that my child has an academic education based on the Word of God and its teachings.
- I believe it is in the best interests of the school and the children that parents express a positive attitude toward the goals, aims, and standards of the school. Should a problem or misunderstanding arise, I will immediately seek to resolve it privately with the administration.
- I agree to uphold and support the high academic standard of the school by providing a proper atmosphere for my child to study and to give my child encouragement in the completion of any homework or assignments.
- I appreciate the standards of the school and will not tolerate profanity, obscenity in word or action, dishonour to the Lord or the Word of God, or disrespect toward the personnel of the school.
- I have read the *Oceanview Christian Academy* Student/Parent Handbook and agree with the school's outlook and aims. I fully approve of the STANDARD OF CONDUCT for students and the DRESS CODE and agree to support all regulations of the school made in the applicant’s behalf and authorize this school to employ such discipline as is deemed wise and expedient for the training of my child.
- I commit myself to promptly pay my financial obligations to the school, understanding that REGISTRATION FEE and monthly TUITION are payable in advance.
- I understand that the school reserves the right to dismiss any child who fails to comply with the established regulations and discipline or whose financial obligations are not met.
- I understand that the staff of Oceanview Christian Academy will treat my child with love and respect and are committed to providing the best possible academic instruction.

### Parental Signature(s):

\_\_\_\_\_  
Father

\_\_\_\_\_  
Date

\_\_\_\_\_  
Mother

\_\_\_\_\_  
Date



## FINANCIAL INFORMATION

### TUITION

2020-21 School Year

|                     | First child | Second child | Third child | Fourth child<br>( <i>&amp; each additional child</i> ) |
|---------------------|-------------|--------------|-------------|--|
| Primary to Grade 12 | \$4,200     | \$3,000      | \$2,000     | \$1,500  |

#### Payment Options

I understand my financial obligations and will, upon notification of acceptance (please check one of the following):

- **Lump Sum** - 1 lump sum payment for the total amount.
- **2 equal payments** - in August and January.
- **10 equal monthly** - post-dated cheques starting August thru May dated the 1<sup>st</sup> or 15<sup>th</sup> of the month.
- **20 equal post-dated bi-monthly tuition cheques** - dated the 1<sup>st</sup> & 15<sup>th</sup> of each month (½ payment on the 1<sup>st</sup> and ½ on the 15<sup>th</sup>), August -May.

#### Fee Commitment

|                    |       |
|--------------------|-------|
| 1st Child Tuition  | _____ |
| 2nd Child Tuition. | _____ |
| 3rd Child Tuition  | _____ |
| 4th Child Tuition  | _____ |
| 5th Child Tuition  | _____ |
| Total              | _____ |

#### NOTE:

- 1) If a student enrolls after a school year begins or withdraws before the year ends, tuition will be pro-rated according to the quarter in which the student is enrolled. All other fees must be paid in full.
- 2) If you are receiving a bursary, please just select how you'd like to pay and we will fill in your tuition amount once it has been decided and get your signature then.

#### PARENTAL SIGNATURE(S):

\_\_\_\_\_  
Father

\_\_\_\_\_  
Date

\_\_\_\_\_  
Mother

\_\_\_\_\_  
Date



## MEDICAL INFORMATION

### STUDENT INFORMATION

Child's full name: \_\_\_\_\_

Date of Birth (dd/mm/yyyy) \_\_\_\_\_

Health Card # \_\_\_\_\_

Expiry Date: \_\_\_\_\_

Local Physician: \_\_\_\_\_

Physician's Phone #: \_\_\_\_\_

Does applicant have any mental, emotional, physical limitations, or learning disabilities that may affect his/her activities or progress, or for some reason should be known by his/her teachers?: \_\_\_\_\_

### ALLERGIES

Please specify if your child has any allergies: \_\_\_\_\_

### MEDICATIONS

NOTE: If medication is required on a regular basis, or at a specified time, medication must be brought to the school office, labeled with child's name and dosage requirements, and a medical permission form must be completed.

Specify if your child requires regular medication to be administered at school: \_\_\_\_\_

- By signing this form I understand that Oceanview Christian Academy is not responsible for any injury or harm that may occur as a result of this medication. Oceanview Christian Academy reserves the right to revoke this privilege if it is being abused (constant use of pain medication, etc.).

### PERMISSION TO RECEIVE MEDICATION

\*\*In order to receive pain medication, students must check with their Home Room teacher before coming to the school office for such medication.\*\*

My child will be permitted to be given the following pain medication(s) during school hours if necessary, understanding that this does not mean they are allowed to abuse this privilege. (Please check all allowable ones)

- Tylenol (Acetaminophen)  
 Advil (Ibuprophen)  
 Gravol Kids  
 My child is not permitted to receive any pain medications

### EMERGENCY MEDICAL TREATMENT

I hereby authorize Oceanview Christian Academy to call an emergency ambulance in case of accident or acute illness, and to arrange for necessary emergency medical aid and surgical care in the case that I, or the designated guardian, am not immediately available. Any qualified physician, called by OCA, may treat and do whatever is necessary for the health and well-being of my child.

It is understood that a conscientious effort must be made to notify me before such action will be taken. I also agree to accept responsibility for the cost of above medical services.

#### Parental Signature(s):

\_\_\_\_\_  
Father

\_\_\_\_\_  
Date

\_\_\_\_\_  
Mother

\_\_\_\_\_  
Date



## PERMISSION SLIPS

### STUDENT INFORMATION

Child's full name: \_\_\_\_\_

Date of Birth (dd/mm/yyyy): \_\_\_\_\_

### SCHOOL SPONSORED EVENTS OFF SCHOOL PROPERTY

Yes  No I give permission for my child to take part in all school activities, including school sponsored trips away from the school's premises. I absolve Oceanview Christian Academy and Centreville Baptist Church from liability to me or my child because of any injury to my child at school or during any school activity.

#### Parental Signature(s):

\_\_\_\_\_  
Father

\_\_\_\_\_  
Date

\_\_\_\_\_  
Mother

\_\_\_\_\_  
Date

### PUBLISHING PHOTOS

Yes  No I give permission for my child's photo to be published in print media.

Yes  No I give permission for my child's photo to be published on the school website and/or Facebook page.

Yes  No I give permission for my child to be published in video media.

#### Parental Signature(s):

\_\_\_\_\_  
Father

\_\_\_\_\_  
Date

\_\_\_\_\_  
Mother

\_\_\_\_\_  
Date