



January, 2010

Dear Prospective MPCS Parents,

Thirty-three years ago the vision of Mount Paran Christian School began. God has truly blessed us through these three decades. Each year, He has brought many wonderful new families through the doors of our school. It is an honor to continue this tradition by inviting your family to apply to MPCS. As the registration process for the 2010-2011 school year begins, we are blessed that you are prayerfully considering MPCS as the academic home for your children.

Many exciting things have happened at MPCS this year! We have witnessed the initiation of many new programs including the beginning of the Dozier School of the Performing Arts; the introduction of a strings program for lower and middle school students; the addition of lacrosse to the expanding athletic program; "Friday Night Lights"; a partnership with Georgia GOAL providing increased financial assistance to more families; the expansion of the Eagle Adventure Zone for afterschool care students; additional high school offerings; the introduction of a full-time college counselor; the appointment of a Cultural Diversity Coordinator; additional classroom technology; and the Parent-to-Parent program; just to name a few.

MPCS is worth the investment! It is our mission to provide "academic excellence in a Christ-centered environment" and unite "with home and church to prepare servant-leaders to honor God, love others, and walk in truth." We simply refuse to stray from our mission of being unapologetically Christian and uncompromisingly academic while uniting with our families to teach life-renewing principles. That is our passion; that is what drives us. During this period of economic uncertainty, we are committed to keeping tuition as low as possible while continuing to provide quality programs and the service and excellence you would expect from Mount Paran Christian School. To be good stewards of our resources, we are responding by analyzing our budget and minimizing ancillary costs while ensuring an exceptional academic, spiritual, and co-curricular experience for your child.

The 2010-2011 school year promises to be another exciting one at MPCS! Among other things:

- Additional programmatic and curricular offerings will be available to students including an expansion of Advanced Placement courses in high school;
- Financial assistance opportunities will expand;
- The *Imagine Tomorrow* capital campaign will be accentuated;
- Wrestling will be introduced as a club sport;
- New leadership will be appointed to guide the direction of the performing arts program;
- A directed studies program will be initiated in the high school; and
- A curriculum specialist will be hired to assist in the academic development of the high school program.

It will be a joy of mine to partner with you in the important role of educating your children. It is clearly more than a job for those of us on staff at MPCS – it is a ministry committed to providing the best education possible for the best students anywhere while integrating all we do with the transforming love of Jesus Christ.

I look forward to meeting you. Please do not hesitate to call on us at 770.578.0182, extension 2046, if you have any questions throughout the admission process.

Blessings,

A handwritten signature in cursive script that reads "David W. Tilley".

David W. Tilley, Ed.D.

If you should have any questions, please call the Office of Admission at 770.578.0182, extension 2046.

ADMISSION PROCEDURES

To be considered as a prospective student at MPCS, the applicant should:

1. Submit the completed application documents (a current picture of the applicant should be submitted with the application) and the \$75.00 non-refundable, non-transferable application fee to the Office of Admission.
2. Provide the school with an **original** birth certificate for review; a copy will be placed on file, and the original will be returned.
3. Students entering Ninth-Twelfth grades will submit a copy of the applicant's Social Security Card, once accepted.
4. Provide the school with a current Georgia immunization form #3231. This is required before registration will be final.
5. Kindergarten and First grade students will provide the school with current Hearing and Vision test results, obtained from a pediatrician.
6. Complete, sign, and distribute the teacher recommendation forms. The recommendation forms should be given to one English teacher and one math teacher. Recommendations are not to accompany the application. These should come **directly** from the current/former school.
7. Complete, sign, and distribute the pastoral staff recommendation form. A pastor on staff should complete the form and return it to the Office of Admission. A pastor, youth pastor, or children's pastor are preferred.
8. Complete and sign the bottom portion of the Records Release Form. The applicant will submit it to the applicant's current/former school. *The applicant is to request all former school records, including report cards and standardized testing to be sent to MPCS.* The top portion of the Records Release Form should be returned with the application to the Office of Admission.
9. After a preliminary review of the application, qualified applicants may be contacted by the Office of Admission for a family interview, and/or assessment.
10. In cases of divorce, custody papers are required to complete final registration.

It is the responsibility of the parent(s) of the applicant to make certain that all materials are completed and returned to the Office of Admission.

