

International Students Application Instructions

To receive the I-20, there are two steps: (You must do steps A and B)

A. Apply: (Interview will be scheduled upon the acceptance of the following items)

1. Registration fee: **\$500.00** (non-refundable)
2. Completed International Student Application
3. Copy of **Passport** Page (must be valid for at least 6 months prior to entry)
4. **Transcripts** with official translation (subjects, hours and grades) Original in **English**, see Transcript Requirements
5. Test results from one of the following : TOEFL iBT or iTEP SLATE
6. Bank Statement proving financial ability of support for a full course of study
7. Immunization Record in English (must include dates)
Please Note: Record must be sent at this time, and completed before leaving home country
8. Recommendation forms from a teacher, principal (Head of School) and parent (if available)
9. International Student Admission Essays from the applying student completed in English

B1: Commit: (For the I-20 and acceptance letter to be processed and mailed)

1. Pay the international fee: **\$1,500.00** (Refundable in full only if the student is not admitted to Heritage Christian School. 50% refund if the student withdraws from enrollment prior to July 1st.)

B2: Finish application process:

1. Go to the doctor to update any missing immunizations, if needed
2. If original documents not already submitted, send original documents of the application forms and Official Transcript (not copies)

C. Apply for Interview at Embassy for the Student Visa. Immediately notify school when a visa is approved or denied: email Mrs. Lade at plade@heritage-schools.org.

D. BEFORE ARRIVING IN THE U.S. (after visa is granted) the following must be completed:

1. Pay Tuition (add \$20.00 if wiring) -see schedule of tuition and fees
2. Athletic eligibility is limited to JV teams for first year high school students, unless enrolled through a California State CIF approved agency. For the list of CIF approved foreign exchange programs see www.cifstate.org
3. Complete HCS Enrollment packet signed by parent
4. Submit completed Immunization record before arriving in the U.S.
5. Submit Official Transcript, original document, now including 2nd semester of the past school year.

E. Arrival at School Procedures and Class Registration:

1. Fill out Address/Contact Information update form for Immigration and web purposes – must be accurate and current.
2. Purchase school uniforms through uniform company. (Link located on school website: www.heritage-schools.org)

IMPORTANT: All non-immigrant international students enrolled in HCS must be on an F-1 student visa. Never enter the United States on a tourist visa if you intend to attend school. If you enter on a B-1/B-2 visa to look at schools, make sure it says “Prospective Student” on the visa page.

**HERITAGE CHRISTIAN SCHOOL
INTERNATIONAL STUDENT APPLICATION
2016-2017 SCHOOL YEAR**

1. New Student Information:

Student Legal Name: _____ Grade Entering: _____

Student Nickname or English Name: _____ Sex: M / F Birthdate: _____

Citizen of (Country): _____ Passport Number: _____

Place of Issue: _____ Date of Issue: _____ Date of Expire: _____

Student Phone: _____ Student Email: _____

Permanent home address: _____

City: _____ State: _____ Country: _____ Postal Code: _____

Last School: _____
Name Full Address Section/Providence Phone #/Fax #

2. Family Information in Home Country:

Father: _____ Mother: _____
(Last) (First) (Last) (First)

(If Different from student)

Address _____
Apt/House Section/Providence, Etc. City Country

Father work phone Father email Mother work phone Mother email

Father Occupation Father Employer Mother Occupation Mother Employer

3. School Placement Agency Information:

Agency Name: _____ Contact Person: _____

Address: _____
Building & Street Name City State (Country) Zip (Postal) Code

Primary Phone number Other Phone #'s Email Fax

Heritage Christian School admits students of any race, color, national and ethnic origin to all rights, privileges, programs, and activities generally accorded, or made available to students at the school. It does not discriminate on the basis of race, color, national and ethnic origin in administration of its educational policies, admissions policies, scholarship and loan programs, athletics and other school-administered programs.

4. Guardian or Contact Person Information in the United States (if applicable):

Name/s: _____ Relationship to Student: _____

Address: _____
Apt/House City State Zip Preliminary Phone contact number

Home Phone Home email Cell # Cell#

Other Emergency Contact Work Phone Work email Fax #

5. Home Stay Placement Company Information (for all students not living with a blood relative)

Company Name: _____ Contact Person: _____
Last (Family) First

Address: _____
Building & Street City State Zip Code

Primary Phone number Other Phone/s Email Fax

Information to be completed about the student:

Has the student had any health related problems? _____ Explain: _____

Physical difficulties? _____ Explain: _____

Has student had any academic difficulties ? _____ Explain _____

Has student repeated a grade? _____ Reason: _____

Discipline problems? _____ Explain: _____

Truancy problems? _____ Explain: _____

Excess absence due to illness? _____ Explain: _____

Difficulty with civil authorities? _____ Explain: _____

Is the student on any medication? _____ Explain: _____

Please list the Performing Arts choice in order of preference, number 1-4: Art _____ Drama _____ Vocal music _____
Instrumental Music (which instrument do you play) _____

Please list elective choice in order of preference, number 1-3: Computer _____ Newspaper _____ Yearbook _____

Please list Physical Education preference: Regular PE class ____ or Sports ____ (check all that apply below)

Cross Country ____ Tennis ____ Football (boys only) ____ Soccer ____ Cheer (girls only) ____

Baseball or Softball ____ Golf ____ Track and Field ____ Volleyball ____ Basketball ____ Swim ____

What church does the family attend? _____

Please explain why you want this student to attend Heritage Christian School. _____

How did you learn of Heritage Christian School? _____

ACCEPTANCE CONDITIONS

I/We understand that if _____ (print name of student) is accepted as an International Student at Heritage Christian School of Northridge, CA, the following conditions apply:

1. I understand that I must meet the graduation requirements to receive a diploma. I must prove that all transfer credits meet HCS's standards (I may have to repeat a class and lose previous credit) and I must pass all required classes.
2. I understand that I must take a "full load" (7 classes per semester) in order to remain in status with my student visa.
3. I understand that placement in any honors or AP class will be determined by meeting prerequisite requirements of a 3.5 GPA in a previous semester and that the AP Exam is required.
Decisions on appeals to any placement will be made by the Administration and become final.
4. I understand that I must abide by any Department of Homeland Security rules and obey the attendance, behavior, driving, guardianship, housing, and all other rules set forth by HCS. I will be dismissed from school if these requirements are consistently challenged or falsified.
5. I understand that any false information or failure to disclose academic, behavior, or emotional problems during the application/ admittance process may result in dismissal from school with no recourse and no refunds.
6. I understand that while I am a student at HCS, I am considered a minor. However, I must also abide by all rules and laws of the State of California, the United States of America, and the school—even if I am 18 or older.
7. I understand that my acceptance is for one year. My progress, effort, behavior, attitude and attendance will be evaluated yearly. HCS is not obligated to re-sign my I-20 to allow me to continue.
8. I understand that International students are not permitted to drive any motorized vehicle unless living with their parents or designated guardian from their home country.
9. I understand that I must remain with my Placement Agency while I am enrolled at HCS.

I/We have read, understand, and agree with the Parental Contract, including the Mediation and Arbitration Agreement

I/We have read, understand, and agree with the Schedule of Tuition and Fees terms and conditions.

I/We have read, understand, and agree with the Acceptance Conditions stated above.

I/We acknowledge that all documents, information and signatures are true and not falsified.

Enclosed is my application fee made payable to HCS, (\$500.00 U.S. dollars per student)

Student Signature

Parent or Guardian Signature

Date

HERITAGE CHRISTIAN SCHOOL
DESIGNATED GUARDIAN IN THE UNITED STATES

All International students must have a Designated Guardian.
(The designated guardian is usually NOT the American host family)

For a Designated Guardian in the United States (appointed by student's parents in home country)

REQUIREMENTS:

1. Must be at least 25 years old.
2. Must speak English.
3. Must be acquainted with American customs and educational systems.
4. Must live in the continental United States and be able to take physical responsibility for the student within twelve (12) hours of notification of a problem, if parents are not in residence.
5. Must speak the student's and parent's first language.
6. Must be well-known by the parents or the contracted sending agency.

RESPONSIBILITY: Must maintain communications between parents, school, and host family concerning student.

1. Help counsel and decide academic, living, medical and/or behavior questions, deficiencies, or problems.
2. Assume responsibility of student within 12 hours if student is dismissed from Heritage Christian School or any home stay (if participating) program, if parents are not in USA residence.
3. Sign for a minor or an 18-year-old student who is given permission by the parents in the home country to take the driving test and/or drive any motorized vehicle.
4. Assume physical custody if student drives...meaning student **MUST** live with the designated guardian.
5. Must keep in contact with the HCS international office—including the following:
 - Approve major schedule changes.
 - Approve any home stay changes and follow all notification procedures.
 - Keep informed by email, website and RenWeb of student's progress and school activities.
 - Immediately notify school of all changes in contact information (student, parent, guardians, etc.)

