

# COVENANT CHRISTIAN SCHOOL REGISTRATION FORM

Student's Name \_\_\_\_\_  
Last First Middle

Best Contact Phone \_\_\_\_\_ Student lives with:  Both  Mom  Dad

Address \_\_\_\_\_  
Street City, State, Zip

Student's Date of Birth \_\_\_\_\_  Boy  Girl

Grade at Entrance \_\_\_\_\_ School Year \_\_\_\_\_

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Father's Name \_\_\_\_\_ Home Phone \_\_\_\_\_

Address \_\_\_\_\_  
Street City, State, Zip

Father's Employment \_\_\_\_\_ Work Phone \_\_\_\_\_

E-Mail \_\_\_\_\_ Cell phone \_\_\_\_\_

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Mother's Name \_\_\_\_\_ Home Phone \_\_\_\_\_

Address \_\_\_\_\_  
Street City, State, Zip

Mother's Employment \_\_\_\_\_ Work Phone \_\_\_\_\_

E-Mail \_\_\_\_\_ Cell phone \_\_\_\_\_

Family's Church Affiliation \_\_\_\_\_  
Pastor \_\_\_\_\_

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I  do  do not give permission for our family's name, address, and phone number to appear in the school directory that is only available to our CCS families and staff members.

I  do  do not wish to receive school communications through my email address and/or cell phone.  
Please use:  mom's e-mail address/device  dad's e-mail address/device  both parents

As part of your student's registration, parents are automatically signed up for our Parent Alert system. This will enable you to receive short, school-related text or voice messages, including any emergency notifications, through your cell phone. Data rates may apply based on your cell phone plan. If you do not wish to be on the Parent Alert list, please call the school office.

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## NEW STUDENTS ONLY:

I hereby give permission for the records of my student to be released to Covenant Christian School  
(checkmark for authorization) Parent's Name \_\_\_\_\_ Date \_\_\_\_\_

Student's Previous School \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Who influenced you to come to Covenant Christian School? \_\_\_\_\_

# CONSENT FOR TREATMENT OF MINOR DEPENDENT

Student Name \_\_\_\_\_ Date \_\_\_\_\_

\*\* One form per student is required to be updated annually.\*\*

Does your child have any unusual physical condition or health problem? Allergies to food or medications? Restriction of activities for medical reasons? If yes, please note here. If there is an allergy, complete the additional *Allergic Reaction Form*.

Reactions to bee stings or other insect bites? If yes, please explain and complete the additional *Allergic Reaction Form*.

Does your child have any condition that requires regular medication? If yes, please explain.

If prescription medication will need to be given during school hours, please see the office to complete the *Individual Student Medication Form*.

**\*\*ALABAMA IMMUNIZATION RECORDS MUST BE ON FILE IN THE  
OFFICE TO COMPLY WITH ALABAMA STATE LAW.\*\***

Over-the-counter medications (OTC) are drugs that do not require a prescription to be purchased or ingested.

Please checkmark the appropriate statement:

I approve ALL medications listed below.

I approve only medications checkmarked below.

I do NOT approve any of the medications listed below.

Based on the symptoms my child describes, CCS office personnel has permission to administer OTC medication on an occasional basis. I understand and agree to not be notified every time an OTC is administered. Office personnel will record any medications given in our online student database program. A report can be run for you upon request.

(checkmark for authorization)

Parent's Name \_\_\_\_\_ Date \_\_\_\_\_

## TOPICAL:

Triple Antibiotic Ointment (Neosporin or similar)  
Hydrocortisone Cream  
Kids' After Bite Cream  
Benadryl Ointment  
100% Petroleum Jelly (Vaseline)  
Bactine No Sting Cleansing Spray  
Re-wetting Eye Drops  
Sunscreen

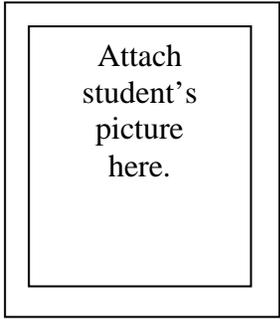
## ORAL:

Children's Allergy Relief (Benadryl) Rapid Melt  
Children's Pain & Fever (Tylenol) Chewable Tablet  
Junior Ibuprofen (Advil 100 mg) Chewable Tablet  
Children's Pepto-Bismol  
Tums / Antacid Chewable Tablet  
Ibuprofen (Advil 200 mg) Pill  
Allergy Relief (Benadryl 25 mg) Pill  
Spearmint & Peppermint Hard Candies  
Halls Cough Drops

## NOTE:

The school does not supply medication for frequent or daily usage. All medication (including cough drops) must be stored in the school office's medical cabinet with the proper forms. Office personnel will notify you if we feel that your student is requesting medication more frequently than necessary.