The submission of a completed application to the Admission Office does not imply that a binding contractual agreement has been made. The submission of an application does not guarantee acceptance, nor does it guarantee that space is available. Students must re-apply each year. The admission committee will re-evaluate candidates each year. The decision of the admission committee will be communicated through written notification.

ADMISSION CRITERIA

1. A composite standardized test score of 65th percentile or above is expected.
2. A minimum 2.5 academic GPA for all students is expected.
3. The Admission Committee will review recommendations from academic teacher(s) from the applicant's current school.
4. The Admission Committee will review student behavioral/conduct records.
5. The Admission Committee will review qualified applicants/parent(s) in an interview and/or assessment.
6. The Admission Committee will review the recommendation from the applicant's pastor, youth pastor, or children's pastor.
7. The applicant and his/her family must express a belief of biblical teachings, and a willingness to follow them, as well as student and parent(s) affirmation of faith. Parents and students must read and agree to support the Statement of Faith, commit to uphold *Christian* principles in their daily lives, and actively participate in a local church body.

ADMISSION DECISIONS

- Mount Paran Christian School may deny acceptance to an applicant with non-disclosure of reasons.
- MPCS reserves the right to deny acceptance or terminate or suspend enrollment of students at the school's discretion.
- If additional information is needed, MPCS may require an educational evaluation to determine placement and/or admission.
- Mount Paran Christian School reserves the right to determine the placement of an applicant into a grade level and/or classes and subjects deemed most appropriate for his/her school experience.
- As a covenant Christian school, MPCS reserves the right to determine whether Mount Paran Christian School is an appropriate placement for the applicant and/or the family.



Records Release

**Parent: Submit the completed top portion with the application to Mount Paran Christian School.
Submit the completed bottom portion to the applicant's current/former school.**

MPCS does not request the records for admission for each applicant. The parent is to submit this form to the current school.

This release gives Mount Paran Christian School permission to request and receive pertinent information regarding the applicant from his/her former school, teacher, doctor, health clinic, hospital, or any additional agency. All information received is considered confidential. This form will be maintained in the applicant's file.

Applicant's Full Name: _____
Last First Middle

Current Grade Level: _____ Birth Date ____/____/____

I authorize Mount Paran Christian School to obtain information from the administration, admission, guidance, teachers and/or doctors or other professionals of the following schools/organizations for the purpose of educational planning. I release all liability and all claims pertaining to the disclosure of this information:

Last school attended: _____ Other School/ Doctor's office/other: for release of educational records: _____

(Name) _____ (Name) _____

(Address) _____ (Address) _____

(Phone) _____ (Phone) _____

(FAX) _____ (FAX) _____

I hereby authorize and request the release of **ALL** medical, educational, disciplinary, social, and/or psychological information regarding this applicant. All information will become the confidential property of Mount Paran Christian School and is not subject to applicant or parental review.

Signature of Parent/ Guardian Date

Should the student be accepted, nondisclosure of information related to previous behavior disorders, educational, emotional, or substance abuse history would be grounds for immediate dismissal from Mount Paran Christian School.

Mount Paran Christian School does not discriminate on the basis of race, color, or national origin in the administration of educational policies, admission policies, or employment practices.

Parent: Deliver this portion of the form to the applicant's current/former school

AUTHORIZATION AND PERMISSION TO RELEASE INFORMATION

Applicant's Full Name: _____
Last First Middle

Current Grade Level: _____ Birth Date ____/____/____

Current/Former School/Organization Name: _____

Address _____

Phone _____

FAX _____

I hereby authorize and request the release of **ALL** medical, educational, disciplinary, social, and/or psychological information regarding the applicant and release the above from all liability and all claims pertaining to the disclosure of this information:

Signature of Parent/ Guardian Date

Registrar: Send transcripts and standardized testing for the current and past three years and ALL disciplinary records to:



Please include a recent photo of applicant

Applicant's Name _____
Last First Middle (required) Name Called Suffix (Jr., I, II)

Gender: Male Female Current Grade: _____ Social Security #: _____
(Grades 9-12; a copy of SS card is required for grades 9-12)

Student's Primary Residence _____
Street Address _____
Home Phone _____
City State Zip County

For state reporting purposes, what public school is the applicant eligible to attend: (required):

School Name: _____ District (Cobb, Paulding, Marietta): _____

Date of Birth: ____/____/____ Age as of 8/01/10: _____

Circle if applicable: Parents Married/Parents Separated/Parents Divorced/ Father Deceased/Mother Deceased

If divorced, who has primary custody? _____ A copy of custody papers must be on file.

