



Cap-Haitien Christian School

Morne Rouge, Haiti
Unit 1162 CAPCM
3170 Airman's Drive
Fort Pierce, FL 34946

Enrollment Application

Today's Date _____ **Grade Applying For** _____ **School Year**
2023-24

How did you hear about CHCS? _____

Student Information

Child's Name (Last) _____ **(First)** _____ **(Middle)** _____

Child's Age _____ **Birthdate (m/d/y):** _____ **Male** **Female**
Have you previously applied to this school? _____ If yes, what year?

Parent Information

Mother's Name: _____ **Father's Name:** _____

Mother's Phone: _____ **Father's Phone:** _____

Mother's Email: _____ **Father's Email:** _____

Mother's Religion: _____ **Father's Religion:** _____

Mother's Employment Info	Father's Employment Info
Company Name: _____	Company Name: _____
Job Title: _____	Job Title: _____
Work Address: _____	Work Address: _____
Work Phone: _____	Work Phone: _____

With whom does the child live? Both parents Mom Dad
 Legal Guardian*: _____

*If the student is living with a guardian, proof of legal guardianship is required.

Child's Street Address: _____

Marital Status of Parents: **Married** **Divorced** **Single**
If divorced, who has legal custody? _____
May the non-custodial parent pick-up the child? Yes No



Other Children in Family

Name: _____ Age: _____

Name: _____ Age: _____

Name: _____ Age: _____

Language

Child's First Language: English French Creole Other: _____

If other than English, how well does your child understand English?

None Understands Speaks Fluent/Multi-Lingual

Languages Spoken at Home:

English French Creole Other: _____

Mother's 1st Language: _____ **Father's 1st Language:** _____

If other than English, how well do you understand/speak/read English?

None Understand Understand/Speak/Read Fluent/Multi-Lingual

If you do not speak English, who is the English speaking adult in the home?*

Name: _____ Phone: _____

*A time must be made to meet with this person before acceptance.

Personal Information

How does your child learn best? Seeing Hearing Doing Not Sure

Has your child ever received counseling? Yes No

Has your child ever been tested or treated for behavioral problems? Yes No

Has your child ever been tested or treated for learning problems? Yes No

Has your child ever had an IEP or specialized learning plan? Yes No

If you answered yes to any of the above, please explain: _____

Why do you want your child to attend Cap-Haitien Christian School?

What church do you attend? _____

For Office Use Only:

___ Accepted ___ NOT Accepted Grade _____ Paid _____ Date _____



Medical Information

Does your child have any special medical needs? Yes No
If yes, please explain: _____

Is your child allergic to anything? Yes No
If yes, please list here: _____

Does your child require medication during school? Yes No
If yes, please list and explain: _____

Do you give your child permission to be given medication at school or for ailments such as headaches, stomachaches, etc.? Yes No

Release of Liability

I give permission for my child to participate in all aspects of school (physical and sedentary) activities. I release and hold harmless the staff of Cap-Haitien Christian School from any liability for any injury or death arising from participation in any school activities.

I also acknowledge that because of my child's presence at school my child may be photographed or videoed for marketing at the school and that my child could appear on the school website, Instagram, Facebook, or other promotional materials about the school.

Mother's Signature: _____ **Date:** _____

Father's Signature: _____ **Date:** _____

Legal Guardian's Signature: _____ **Date:** _____

Acknowledgement of Parental Involvement

Cap-Haitien Christian School believes strongly in parents and teachers working together as partners to educate our students. Every school year there will be opportunities for parents to participate in conferences and school activities. It is mandatory for reenrollment that parents participate in these events. Signing below indicates that you understand the school policy that requires your participation in these activities to receive report cards and to reenroll your child next year.

Mother's Signature: _____ **Date:** _____

Father's Signature: _____ **Date:** _____

Legal Guardian Signature: _____ **Date:** _____



Cap-Haitien Christian School

Statement of Faith

- ❖ There is one God eternally existing in three persons: the Father, Son, and Holy Spirit. (Mark 12:29; 1 John 5:7)
- ❖ The Holy Scripture is inspired of God and is our only infallible rule of faith and practice. (2 Timothy 3:16; Hebrews 4:12)
- ❖ Jesus Christ, the divine Son of God, was born of a virgin, died on the cross and was bodily raised from the dead for our justification. He ascended to the right hand of the Father and He will return visibly and bodily with power and great glory. (Matthew 1:23; Acts 2:22-24, Romans 5:6-9; Hebrews 1:3; Matthew 24:30)
- ❖ Human beings were directly created, not evolved, in the very image of God, beginning with Adam and Eve. (Genesis 1:26, 27; 2:21-23)
- ❖ Man is, by nature, a sinner separated from God and can become God's child only by faith in Jesus Christ and submission to the will of God as revealed in the Gospel. (Romans 3:10-19, 34)
- ❖ Those who are born into God's family have eternal life, and those who are not remain in spiritual death and will be separated from God forever in hell. (John 3:6, 15-19, 36)
- ❖ The Holy Spirit lives in the believer, enabling him to walk in purity of life and submission to the will of God. (Romans 8:1-10)
- ❖ All believers, regardless of sex, race or color, are united in the body of Christ. (Galatians 3:26-28; 1 Corinthians 12:12-27)

By signing this document, you are agreeing that your children will be encouraged to participate in all spiritual learning including Bible classes, weekly chapel services, holiday celebrations and spiritual retreats as planned.

Mother Signature's: _____ **Date:** _____

Father Signature's: _____ **Date:** _____

Legal Guardian Signature: _____ **Date:** _____