# FOOD ALLERGY ACTION PLAN



Student's Name: \_\_\_\_\_

Date of Birth \_\_\_\_\_ Date: \_\_\_\_\_ Grade: \_\_\_\_\_

**ALLERGIC TO:** \_\_\_\_\_

Level of Concern:      **SEVERE**                      **MODERATE**                      **MINOR**

Asthmatic:       Yes (high risk for a severe reaction)                       No

**Signs of an Allergic Reaction:**

| <u>System</u> | <u>Symptoms</u>   |
|---------------|---|
| <b>MOUTH</b>  | itching & swelling of the lips, tongue, or mouth                              |
| <b>THROAT</b> | itching and/or a sense of tightness in the throat, hoarseness & hacking cough |
| <b>SKIN</b>   | hives, itchy rash, and/or swelling about the face or extremities              |
| <b>GUT</b>    | nausea, abdominal cramps, vomiting, and/or diarrhea                           |
| <b>LUNGS</b>  | shortness of breath, repetitive coughing, and/or wheezing                     |
| <b>HEART</b>  | "thready" pulse, passing-out  |

The severity of symptoms can quickly change. All above symptoms can potentially quickly progress to a life-threatening situation. In that case, refer to the *Action for Severe Reaction* immediately.

**ACTION FOR MINOR REACTION**

**Step 1:** If only symptom(s) are: \_\_\_\_\_

then administer \_\_\_\_\_ (list medication(s) & dosage)

**Step 2:** Then call:

1. Mother \_\_\_\_\_ Father \_\_\_\_\_ or emergency contacts.

2. Doctor \_\_\_\_\_ at \_\_\_\_\_

If condition does not improve within 10 minutes, **follow steps 1 & 2 below.**

**ACTION FOR SEVERE REACTION**

**Step 1:** If ingestion is suspected and/or symptom(s) are: \_\_\_\_\_

then administer \_\_\_\_\_ **IMMEDIATELY!** (list medication(s) & dosage)

**Step 2:** Then call:

1. 911 - Rescue Squad (ask for advanced life support)

2. Mother \_\_\_\_\_ Father \_\_\_\_\_ or emergency contacts.

3. Doctor \_\_\_\_\_ at \_\_\_\_\_.

I verify that the above given information is correct for the named student / patient. I authorize Covenant Christian School to perform the above listed instructions and/or to administer the above listed medications in the case of an allergic reaction.

(checkmark for authorization)      Parent's Name \_\_\_\_\_      Date \_\_\_\_\_  
 Doctor's signature \_\_\_\_\_      Date \_\_\_\_\_