Circle title for salutation: Mr. and Mrs. Mr. Mrs. Ms. Dr. and Mrs. Rev. and Mrs. Other _____

Student resides with (Check all): Father Mother Stepfather Stepmother Guardian Grandparents

| Primary Residence | FATHER (___ Stepfather) | MOTHER (___ Stepmother) |
|---------------------------------|-------------------------|-------------------------|
| First and Last Name (called by) | | |
| Business Firm Name | | |
| Title/Position | | |
| Cell Number | | |
| Business Number | | |
| E-mail Address | | |

Email addresses are required for parent contact information. The school, PTF and room moms will contact you through email to communicate grade level and event information, including the Weekly Word newsletter. If you do not wish to have your email address included to receive reminders, the Weekly Word, and notices electronically, circle no here: NO

Please list chronologically all other children under the age of 18 living with the family:

| Name | Age/Grade in 2010-11 | School Currently Attending |
|------|----------------------|----------------------------|
| | | |
| | | |
| | | |

Circle all which apply: The applicant is a sibling of a former student or alumni/child of alumni, year of graduation? _____

Has the applicant previously applied or attended MPCS? yes no If yes, what year? _____

Please provide the following information on the parent not living with the child:

Salutation: Mr. and Mrs. Mr. Mrs. Ms. Dr. and Mrs. Other _____
Full Name: _____ Spouse's Name: _____
Home Address: _____ City, State, Zip: _____
Home Phone: _____ Cell Phone: _____ Work Phone: _____
Occupation/Firm Name: _____ Email Address: _____

Please send: No Mailings All Mailings and email communication

How did you learn about Mount Paran Christian School? _____

Tuition Referral Credit Program: If a current MPCS family referred MPCS to you, write their name below for them to receive a \$100 tuition credit.

SUPPLEMENTAL INFORMATION

Has the applicant:

Ever repeated a grade? yes no If yes, what grade? _____

Reason for repeating _____

Ever been diagnosed with learning, social, physical, or emotional disabilities (gifted education, special learning programs, speech, ADD or ADHD or occupational therapy, etc.)? (Response will be held confidential among school personnel)

yes no If yes, please describe: _____

Ever been referred for or received professional, educational, psychological, or personal counseling or testing? yes no
If yes, the school must be furnished with a copy of the test results at the time the application is submitted.

Ever attended a school or program, and or received services designed for students who have academic, behavioral, or other specific needs (advanced/gifted education, special learning programs, speech, ADD or ADHD or occupational therapy, etc.)?

yes no If yes, please describe: _____

Ever been suspended, expelled, or withdrawn from any school for any reason? yes no

Ever had **any** conduct or discipline problems? yes no

Ever had **any** involvement with drugs or alcohol? yes no

Ever been brought before the Juvenile Court or law enforcement agency? yes no

If yes, to any of the above, an explanation must be provided on a separate page.

Does your child have any ongoing health problems? yes no

If yes, please identify: _____

Does the applicant require any daily medication(s)? yes no Name of medication(s): _____

Identify the academic and/or athletic co-curricular activities in which the applicant has interest in participating: (LS – lower school only; MS – middle school only; HS – high school only; All sports are provided for middle school and high school students.)