A. Parents appoint DESIGNATED UNITED STATES GUARDIAN for student _____
(Student's Name)

Guardian Name _____ Relation _____
(Appointed USA Guardian's Name and Information)

Address _____ Phone _____

City/State/Zip _____ Cell Phone _____

Email _____ FAX _____

B. Guardian and Parents read and sign:

- I have read the above requirements and responsibilities of the Designated Guardian for International students of HCS. I accept responsibility for _____ as appointed by his/her parents _____.
(Student's Name) (Student's Parents' Names)
- I understand that if the student is dismissed from school or the agency, I will be notified and will assume physical custody of the student within twelve hours of notification.
- I understand that if the parents allow the student to drive a motorized vehicle, I will assume all responsibility, residency of student, and show proof of insurance for the student driver.
- I understand it is my responsibility to keep informed of student's progress, course selections, and school events.
- I understand it is my responsibility to keep informed and notify school of all contact information changes.

(Signature of Designated Guardian) (Print Designated Guardian Name) (Date)

(Signature of Parent of student) (Print Parent of Student Name) (Date)

HERITAGE CHRISTIAN SCHOOL
PARENTAL CONTRACT
2016-17 School Year

Student's Name _____ Grade _____
Student's Name _____ Grade _____
Student's Name _____ Grade _____

The following contract between Hillcrest Christian School a California nonprofit corporation dba Heritage Christian School (hereinafter "Heritage") and _____ hereby states:

(Parent's/Guardian's Names)

1. I/We understand that enrollment and re-enrollment at Heritage is by invitation only. Strict adherence to the Parent/Student Handbook is required for continued enrollment. Current enrollment and attendance at Heritage does not guarantee or create a right of re-enrollment for subsequent school years.
2. I/We understand that Heritage requires its students to comply with conduct standards as set forth in the Parent/Student Handbook. I/we agree that we will do our utmost to encourage and support my/our child to adhere to these standards and will provide the family support as required by the Family Support and Cooperation Policy set forth in the Parent/Student Handbook.
3. I/We understand the general philosophy of education, and agree with the purpose and intent of Heritage.
4. I/We agree with the standards of conduct and discipline and grant authority to the teacher and administration to discipline my/our child(ren) when necessary. I/We understand that any use of illegal substances, profanity, obscenity, immorality, bullying behavior, dishonor to the Holy Trinity and the Word of God, disrespect to the personnel of the school, or continued disobedience to the established policies of the school are not tolerated by Heritage.
5. I/We will support the school by my/our involvement at school-sponsored meetings and activities, including parent/teacher/administration conferences.
6. I/We understand that my/our failure to report psychiatric counseling, any prescribed program of medication, or involvement with law or juvenile authorities may be cause for immediate disenrollment.
7. I/We will uphold the spiritual emphasis of Heritage by allowing our child(ren) to attend chapel services on campus and to receive Bible class instruction.
8. I/We agree to cooperate and faithfully support the school and its ministry through prayer and with a positive attitude. All grievances, complaints, or comments will be made only for constructive purposes and in all cases will be made first directly to the teacher, administrator, or person involved and, in no case, repeated to others including my/our child(ren) or other parents. I/We further agree to follow the Biblical principles for resolving all grievances with the school and its staff and to strictly adhere to the Complaints and Criticisms Policy as set forth in the Parent/Student Handbook.
9. I/We agree to uphold and support the academic standards of the school by providing a place at home for my/our child(ren) to study and by giving my/our child(ren) encouragement in the completion of homework and assignments.
10. I/We agree to pick up my/our child(ren), or make arrangements to do so, should any problems arise concerning illness/health-related problems or because of behavior problems.
11. I/We give permission for my/our child(ren) to participate in all school activities and school sponsored field-trips, including permission to be transported to activities.
12. I/We understand and agree to pay tuition and fees according to the terms of the financial policy as stated on the 2016-2017 Tuition Payment Information sheet, the 2016-2017 Tuition Schedule, and the current Parent/Student Handbook.
13. I/We understand there are financial fees and assessments which may be charged to each student's general account. I/We agree to pay all amounts due on a timely basis and to keep our child(ren)'s general account current.
14. I/We understand there is no supervision for our child(ren) before or after the hours as specified in the current Parent/Student Handbook. We will not allow our child(ren) to be on campus before or after official hours without supervision.
15. I/We further agree that any claim or dispute between us arising from or related to this Parental Contract shall be settled by mediation and, if necessary, legally binding arbitration in accordance with the Mediation and Arbitration of Disputes Agreement. I/We agree that this Mediation and Arbitration of Disputes Agreement shall provide the sole remedy for any dispute arising between me/us, my/our children, and the school or its employees or agents and do hereby waive, on behalf of myself/ourselves and my/our children, the right to file any legal action against the school or its employees or agents in a civil court or agency, except as otherwise provided in the Mediation and Arbitration of Disputes Agreement.
16. I/We have discussed the current Parent/Student Handbook with our children and have emphasized the importance of abiding by the policies, rules and provisions contained therein. I/We acknowledge that I/we have been provided with a copy of the current Parent/Student Handbook. I/We have carefully read, understand, and agree to be bound by all of the doctrines, policies, rules and provisions contained therein. I/We further understand that a new Parent/Student Handbook is issued at the beginning of each new school year. I/We further understand that as a condition to my/our child(ren)'s continued enrollment at the school, I/we are required, within ten (10) school days of my/our receipt thereof, to provide the school with a written acknowledgment, signed by both parents/guardians, that I/we have read and understand the contents thereof and agree to be bound by its provisions. I/We acknowledge that failure to return this written acknowledgment will cause my/our child(ren) to be suspended until received by the school office.