# PARENTAL COOPERATION AND RESPONSIBILITY STATEMENT

Family Name \_\_\_\_\_

1. We will read through all of the information given to us, which includes the **CCS Student Handbook**. When the Student Handbook is distributed each August, I agree to read & comply with the contents of the handbook and discuss the contents with my son/daughter. Failure to read the handbook does not relieve students, parents or guardians from the responsibility to know and comply with the contents of the handbook.
2. We agree with the doctrinal statement of Covenant Christian School:  
*We believe in God, the Father almighty, creator of heaven and earth. We believe in Jesus Christ, God's only Son, our Lord, who was conceived by the Holy Spirit, born of the Virgin Mary, suffered under Pontius Pilate, was crucified, died, and was buried; He descended to the dead. On the third day He rose again; He ascended into heaven, He is seated at the right hand of the Father, and He will come to judge the living and the dead. We believe in the Holy Spirit, the body of Christ the Church, the communion of saints, the forgiveness of sins, the resurrection of the body, and the life everlasting. Amen.*
3. Recognizing that order is necessary for a school to achieve its objectives, we agree to maintain support in word and action the rules, regulations, and requirements of Covenant Christian School as they relate to our children.
4. We give school administration full discretion in the discipline of our children (including suspension or expulsion).
5. Realizing the poison that gossip can create in a group, we agree to bring all questions and criticisms directly to school officials, so that they may be properly considered. Any concerns that we have concerning my student, another student, a teacher, a staff member, or another parent will be made through appropriate channels by speaking to the classroom teacher or school administration so that any situation can be dealt with fairly, appropriately, and effectively. We understand that social media tools, such as Facebook, are not fair, not appropriate, and not effective in the resolution of problems.
6. We understand that the teachers are available for parent conferences, but that school policy requires that we schedule these in advance. We will not contact teachers or staff members at home after school hours using their cell phone or by other means.
7. We agree to support the high academic standard of the school by providing a place at home for our children to study and by giving our children encouragement in the completion of assignments.
8. We uphold the school's standards and will not tolerate cheating, profanity, obscenity, dishonor, or disrespect in any form. We, as the parents, recognize that we are responsible for our children's behavior at school as well as at home.
9. We agree that the continued enrollment of our child at CCS is dependent on our parental support of the school, its staff, and its policies.
10. We agree that regular school attendance is an integral part of education. We agree to uphold and encourage adherence to CCS and the state of Alabama's attendance policies.
11. We understand that the school administration must approve any clubs, activities and organizations that are made available to CCS students.
12. We give permission for our children to take part in ***all school activities including sports and school-sponsored trips away from the school premises***. We absolve the school from liability to us or our children due to injuries incurred at school or during school activities. If instances occur so that a student needs medical attention, the school will take appropriate action, including contacting the parent and/or family doctor on file.

We have read and understand the terms stated above and we agree to them.

(checkmark for authorization) Mother's Name \_\_\_\_\_ Date \_\_\_\_\_  
(checkmark for authorization) Father's Name \_\_\_\_\_ Date \_\_\_\_\_

Comments:

# AUTHORIZED STUDENT PICK-UP & EMERGENCY CONTACTS

Family Name \_\_\_\_\_ Date \_\_\_\_\_

\*\*If you need to make changes to this form, please contact the school office as soon as possible.\*\*

## AUTHORIZED STUDENT PICK-UP OTHER THAN PARENTS

Name \_\_\_\_\_ Relation to Child \_\_\_\_\_ Phone \_\_\_\_\_  
Name \_\_\_\_\_ Relation to Child \_\_\_\_\_ Phone \_\_\_\_\_

No one will be permitted to pick up your student if their name is not listed above. All persons must be willing to show their I.D. if asked. I give permission to the above named adults to pick up my student(s) from Covenant Christian School.  
(checkmark for authorization) Parent's Name \_\_\_\_\_ Date \_\_\_\_\_

## EMERGENCY CONTACTS OTHER THAN PARENTS

Name \_\_\_\_\_ Relation to Child \_\_\_\_\_ Phone \_\_\_\_\_  
Name \_\_\_\_\_ Relation to Child \_\_\_\_\_ Phone \_\_\_\_\_  
Name \_\_\_\_\_ Relation to Child \_\_\_\_\_ Phone \_\_\_\_\_

Doctor's Name \_\_\_\_\_ Office \_\_\_\_\_ Phone \_\_\_\_\_  
Dentist's Name \_\_\_\_\_ Office \_\_\_\_\_ Phone \_\_\_\_\_

Hospital of Choice \_\_\_\_\_

Based on the nature of the emergency, the hospital best equipped to deal with the emergency may be chosen rather than the hospital indicated on this form.

Insurance Company \_\_\_\_\_ Policy Number \_\_\_\_\_

Reasonable efforts will be made to contact parents in the event of an emergency. However, in case of an emergency I authorize Covenant Christian School to seek medical treatment deemed necessary by school administration if I cannot be reached.

(checkmark for authorization) Parent's Name \_\_\_\_\_ Date \_\_\_\_\_

Covenant Christian School carries secondary (or excess) student accident coverage on each student. **Each family is responsible for primary coverage.** I agree to apply first for benefits from the hospitalization and medical coverage held by my family, if any, before applying for benefits that may be available from Covenant Christian School's student accident, medical and hospitalization secondary coverage. These secondary benefits are subject to the exclusions, limitations and provisions in Covenant Christian School student accident policy.

(checkmark for authorization) Parent's Name \_\_\_\_\_ Date \_\_\_\_\_

# GRANDPARENTS' ADDRESS FORM

**Family Name** \_\_\_\_\_

Each year we host a special day in the spring for grandparents to come and visit our school. During the school year, we occasionally send out a newsletter to let the grandparents of our students know what's going on at CCS and to extend a personal invitation to each grandparent to our Annual Grandparents' Day. We would ask that you help us include all of our grandparents by filling out this form.