- | | | | | |
|--------------------------------------|--|--|--|-------------------------------------|
| <input type="checkbox"/> Band | <input type="checkbox"/> Chess (LS) | <input type="checkbox"/> Robotics (HS) | <input type="checkbox"/> Baseball | <input type="checkbox"/> Soccer |
| <input type="checkbox"/> Orchestra | <input type="checkbox"/> Odyssey of the Mind (LS) | <input type="checkbox"/> Newspaper (HS) | <input type="checkbox"/> Basketball | <input type="checkbox"/> Softball |
| <input type="checkbox"/> Color Guard | <input type="checkbox"/> Technical Theater (MS/HS) | <input type="checkbox"/> Model UN (HS) | <input type="checkbox"/> Cheerleading | <input type="checkbox"/> Swimming |
| <input type="checkbox"/> Drama | <input type="checkbox"/> Yearbook (MS/HS) | <input type="checkbox"/> Mock Trial (HS) | <input type="checkbox"/> Cross Country | <input type="checkbox"/> Tennis |
| <input type="checkbox"/> Chorus | <input type="checkbox"/> Quiz Bowl (MS/HS) | <input type="checkbox"/> Study Abroad (HS) | <input type="checkbox"/> Football | <input type="checkbox"/> Volleyball |
| <input type="checkbox"/> Dance | <input type="checkbox"/> International Missions (HS) | <input type="checkbox"/> Lacrosse | <input type="checkbox"/> Golf | <input type="checkbox"/> Wrestling |

MISSION STATEMENT

Providing academic excellence in a Christ-centered environment, Mount Paran Christian School unites with home and church to prepare servant-leaders to honor God, love others, and walk in truth.

MOUNT PARAN CHRISTIAN SCHOOL'S STATEMENT OF FAITH

WE BELIEVE THAT:

- The Holy Bible is the inspired, infallible, and authoritative source of Christian doctrine and precept.
- There is one God eternally existent in three persons: Father, Son, and Holy Spirit.
- Man was created in the image of God, but as a result of sin is lost and powerless to save himself.
- The only hope for man is to believe in Jesus Christ, the virgin born Son of God, who died to take upon Himself the punishment for the sin of mankind, and who rose from the dead so that by receiving Him as Savior and Lord, man is redeemed by His blood.
- Jesus Christ in person will return to earth in power and glory.
- The Holy Spirit indwells those who have received Christ for the purpose of enabling them to live righteous and Godly lives.
- The church is the Body of Christ and is comprised of all those who through belief in Christ have been spiritually regenerated by the indwelling Holy Spirit. It is the responsibility of the church to nurture Christians and to spread the Word of Jesus Christ worldwide.

Briefly describe your personal relationship with Jesus Christ (in your own handwriting):

Father _____

Mother _____

Applicant (Grade 1 and Grade 12) _____

Why do you want your child to attend Mount Paran Christian School? _____

Please list your family's church: _____ Denomination: _____

How often does your family attend church?

- At least two times a week Three to four Sundays a month Once a month Less than once a month

Are you members of the church that you attend?: _____ If not, where is your membership? _____

In what church-related activities, classes, or clubs does your family participate? _____

PHOTO WAIVER

Please read carefully: The Communications department, yearbook and newspaper staff will photograph or video events throughout the year. It is possible these will be used in promotional materials for the school. If you **do not** wish to grant permission for your child’s photograph to be released for possible publication, a letter must be submitted for the file.

COVENANT STATEMENT

As a covenant commitment with Mount Paran Christian School, we hereby apply for our son/daughter for the 2010-2011 school year with the following agreements:

- I. We as parent(s) or guardian(s), do affirm that biblical training in our home will provide a secure haven of safety and loving care, as indicated in the Word accepting God’s responsibility as stated in Proverbs 22:6, “Train up a child in the way he should go and when he is old he will not depart from it.”
- II. We have carefully examined and agree with the Statement of Faith of Mount Paran Christian School and desire Mount Paran Christian School to work as agents of our household.
- III. In full cooperation with Mount Paran Christian School, we pledge to support the Parent Teacher Fellowship organization and other school programs and events, through giving of our time, talent, and/or resources.
- IV. We pledge our loyalty to the aims and ideals of the Mount Paran Christian School and will bring any criticisms directly to the teacher and/or administration so that they may be handled in a biblically appropriate manner (Matthew 18). We will avoid discussions with those not involved so as to avoid a spirit of dissension or division at the expense of our child or the school.
- V. We pledge that if for any reason our child does not meet the academic requirements or cooperate with the disciplinary standards of Mount Paran Christian School, we will withdraw him/her without delay and cooperate with the administration in completing the withdrawal process.
- VI. We understand that students are admitted for one year at a time and that Mount Paran Christian School reserves the right to dismiss, suspend, or otherwise discipline any student who does not adhere to the standards in the Student Handbook. We understand that the payment of the tuition deposit does not acknowledge the acceptance of the applicant, but that an official acceptance letter must be received each year. We understand that a student may also be dismissed due to parental noncompliance of school policy or if an administrative decision is made that Mount Paran Christian School is not the most appropriate setting for the student/family. In addition, the student must successfully complete the current academic year.
- VII. We understand that Mount Paran Christian School is a non-profit ministry operating on the principle of faith. Tuition is kept as low as possible to make Christian education available to those who desire it for their children and tuition and fees do not cover all operating costs; additional funds and needs must be met through gifts and personal services of the parents. We, as the parents, commit to give as regularly as God provides to meet the financial needs, to perform services when needed, and to uphold the school consistently in family prayer.
- VIII. We pledge to support an environment at home and school which fosters socially responsible behavior and speech. We also agree to train our children to be respectful toward others who are different than they physically, racially, ethnically, and socio-economically.