I/We are the parent(s) or legal guardian(s) with the custodial rights of the student(s) listed above and have the legal right to sign this Parental Contract and by my/our signature(s) hereto, agree to these conditions and obligations.

Signature of Father (Guardian) _____ Date _____

Signature of Mother (Guardian) _____ Date _____

MEDIATION AND ARBITRATION OF DISPUTES

1. Hillcrest Christian School, a California nonprofit corporation dba HERITAGE CHRISTIAN SCHOOL (the "School") is a Christian institution which believes that the Bible commands individuals to make every effort to live at peace and resolve disputes with one another in private and within the parameters set by the Christian Church (see Matthew 18:15-20; 1 Corinthians 6:1-8). Therefore, the School, and the parents, legal guardians, and legal representatives of its students (hereinafter the parties) agree that except as expressly exempted from these provisions, any and all claims or disputes which would otherwise be the basis for legal or court action, which arise from or are related to the School and its operation, including all aspects of a student's relationship with the School, its administrators, faculty, and staff, shall be settled by biblically based mediation and, if necessary, legally binding arbitration.
2. The parties hereto agree to mediate any dispute or claim as above described arising between them before resorting to arbitration. Mediation is a process by which parties attempt to resolve a dispute or claim by submitting it to an impartial, neutral mediator, who is authorized to facilitate the resolution of the dispute, but who is not empowered to impose a settlement on the parties.
3. The mediation shall be conducted in accordance with the **Rules of Procedure for Christian Conciliation** contained in the booklet **Guidelines for Christian Conciliation** promulgated by the Institute for Christian Conciliation a division of Peacemakers Ministries (or its successor), whose address is 5550 Tech Center Dr. #311, Colorado Springs, CO 80919 and phone number is (719) 358-4900. A copy of the Rules of Procedure are available in the school office or online at www.Peacemaker.net under the Institute button. The mediation shall be conducted at a location, in the San Fernando Valley, as determined under the Rules. The parties to the dispute may mutually agree to the selection of an alternative method of mediation and/or a mutually acceptable alternative mediator to resolve the dispute.
4. If any party commences an arbitration or court action based on a dispute or claim to which the mediation provision applies without first attempting to resolve the matter through mediation, then in the discretion of the arbitrator(s) or judge, that party shall not be entitled to recover attorney's fees, even if they would otherwise be available to that party in any such proceeding.
5. The parties hereto agree that any dispute or claim in law or equity arising between them which is not settled through mediation, as above provided, shall be decided by neutral, binding arbitration and not by court action, except as provided by California law for judicial review of arbitration proceedings.
6. The dispute shall be submitted to binding arbitration in accordance with the **Rules of Procedure** promulgated by the Institute for Christian Conciliation, whose address, telephone number, and web address are provided above. In the event the arbitrator or arbitrators selected pursuant to the **Rules of Procedure** above decline to act, either party may submit the dispute to arbitration in accordance with the Rules of Procedure of ADR Services, Inc. (ADR) or Judicial Arbitration and Mediation Services, Inc.-Endispute (JAMS-Endispute). The selection between ADR and JAMS-Endispute shall be made by the claimant first filing for arbitration. The parties to an arbitration may agree in writing to use different rules and/or arbitrator(s). The cost of mediation and/or arbitration shall be governed by the Rules of Procedure. The parties shall have the right to discovery in accordance with Code of Civil Procedure Section 1283.05. In all other respects, the arbitration shall be conducted in accordance with Part III, Title 9 of the California Code of Civil Procedure. Judgment upon any arbitration award may be entered in any court having jurisdiction thereof.
7. Exempted from the provisions of these mediation and arbitration provisions is the collection of monies due the School for tuition or other charges. Such collections may be enforced directly by legal action. The mediation and arbitration provisions created herein are not intended and do not give parents, guardians, or other legal representatives standing to arbitrate matters arising from the administration and implementation of the School's educational functions. Also exempted from the provisions of this Mediation and Arbitration of Disputes Agreement are any disputes which by law are required to be resolved by a governmental agency or are by law expressly exempted from arbitration.
8. If a dispute or claim involves an alleged injury or damage to which the School's insurance applies, the School's insurer may elect not to submit the dispute or claim to mediation or arbitration as described in this Agreement, in which event unless the parties otherwise agree, this Mediation and Arbitration of Disputes Agreement shall no longer be binding with regard to that part of the dispute or claim to which the School's insurance applies. Except as otherwise provided herein, the parents, legal guardians and legal representatives of their student agree that this Mediation and Arbitration of Disputes Agreement shall provide the sole remedy for any dispute between them, their children, or students, and the School and do hereby waive, on behalf of themselves, their children and students, the right to file any legal action against the School in a civil court or agency, except to enforce an arbitration award.