If you are **new to CCS**, OR if **there have been changes to the information that you have already submitted**, please fill out the information as requested below. This information will enable us to be efficient and effective in our contacts so that no one will be overlooked.

## **Maternal Grandparents:**

Full Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ E-mail \_\_\_\_\_

## **Paternal Grandparents:**

Full Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ E-mail \_\_\_\_\_

## **Other family members or friends that you would like to be included in Grandparents' Day Activities:**

Full Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ E-mail \_\_\_\_\_

# Covenant Christian School Technology Packet

## General Technology Guidelines

### Grades K3-8<sup>th</sup>

Student Name \_\_\_\_\_ Grade \_\_\_\_\_ Year \_\_\_\_\_

**\*\*One packet per student\*\*.** This form will remain on file in the school office.

It is important that you and your child read and discuss the following policies regarding the use of computers, iPads, and the Internet in our classrooms. Inappropriate use may result in the loss of technology privileges which may affect classroom participation and grades or may result in other disciplinary action.

**Cell phones, smartwatches/fitbits, and similar devices are not to be used during school hours by any student.** All students will turn in these devices to the homeroom teacher at the beginning of the day and pick them up at the end of the school day. Students are not allowed to use cell phones or other smart devices to make or receive calls, to take pictures, or to access the internet in any way (including texting of parents or others) during school hours. Any phone/electronic communication between a parent and their child should only be made in the office during school hours. During afternoon car pool, the ONLY acceptable use of a cell phone is communication between a child and his/her parent.

Children in K3-8<sup>th</sup> grade may be directed to use **iPads and/or desktop computers** on campus for educational purposes. Safeguarding restrictions have been installed on **school-owned devices** to prevent access to inappropriate materials. Classroom teachers will supervise your child's use of educational technology; however, please be aware that there is unacceptable and controversial material on the Internet that your child could access despite all of our precautions. We encourage you to discuss your expectations and your family values with your child regarding Internet usage. You may contact your child's teacher if you have questions or concerns about technology or Internet access by your child. All devices, both personal (iPads for 6-8<sup>th</sup> grade) or school-owned, are only to be used at the teacher's discretion and under staff supervision. Parents are responsible to monitor content on student-owned devices such as camera rolls, installed apps, browsing histories, and content restrictions. School computer equipment damaged by student misuse is the financial responsibility of the parent.

**Electronic devices that connect to the Internet** may be brought from home for the educational purposes as determined by the teacher. The *Electronic Device Use Agreement*, available from the office or from Family Portal, must be read and signed by a parent/guardian and student.

6th - 8th grade students **are required to bring their own iPad** to school, which meets the minimum software/hardware requirements necessary to run Apple classroom (supervision software) and has a set of educational apps installed. The iPad must have restrictions installed by a parent according to school standards. See [www.ipadsforccs.weebly.com](http://www.ipadsforccs.weebly.com) for the most current requirements. Two forms, the *Student iPad User Agreement* and the *6th-8th Student iPad Use Policy*, available from the office or on Family Portal, must be read and signed by both a parent/guardian and the student.

We do not encourage students to bring unnecessary electronics (phones, smartwatches, etc.) on campus due to the possibility of them being damaged, lost or stolen. Covenant Christian School, its employees, substitutes, volunteers, or other students will not be responsible for any damages or loss sustained to any personally owned electronic devices.

**CCS highly recommends that ALL parents install the "BARK" app or similar on their children's electronics.** Bark is an app that monitors your child's texts, chats, emails, and 24+ social media platforms for serious issues like cyberbullying, adult content, sexual predators, profanity, suicidal ideation, plus more and sends parents an alert when problematic things are accessed by their child.

### WEB-SITE PERMISSION FORM

Our website and/or Facebook page may be updated periodically with new pictures and classroom information. Please note that on CCS public web pages, full names or other personal information will not be associated with the pictures of any student or group of students.

Parents are given access to our parent portal (Family Portal) by the use of a user name & password to access homework, assignments, grades, and other classroom and general school information. Parents will receive instructions regarding the setup of a user name and password during the first few weeks of school. This is a secure environment for sharing information regarding your student's classroom, grades, and student activities at CCS.