PLEDGES

I have read and understand the material as presented to me, such as the mission statement, statement of faith, and the covenant statement of the school. I pledge my cooperation with Mount Paran Christian School in the nurturing and discipline of my child in scriptural principles and Christian teaching in the classroom. I further support the school personnel as an extension of the home as they train and discipline my child. I also understand that withholding information is grounds for dismissal; therefore I will provide the school with all requested information. I also accept all responsibility for financial obligations in accordance with the MPCS financial contract.

| | | | |
|----------------------------|-------------|----------------------------|-------------|
| Signature of Father | Date | Signature of Mother | Date |
|----------------------------|-------------|----------------------------|-------------|

If accepted to attend Mount Paran Christian School, I agree to abide by the rules and regulations at MPCS and will strive to live a Godly life in all areas. I will treat peers and those in authority with respect.

| | | |
|-----------------------------|---|-------------|
| Signature of Student | <i>(Required for students entering grades 2-12)</i> | Date |
|-----------------------------|---|-------------|

NOTICE OF NON-DISCRIMINATORY POLICY

Mount Paran Christian School does not discriminate on the basis of race, color, or national origin in administration of its educational policies, admission policies, or employment practices.

Teacher Recommendation
Kindergarten
2010-2011



Instructions to Parents: Please complete items (1)-(7); then give this form to one teacher who has taught the applicant during the current school year.

(1) Student's Name _____ is applying for Kindergarten in the 2010-2011 school year.
First Last

I understand that this recommendation form is confidential, and I hereby waive any rights I may have to review or discuss this recommendation.

(2) Signature of Parent _____ (3) Date _____

(4) Name of Current School _____ (5) Current Grade _____

(6) School Address _____

(7) Name of Teacher to complete form: _____

Instructions to the Teacher: The student listed above is applying for admission to Mount Paran Christian School. Please complete both sides of this form and return it **directly** to the Mount Paran Christian School Office of Admission. Your candid evaluation is an invaluable resource to our admission committee. Your comments will be held in strict confidence. Thank you for your time and input. If you have any questions, please call the Office of Admission at 770.578.0182, extension 2046 or email Shaunda Brooks at sbrooks@mtparanschool.com.

Teacher's name _____ Email (in case of a question): _____

In what capacity and for how long have you known this applicant? _____

Please indicate your rating by marking an X in the appropriate column.

****If improvement is needed please add comments on a separate page, as necessary.***

| | Excellent | Above Average | Average | Below Average | Improvement Needed* |
|------------------------------------|-----------|---------------|---------|---------------|---------------------|
| Written expression age appropriate | | | | | |
| Math skills | | | | | |
| Vocabulary age appropriate | | | | | |
| Reading achievement | | | | | |
| Participation in class | | | | | |
| Fine motor coordination | | | | | |
| Gross motor development | | | | | |
| Ability to follow instructions | | | | | |
| Works well independently | | | | | |
| Exhibits self control | | | | | |
| Maturity level age appropriate | | | | | |
| Emotional stability | | | | | |
| Peer compatibility | | | | | |
| Conduct | | | | | |
| Intellectual curiosity | | | | | |
| Shows respect for authority | | | | | |

Please comment on degree and type of parental involvement you have observed.

Do you section or group students according to ability? Is the applicant at an advanced, average, or remedial level?