I/We have read the Mediation and Arbitration of Disputes Agreement printed above and agree to be bound thereby.

Signature of Father (Guardian) _____ Date _____

Signature of Mother (Guardian) _____ Date _____

HILLCREST CHRISTIAN SCHOOL dba HERITAGE CHRISTIAN SCHOOL

North Campus: 17531 Rinaldi Street, Granada Hills, CA 91344 - Phone (818)368-7071 Fax (818)363-4455

South Campus: 9825 Woodley Avenue, Northridge, CA 91343 - Phone (818)894-5742 Fax (818)892-5018

Emergency Treatment Authorization for Treatment of a minor (one form for each child) We call 911 For All Major Emergencies

I/we, the undersigned, parent(s) or guardian of _____,
birthdate _____, grade _____ (a minor), do hereby agree and authorize:

(a) In the event my child suffers sudden illness, accident, or injury, I/we give permission and authorize Hillcrest Christian School a California nonprofit corporation dba Heritage Christian School (hereinafter "Heritage") its agents and representatives, to provide emergency aid and to provide or authorize such emergency transport and medical treatment that is deemed necessary by a paramedic, emergency medical technician, physician, or dentist (health professional). In the event hospital treatment is deemed advisable by the licensed health professional, and the school is unable to reach the parents or legal guardian or the emergency contact listed below, I/we authorize the hospital, or urgent care facility most accessible at the time of accident or during the illness, to administer such x-ray examination, anesthetic, medical or surgical diagnosis or treatment and hospital or temporary emergency care deemed advisable. Emergency care may be rendered under the general and special supervision of any physician and surgeon on the medical staff of said hospital or emergency care facility, whether such diagnosis or treatment is rendered at the hospital or emergency medical facility or at the office of the physician; and

(b) It is understood that this authorization is given in advance of any specific diagnosis, treatment or hospital care being required, but is given to provide authority and power on the part of Heritage, its agents and employees, to give specific consent to any and all such diagnosis, treatment or hospital care which the aforementioned licensed health professional, in the exercise of his/her best judgment, may deem advisable.

(c) In the event of a major disaster, earthquake, fire, etc., I authorize Heritage, its agents and employees, to use its discretion in evacuation procedures and care of my child. They may, at their discretion, release my child to travel home by his/her usual method of transportation. That method is: _____

OR _____ Car pool with, Student-driven vehicle driven by, Walking, Bicycle
_____ DO NOT release my child except to an adult authorized below as an emergency contact.

(d) It is further understood that a completed original of this Emergency Treatment Authorization signed by each parent or guardian having custodial rights is required to be on file with the school as a condition for enrollment and/or participation in any school activity or event. It is further understood that it is my/our responsibility as the custodial parent or guardian to ensure that the information on this form is current. I/we further understand and agree that unless I/we complete and file a more current Emergency Treatment Authorization, Heritage and the medical professionals referred to herein shall be entitled to rely on the information and authorization contained herein.

Parent or Legal Guardian: (please print)

Name _____ Relationship to student _____
Daytime Phones: Home () _____ Work () _____
Cell () _____

Name _____ Relationship to student _____
Daytime Phones: Home () _____ Work () _____
Cell () _____

Emergency contacts other than parent or guardian listed above: (please print)

Name _____ Relationship to student _____
Daytime Phones: Home () _____ Work () _____
Cell () _____

Name _____ Relationship to student _____
Daytime Phones: Home () _____ Work () _____
Cell () _____

Name _____ Relationship to student _____
Daytime Phones: Home () _____ Work () _____
Cell () _____

Continued on Reverse

Student's Physician- Health Care Organization: _____ Phone () _____

Medical Insurance Company/ HMO: _____ Phone () _____

Child's Medical Record Number: _____ Policy Number: _____

Subscriber's Name: _____ Subscriber's Policy Number: _____

PROOF OF INSURANCE

Please note that all students who participate in sports are required to have a parent consent form and proof of insurance in order to participate.