I agree that Covenant Christian School has my permission to use my child's photo and/or artwork on the Covenant Christian School website and/or Covenant Christian School Facebook page and/or Family Portal as deemed appropriate and necessary in the day to day operations of the school.

(checkmark for authorization) Parent Name \_\_\_\_\_ Date \_\_\_\_\_

## CCS COPPA COMPLIANCE

In order for Covenant Christian School to provide your student with the most effective web-based tools and applications for learning, we need to abide by federal regulations that require a parental signature as outlined below.

We utilize several computer software applications and web-based services, operated not by this school, but by third parties. These include RenWeb/Family Portal, Microsoft 365 for Education, IXL, Class Dojo, Dropbox and similar educational programs.

In order for our students to use these programs services like Microsoft 365 for Education, and our teacher's to use programs on behalf of your students, certain personal identifying information -- generally the student's name, a username and the student's school email address (for grades 6-8) -- must be provided to the web site operator.

**Please note, if your student has a CCS email account (6<sup>th</sup>-8<sup>th</sup>), student's email address is only active within our domain (cannot send or receive email with anyone other than a [user@covenantsschool.com](mailto:user@covenantsschool.com).)** If you wish to have that restriction disabled, you must submit the request IN WRITING to the school and we take no responsibility for monitoring the email account activity.

Under federal law entitled the Children's Online Privacy Protection Act (COPPA), these websites must provide parental notification and obtain parental consent before collecting personal information from children under the age of 13. For more information on COPPA, please visit <https://www.ftc.gov/tips-advice/business-center/guidance/complying-coppa-frequently-asked-questions>. The law permits schools such as ours to consent to the collection of personal information on behalf of all of its students, thereby eliminating the need for individual parental consent given directly to the web site operator. **Please note, whenever possible, we use only the student's first name and last initial.**

This form must be signed by a parent/guardian and kept on file in the school office. This signed form constitutes consent for Covenant Christian School to provide personal identifying information for your child consisting of first name, last name, and if needed, a school email address and username.

(checkmark for authorization) Parent Name \_\_\_\_\_ Date \_\_\_\_\_

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## STUDENT IPAD USER AGREEMENT

Use of iPads falls within the guidelines of our *General Technology Guidelines and Terms & Conditions for Use*. The iPad is a learning tool intended for academic use only. The iPad is subject to review, inspection and monitoring by the school at any time and 6-8<sup>th</sup> grade personally owned iPads must be connected to Apple Classroom monitoring software.

### Usage Rule & Policy:

- During instructional activities, electronic usage is to be focused solely on the activity at hand. Electronic communication such as texting, emailing, etc. (including communication with parents) is NOT allowed during the school day. No use of social media is permitted during the school day (including early room and car pool.)
- During Jr. High study hall, the iPad is intended for school-related activities and educational purposes only.
- The iPad has a built-in camera. Student must have the permission of anyone placed in a photo or video and only do so when directed by a teacher as part of a learning activity.
- The iPads should ONLY be used in supervised classrooms. They are not for use in hallways, locker rooms, bathrooms, at lunch, in early room, in car pool, etc.
- School owned iPads will have restrictions set on them by administration. 6-8<sup>th</sup> grade parents are required to enable restrictions on the personally owned devices and should familiarize themselves with the policies listed on the iPad website, <http://ipadsforccs.weebly.com/>.
- Similar to other personally owned items, CCS cannot be liable for loss, damage, or theft of any personal electronic device, including iPads. We strongly recommend that student-owned iPads (6-8<sup>th</sup> only) be placed in a sturdy case and labeled with the student's name. Location services should also be enabled on the device for tracking purposes.
- No student should tamper with the protective case, labeling, passwords, or settings of a school-owned iPad. Parents will be responsible for damages caused by misuse to school equipment.
- **Absolutely no inappropriate content should be accessed, stored, or shared on devices on campus.**

Consequences for violating the Use Policy are determined by frequency and nature of infraction and may include but not limited to the following: 1) Marks off the conduct grade. 2) Visits to the office and movement along the discipline ladder. Suspension or expulsion could be possible, especially in cases of inappropriate (e.g. pornographic/illegal) conduct viewed or shared at school.

We agree to the policies in this agreement and agree to abide by the decisions of the school regarding misuse of any device by the student.