How many students are in this child's current class? _____ What are your comments regarding the ability for this applicant to achieve academic and behavioral success in a traditional classroom setting with approximately 20 students in the class?

Has this applicant ever participated in a program for special needs (i.e. programs for learning disabilities, behavior disorders, developmental delays, speech/language, or gifted, etc.)? Please also identify if they have been or should be referred to such a program/service.

Would this student be allowed to return to your school? _____ If no, please explain.

Would you consider this applicant to have any discipline concerns or recurring behavior issues? ___ Yes ___ No
If yes, please explain.

Describe the classroom environment in which you think this child performs at his/her best. Please list any strengths or weaknesses.

Is there anything else we would need to know regarding this child's instructional environment or placement?

| | YES | NO |
|---|-----|----|
| Does the child identify the basic colors by name? | | |
| Does the child identify the basic shapes by name? | | |
| Does the child draw the basic shapes on his/her own? | | |
| Can the child recite the alphabet? | | |
| Can the child identify the alphabet letters out of sequence? | | |
| Can the child identify numbers 0-10 out of sequence? | | |
| Is the child able to write their name? | | |
| Does the child willingly share with others? | | |
| Can the child sit in "circle time" and listen attentively? | | |
| Is the child a leader? | | |
| Is the child a follower? | | |
| Does the child frequently interrupt other children's activities? | | |
| Is the child easily distracted? | | |
| Has this child ever displayed aggressive behavior? | | |
| Does this child exhibit separation anxiety? | | |
| Does this child demand more than his/her fair share of attention? | | |
| The child can count to _____ independently. | | |
| How many students are in the child's current class? | | |

Mail to: Mount Paran Christian School
Director of Admission
1275 Stanley Road
Kennesaw, GA 30152

Or Fax: (770)977.9284

Phone: (770)578.0182, ext. 2046

Email: sbrooks@mtparanschool.com

Pastor Recommendation
Preschool-Fifth Grade
2010-2011



Instructions to Parents: Please complete items (1)-(7); then give this form to either the senior pastor, youth pastor, or children's pastor on staff at the church you regularly attend.

(1) Student's Name _____ Name Called _____
First Last

(2) Applying to grade _____ for the 2010-2011 school year.

I understand that this recommendation form is confidential. I hereby waive any rights I may have to review or discuss this recommendation.

(3) Signature of Parent _____ (4) Date _____

(5) Name of Church _____ (6) Phone Number _____

(7) Church Address _____

Instructions to the Pastor: The student listed above is applying for admission to Mount Paran Christian School. Due to the student's age, this form is a validation of the family's commitment and participation in your church. Please complete this form and return it directly to the Mount Paran Christian School Office of Admission. Your candid evaluation is an invaluable resource to our admission committee. Your comments will be held in strict confidence. Thank you for your time and input. If you have any questions, please call **Shaunda Brooks** in the Office of Admission at 770.578.0182, extension 2046 or email sbrooks@mtparanschool.com.

Pastor's Name _____ Title _____

Phone number _____ Email (in case of question) _____

In what capacity and for how long have you known this family?

Family attends: __At least two times a week __Three to Four Sundays a month __ Once a month __ Less than once a month

If you are aware of specific ministries or activities this family participates in, please list or comment:

Based on your observation of the parent(s), please indicate your rating by marking X in the appropriate column:

| | Excellent | Above Average | Average | Below Average | Concerns | Unknown |
|---------------------------|-----------|---------------|---------|---------------|----------|---------|
| Church involvement | | | | | | |
| Spiritual understanding | | | | | | |
| Leadership /Participation | | | | | | |
| Dependability | | | | | | |

Based on your observation of the applicant, please indicate your rating by marking X in the appropriate column:

| | Excellent | Above Average | Average | Below Average | Concerns | Unknown |
|--------------------|-----------|---------------|---------|---------------|----------|---------|
| Peer compatibility | | | | | | |
| Integrity | | | | | | |
| Conduct | | | | | | |

Please use the back of this page or attach a separate page to add any additional comments.

Mail to: Director of Admission ♦ Mount Paran Christian School ♦ 1275 Stanley Road ♦ Kennesaw ♦ GA ♦ 30152 ♦ Or Fax: 770.977.9284