HEALTH RECORD

Medical conditions that should be considered in case of needed emergency treatment:

Date of last Tetanus Shot _____ MUST PROVIDE A DATE. "ON FILE" OR "CURRENT" NOT ACCEPTABLE.

Any activity restrictions? _____ Explain _____

Check if your child has had the following and give details below:

____ Heart Trouble ____ Diabetes ____ Asthma ____ Epilepsy/Seizures ____ Allergies
____ Other medical conditions _____

My child is allergic to the following medications, bee stings, or has other allergic reactions: _____

My child takes medication on a daily basis _____ What kind? _____ How much? _____

How often? _____

**The North Campus is unable to distribute any medication unless a physician signed release is on file.
The South Campus will not dispense medications; but personal medication will be stored for student self-administration.
When students are off campus, Heritage is not responsible to distribute any medication.**

Mediation/Arbitration: I/We further agree that any claim or dispute arising from or related to this Emergency Treatment Authorization or the aid or treatment given to my child shall be settled by mediation and, if necessary, legally binding arbitration in accordance with the Mediation and Arbitration of Disputes Agreement as set forth in the Parent-Student Handbook and in the Parental Contract which is incorporated herein by reference and was delivered to you with your signed copy of the Parental Contract. I/We agree that this Mediation and Arbitration of Disputes Agreement shall provide the sole remedy for any dispute arising between me/us, my/our children, and the school or its employees or agents and do hereby waive, on behalf of the undersigned and my/our children, the right to file any legal action against the school or its employees or agents in a civil court or agency, except to enforce an arbitration decision.

Print Name _____ Relationship to Minor _____

Signature _____ Date _____

Print Name _____ Relationship to Minor _____

Signature _____ Date _____

Note: It is your responsibility to keep the information contained in this authorization current. In the event you need to change or update the information, you are required to complete a new original of this Emergency Treatment Authorization which may be obtained from the school office or downloaded from the school's website.

HERITAGE CHRISTIAN SCHOOL

North Campus: 17531 Rinaldi Street, Granada Hills, CA 91344 - Phone (818) 368-7071 Fax (818) 363-4455
South Campus: 9825 Woodley Avenue, Northridge, CA 91343 - Phone (818) 894-5742 Fax (818) 892-5018

RECOMMENDATION QUESTIONNAIRE

Referral by Teacher

School Year _____

Grade Entering _____

TO BE COMPLETED BY APPLICANT'S PARENT OR GUARDIAN (PLEASE PRINT OR TYPE LEGIBLY):

Legal name of applicant _____
Last First Middle

Applicant's address _____
Street City ZIP Code

(NOTE TO APPLICANT: Please provide a stamped envelope, addressed to the Administrator at the above address, as a courtesy to the person completing the remainder of this referral form.) I am aware that this is a confidential reference and I will not be able to view it and I hereby give permission for this information to be released to the above school. _____

Parent Signature

TO BE COMPLETED BY TEACHER:

The above named applicant is applying for admission into Heritage Christian School and is requesting that you provide a reference. We are a Christian institution with specific purposes and plans so we wish to admit those who will benefit the most from being here. It is essential that you be candid, fair, and accurate with your remarks and evaluation. Please mail the completed form to the above address as soon as possible.

This information will be held in strictest confidence and will be used solely by the school authorities for admissions evaluation.
WE RESPECTFULLY REQUEST THAT YOU DO NOT RETURN THIS TO THE APPLICANT.

- 1 How long have you known the applicant? _____
- 2 How well do you know the applicant? ____ Very well ____ Well ____ Casually
- 3 How is the applicant best characterized? (check all that apply) ____ Studious ____ Athletic ____ Artistic ____ Musical
____ Social ____ Religious ____ Self-disciplined ____ Teachable ____ Positive Leader
____ Other (Explain) _____
- 4 Has the applicant, to the best of your knowledge, been suspended or expelled from any school? ____ Yes ____ No
If yes, please explain _____

- 5 Has the applicant, to the best of your knowledge, been in any other trouble? ____ Yes ____ No
If yes, please explain _____

- 6 Does the applicant form friendships easily? ____ Yes ____ No If no, please explain why _____

- 7 How much supervision do you feel the applicant requires?
Behaviorally: ____ Minimal ____ Occasional ____ Frequent ____ Constant
Academically: ____ Minimal ____ Occasional ____ Frequent ____ Constant
- 8 Have you ever known the applicant to smoke, drink, or use drugs of any kind? ____ Yes ____ No
If yes, please explain _____

- 9 Have you ever had a reason to question the applicant's moral character? ____ Yes ____ No
If yes, please explain _____

- 10 How would you summarize the applicant's attendance record?
____ Seldom/never absent ____ Average absences ____ Excessive absences
- 11 How would you summarize the applicant's punctuality record?