(checkmark for authorization) Student Name \_\_\_\_\_ Date \_\_\_\_\_

(checkmark for authorization) Parent Name \_\_\_\_\_ Date \_\_\_\_\_

## TERMS & CONDITIONS FOR USE OF TECHNOLOGY/INTERNET

The use of CCS computer, iPad and/or Internet resources is a **privilege, not a right**, and inappropriate use may result in cancellation of those privileges, as well as possible disciplinary action. The "network" refers to the CCS computer network and any Internet connection available and accessed on campus, including any wireless access.

### Unacceptable uses of the computer and/or Internet include, but are not limited to the following:

- Lending an assigned password to other students and/or adults.
- Entering any student's (including yours) full name, city, school name, home address, phone number, or other personal information into third party software or onto an Internet site or uploading any photographs without teacher or parent consent.
- Using the network for accessing, sending or receiving personal messages via e-mail, chat rooms, message boards, SnapChat, Facebook, Instagram, or other social networking sites. This INCLUDES communication with parents. **Parent/student communication should only be conducted through the office during the school day.**
- Using an electronic device to access the internet without consent of teacher.
- **Using the network to access a file that contains pornography, inflammatory material, illegal material, inappropriate material, violent material, obscene material, or ANY material not specifically related to the instructional lesson, objective, or assignment.**
- Using the network to send/receive inflammatory messages, spoofing or otherwise attempting to send anonymous messages of any kind.
- Altering and forwarding personal communication without the author's prior consent.
- Using copyrighted materials in reports or projects without permission or plagiarizing online resources.
- Using written profanity or obscenity in the course of using the computer.
- Changing settings, backgrounds, passwords, etc. on school-owned devices unless instructed to do so.
- Taking photographs, videos, or sound recordings of others without their knowledge and consent.
- Damaging equipment due to misuse by a student (which will result in parent being charged to replace the technology).
- Ordering services or merchandise from companies that have websites with ordering availability. Covenant Christian School shall not be held responsible for any transactions or be liable for any costs or damages arising out of the actions of students or merchants.
- Using the network for financial gain, for commercial activity, or for any illegal activity.
- Bringing/using any flash drives, cd-roms, etc. from home without teacher approval.
- Copying and/or distributing commercial software in violation of copyright law.
- Creating a computer virus and placing it on the school devices, network, or the Internet.
- Participating in the transfer of inappropriate or illegal materials through the Covenant Christian School Internet connection
- Bringing software from home with the intent of loading it onto a school computer or other device.

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As the parent or guardian of this student, I have read the terms and conditions for computer and/or Internet access privileges. I understand internet access on school property is for educational purposes and that Covenant Christian School has taken available precautions in forewarning and educating all interested parties of the controversial material that is accessible on the Internet. I also recognize that it is impossible for the school and its faculty to restrict access to all controversial materials.

### Please read over the following policies with your child regarding the use of computers and/or the Internet at CCS.

- I have read and agree to abide by all rules that are listed in the Covenant Christian School *General Technology Guidelines* and *Terms & Conditions for Use*.
- I realize that the sole purpose of technology/Internet on campus is educational.
- I realize that the use of the computer and/or Internet is a privilege, not a right. I accept that inappropriate behavior may lead to penalties, including revoking of a student's Internet access, technology usage, and/or disciplinary action.
- I agree that my student may not use a cell phone or other electronic device to access the Internet in any form for personal use during school hours unless directed by a teacher.
- I will NOT instruct my student to conceal a cell phone, smart watch, Fitbit, or other electronic device on their person, in their belongings, in their locker, etc. during the school day.
- I understand that any equipment damaged by my student is my responsibility and I agree to pay for repairs or replacement of any CCS equipment as determined by the CCS IT Department.

*I give my permission to Covenant Christian School to issue Internet and computer access privileges to my son/daughter. I have discussed the guidelines set forth by the school with my son/daughter.*

(checkmark for authorization) Parent Name \_\_\_\_\_ Date \_\_\_\_\_

(checkmark for authorization) Student Name \_\_\_\_\_ Date \_\_\_\_\_

# CHURCH SCHOOL ENROLLMENT FORM

School Year \_\_\_\_\_ Date of Entrance \_\_\_\_\_ Date of Withdrawal \_\_\_\_\_  
Grade at Entrance \_\_\_\_\_ Grade at Withdrawal \_\_\_\_\_