CONTINUED ON REVERSE SIDE

12. How would you evaluate the applicant's overall influence on his/her peers?
 Very positive Somewhat positive Neutral Negative
13. How would you evaluate the applicant's personal appearance and dress?
 Neat, clean, modest, appropriate, avoids extremes Average Careless and/or inappropriate
14. Is the applicant the kind of person you would like to be a close friend for your own child? Yes No
15. How does the applicant demonstrate kindness toward others? Consistently Usually Rarely
16. How do the applicant's parents cooperate with school personnel and policies? Active/constructive
 Argumentative/critical, but cooperative Cooperative when called upon Non-cooperative
17. Please estimate the applicant's intellectual ability. (check one)
 Upper 10% Upper 25% Average Lower 25% Lower 10%
18. What degree of success in the next grade would you predict for the applicant?
 Unusually high Above average Average Below average
19. In what area(s) will the applicant need the greatest guidance academically? _____
20. We would be grateful if you would use this space for any other additional comments or pertinent information that merit consideration for this applicant. _____
21. Estimate of academic qualities (check the most appropriate box).

PLEASE FEEL FREE TO MAKE ANY ADDITIONAL COMMENTS NEXT TO THE APPROPRIATE CATEGORIES

	4 Excellent	3 Above Average	2 Average	1 Below Average	N/A	Comments
Assignment completion						
Classroom contribution						
Communication skills						
Performance on tests						
Maturity						
Motivation						
Overall performance						

22. I would recommend I would recommend, with reservations I would not recommend

23. Are you related to the applicant? If so, how? _____

Signature _____ Date _____

Name (please print) _____ Your position _____

School name _____ Phone _____

Student's current or recently completed grade level _____.

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RECOMMENDATION QUESTIONNAIRE

Referral by Principal or Counselor

School Year _____

Grade Entering _____

TO BE COMPLETED BY APPLICANT'S PARENT OR GUARDIAN (PLEASE PRINT OR TYPE LEGIBLY):

Legal name of applicant _____
Last First Middle

Applicant's address _____
Street City ZIP Code

(NOTE TO APPLICANT: Please provide a stamped envelope, addressed to the Administrator at the above address, as a courtesy to the person completing the remainder of this referral form.) I am aware that this is a confidential reference and I will not be able to view it and I hereby give permission for this information to be released to the above school. _____

Parent Signature

TO BE COMPLETED BY PRINCIPAL OR COUNSELOR:

The above named applicant is applying for admission into Heritage Christian School and is requesting that you provide a reference. We are a Christian institution with specific purposes and plans so we wish to admit those who will benefit the most from being here. It is essential that you be candid, fair, and accurate with your remarks and evaluation. Please mail the completed form to the above address as soon as possible. This information will be held in strictest confidence and will be used solely by the school authorities for admissions evaluation.

WE RESPECTFULLY REQUEST THAT YOU DO NOT RETURN THIS TO THE APPLICANT.

- 1 How long have you known the applicant? _____
- 2 How well do you know the applicant? ____ Very well ____ Well ____ Casually
- 3 How is the applicant best characterized? (check all that apply) ____ Studious ____ Athletic ____ Artistic ____ Musical
____ Social ____ Religious ____ Self-disciplined ____ Teachable ____ Positive Leader
____ Other (Explain) _____
- 4 Has the applicant, to the best of your knowledge, been suspended or expelled from any school? ____ Yes ____ No
If yes, please explain _____

- 5 Has the applicant, to the best of your knowledge, been in any other trouble? ____ Yes ____ No
If yes, please explain _____

- 6 Does the applicant form friendships easily? ____ Yes ____ No If no, please explain why _____

- 7 How much supervision do you feel the applicant requires?
Behaviorally: ____ Minimal ____ Occasional ____ Frequent ____ Constant
Academically: ____ Minimal ____ Occasional ____ Frequent ____ Constant
- 8 Have you ever known the applicant to smoke, drink, or use drugs of any kind? ____ Yes ____ No
If yes, please explain _____

- 9 Have you ever had a reason to question the applicant's moral character? ____ Yes ____ No
If yes, please explain _____

- 10 How would you summarize the applicant's attendance record?
____ Seldom/never absent ____ Average absences ____ Excessive absences
- 11 How would you summarize the applicant's punctuality record?