## I. TO BE COMPLETED BY PARENT OF GUARDIAN

Student Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Parent or Guardian Name \_\_\_\_\_ Phone \_\_\_\_\_

Home Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Church School Name      Covenant Christian School  
Address                      7150 Hitt Road  
                                    Mobile, AL 36695  
Phone                        (251) 633-8055

(checkmark for authorization)      Parent's Name \_\_\_\_\_ Date \_\_\_\_\_

## II. CONSENT FOR NOTIFICATION OF STUDENT WITHDRAWAL

Church School Name      Covenant Christian School  
Address                      7150 Hitt Road  
                                    Mobile, AL 36695  
Phone                        (251) 633-8055

I hereby give prior consent to the Administrator of Covenant Christian School to notify the public school superintendent should the above named student cease attendance at Covenant Christian School.

(checkmark for authorization)      Parent's Name \_\_\_\_\_ Date \_\_\_\_\_

## III. TO BE COMPLETED BY CHURCH SCHOOL ADMINISTRATOR

Church School Name      Covenant Christian School  
Address                      7150 Hitt Road  
                                    Mobile, AL 36695  
Phone                        (251) 633-8055

The above named student is hereby enrolled as of the entrance date.

Church School Administrator Signature \_\_\_\_\_ Date \_\_\_\_\_

# CHURCH SCHOOL ENROLLMENT FORM

## Information and Procedures

Parent or Guardian:

The information below is to familiarize you with the Church School enrollment procedures and to assist you in complying with the law. Please review this information and then complete the Church School Enrollment Form. Copies will be sent to the Mobile County Superintendent of Education and to the Alabama State Superintendent of Education.

The Alabama State Legislature has enacted a law concerning the enrollment and attendance of children in church school. The term “church school” shall mean and only include such schools as offer instruction in grades K-12, or, or any combination thereof including the kindergarten, elementary or secondary level and are operated as a ministry of a local church, group of churches, denomination and/or association of churches on a nonprofit basis which do not receive any state or federal funding.

The law generally exempts the church schools from the supervision of the state but does include certain requirements concerning the enrollment and attendance of children in church schools. Specifically, the following requirements shall apply for the parents, guardians or other persons in charge or control of a child who is enrolled in a church school:

1. The enrollment and attendance of a child in a church school shall be filed with the public school superintendent on a form provided by the superintendent or his agent.
2. The enrollment form shall be countersigned by the administrator of the church school and returned to the church school office by the parent, guardian or other person in charge or control of the child in order to be filed with the public school superintendent’s office.
3. The church school administrator, by prior consent of the parent, guardian or other person in charge or control of the child at the time of enrollment, shall notify the local public school administrator or his agent when said child no longer is in attendance at a church school.

Originals should be mailed by the school administrative office to the following address:

MCPSS – Attendance Dept.  
P.O. Box 180069  
Mobile, AL 36618



# COVENANT CHRISTIAN SCHOOL

## Kindergarten Potty-Training Policy Agreement

Student's Name \_\_\_\_\_

2022/2023 School Year

Covenant's K3, K4, and K5 classes are structured such that students are deliberately placed into a strong academic environment. For this reason, it is imperative that every student be completely potty-trained in an effort to limit distractions and missed class time.

Please note the following requirements and policy regarding a student potty-training readiness:

- All Covenant students must be **fully potty-trained at the time of screening**. Not staffed like a daycare, Covenant is not able to address the restroom needs of a student who are not fully potty-trained.
  
- While we understand that accidents will happen on occasion, we want to provide the following guidelines to define how we react as a school to these accidents:
  1. If a student has a single incident two weeks in a row, they will be sent home for five school days for retraining.
  2. If a student has more than two accidents in a single week, they will be sent home for five school days for retraining.
  3. From time to time, students react to changes in environment, stress, tragedy, trauma, or family issues by regressing in good restroom behaviors. While we understand these instances sometimes happen, in cases of regression, and if your student meets any of the criteria in guidelines 1 and 2 above, they will be sent home for 5 school days for retraining.
  4. Consideration will be given to any student with medical complications, documented by a licensed pediatrician, on a case-by-case basis.

Covenant's administration will be the final arbiter regarding the enrollment status of a student not fully potty-trained or failing to meet the standards listed above.

Parent Name: \_\_\_\_\_

Parent Signature: \_\_\_\_\_

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



**COVENANT**  
CHRISTIAN SCHOOL

## **Kindergarten Napping Policy Agreement**

Student's Name \_\_\_\_\_

2022/2023 School Year

Covenant's full-day K3, K4, and K5 classes are structured as such that students are required to rest or nap each afternoon at a time set by the individual classroom teacher.

Please note the following requirements regarding naptime:

- While the student is not required to sleep (although most do), each student is required to rest quietly and remain calm on their nap mat during the designated time.
- If your student is not cooperative during nap/rest time and will not rest quietly, thereby disturbing the rest of the class, the parent may be called to come to pick up the student early.
- Our hope is to work with our students to help them rest during this time accordingly. However, continued disturbances during the rest period may result in the student's removal from the full-day program making the half-day program the only option moving forward.

Parent Name: \_\_\_\_\_

Parent Signature: \_\_\_\_\_

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

Please sign the bottom of this form to legally authorize any permissions given in the previous pages of the registration packet.

**Covenant Christian School Registration Form**

*I hereby give permission for the records of my student to be released to Covenant Christian School.*

**Consent for Treatment of Minor Dependent**

*Based on the symptoms my child describes, CCS office personnel has permission to administer OTC medication on an occasional basis. I understand and agree to not be notified every time an OTC is administered. Office personnel will record any medications given in our online student database program.*

**Food Allergy Action Plan (only if necessary)**

*I verify that the above given information is correct for the named student / patient. I authorize Covenant Christian School to perform the above listed instructions and/or to administer the above listed medications in the case of an allergic reaction.*

**Parental Cooperation and Responsibility Statement**

*We have read and understand the terms stated above (in the Parental Cooperation and Responsibility Statement) and we agree to them.*

**Authorized Student Pick-Up & Emergency Contacts**

*No one will be permitted to pick up your student if their name is not listed above. All persons must be willing to show their I.D. if asked. I give permission to the above named adults to pick up my student(s) from Covenant Christian School.*

*Reasonable efforts will be made to contact parents in the event of an emergency. However, in case of an emergency I authorize Covenant Christian School to seek medical treatment deemed necessary by school administration if I cannot be reached.*

*Covenant Christian School carries secondary (or excess) student accident coverage on each student. Each family is responsible for primary coverage. I agree to apply first for benefits from the hospitalization and medical coverage held by my family, if any, before applying for benefits that may be available from Covenant Christian School's student accident, medical, and hospitalization secondary coverage. These secondary benefits are subject to the exclusions, limitations, and provisions in Covenant Christian School student accident policy.*

**Web-Site Permission Form**

*I agree that Covenant Christian School has my permission to use my child's photo and/or artwork on the Covenant Christian School website and/or Family Portal as deemed appropriate and necessary in the day to day operations of the school.*

**CCS COPPA Compliance**

*This signed form constitutes consent for Covenant Christian School to provide personal identifying information for your child consisting of first name, last name, and if needed, a school email address and username.*

**Student iPad User Agreement**

*We agree to the policies in this agreement (Student iPad User Agreement) and agree to abide by the decisions of the school regarding misuse of any device by the student.*

**Terms & Conditions for Use of Technology/Internet**

*I give my permission to Covenant Christian School to issue Internet and computer access privileges to my son/daughter. I have discussed the guidelines set forth by the school with my son/daughter.*

**Church School Enrollment Form**

Student and parent information verification.

*I hereby give prior consent to the Administrator of Covenant Christian School to notify the public school superintendent should the above named student cease attendance at Covenant Christian School.*

**Kindergarten Napping & Potty Policies (if needed)**

Parent consent to Covenant's policies

Parent Digital Signature \_\_\_\_\_

Date \_\_\_\_\_

(If instructions are needed to properly sign using Digital ID, please see the next page)

Instructions for using Digital ID to electronically sign an Adobe document (if you have not created a Digital ID signature):

1. Make sure that you've already completed the rest of the document
2. Click on the signature box
3. Click "Configure Digital ID"
4. Click "Create a New Digital ID" and then "Continue"
5. Click "Save to File" and then "Continue"
6. Enter your name and email address then click "Continue"
7. Create a password (that you'll remember) then click "Save"
8. Click "Continue"
9. You'll be prompted to re-enter your password then click "Sign"
10. Rename the document and save it to your computer
11. Send your completed, signed, and saved document to [info@covenantschool.com](mailto:info@covenantschool.com)