CONTINUED ON REVERSE SIDE

12. How would you evaluate the applicant's overall influence on his/her peers?
 Very positive Somewhat positive Neutral Negative
13. How would you evaluate the applicant's personal appearance and dress?
 Neat, clean, modest, appropriate, avoids extremes Average Careless and/or inappropriate
14. Is the applicant the kind of person you would like to be a close friend for your own child? Yes No
15. How does the applicant demonstrate kindness toward others? Consistently Usually Rarely
16. How do the applicant's parents cooperate with school personnel and policies? Active/constructive
 Argumentative/critical, but cooperative Cooperative when called upon Non-cooperative
17. Please estimate the applicant's intellectual ability. (check one)
 Upper 10% Upper 25% Average Lower 25% Lower 10%
18. What degree of success in the next grade would you predict for the applicant?
 Unusually high Above average Average Below average
19. In what area(s) will the applicant need the greatest guidance academically? _____
20. We would be grateful if you would use this space for any other additional comments or pertinent information that merit consideration for this applicant. _____
21. Estimate of academic qualities (check the most appropriate box).

PLEASE FEEL FREE TO MAKE ANY ADDITIONAL COMMENTS NEXT TO THE APPROPRIATE CATEGORIES

	4 Excellent	3 Above Average	2 Average	1 Below Average	N/A	Comments
Assignment completion						
Classroom contribution						
Communication skills						
Performance on tests						
Maturity						
Motivation						
Overall performance						

22. I would recommend I would recommend, with reservations I would not recommend
23. Are you related to the applicant? If so, how? _____
24. Did the family meet all financial obligations to the school? Yes No N/A
- Signature _____ Date _____
- Name (please print) _____ Your position _____
- School name _____ Phone _____
- Student's current or recently completed grade level _____.

International Student Admission Essays

Student Information—Student's Essays

Student—In your own words, respond to the following essay questions, introducing yourself. Keep in mind that this will be our first impression of you. Provide as much detail as possible. These essays must be written in English and signed by the student.

1. **Describe yourself. Tell about an important accomplishment of special interest. Tell about your strengths and weaknesses and likes and dislikes.** (What activities do you enjoy? Have you received awards in any of these areas? What things do you find easy or difficult? Do you like or dislike certain foods, animals, treatment of other people, etc.?)
2. **Describe your family and home.** (Introduce your family members. What are their names, ages, and occupations? What is your home like? Do you have your own room, or do you share your room with others? Where in your house do you study? How far is your home from your school? Do you drive, ride a bus or a bicycle, or walk to school?)
3. **Describe your involvement in a faith community.** (Do you go to church? How do you participate? Why do you participate?)
4. **Describe a typical day at school.** (How many subjects do you take? What are they? How long are the classes? What is your daily schedule during the school year? Start with when you wake up and discuss only one typical day's schedule.)
5. **Describe what you do in your free time.** (Do you spend time with friends or family? How do you spend your free time?)

HERITAGE CHRISTIAN SCHOOL
2016-17 INTERNATIONAL STUDENT TUITION PAYMENT INFORMATION

- A. Tuition for the 2016-17 school year is due and payable on or before July 8, 2016. In an effort to make tuition payments as convenient as possible, the school offers an option of semester payments.
- B. The international fee of \$1,500 must be paid prior to admittance. It is refundable in full only if the student is not admitted to Heritage Christian School. If the student withdraws from enrollment prior to July 1, our policy states that 50% of the fee may be refunded. After July 1, no part of the international fee is refundable.
- C. To offset banking charges and processing expenses, a \$30 fee will be assessed on all returned checks or electronic payments.

STUDENT NAME(S)

New Returning

Last Name	First Name	"English Name"	Grade		
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

WHO IS RESPONSIBLE FOR TUITION PAYMENTS?

Primary Payer's Last Name	First Name	Middle Initial	Spouse's Name (if applicable)
_____	_____	_____	_____
Agency Name	Contact Name		Contact Phone #
_____	_____		_____
Mailing Address - Street	City	State, Zip	Daytime Phone
_____	_____	_____	_____
Relationship to student(s) _____		Email address: _____	

WHO IS RESPONSIBLE FOR OTHER SCHOOL FEES ON STUDENT'S SCHOOL ACCOUNT?

Last Name	First Name	Relationship
_____	_____	_____
Agency Name	Contact Name	Contact Phone #
_____	_____	_____

PAYMENT PLAN OPTIONS (Please mark your choice.)

- Payment in Full - Must be received in the school business office on or before July 8, 2016.
- Semester Payments - First payment due by July 8, 2016. Second payment due by December 15, 2016.

Responsible Person's Signature _____ Date: _____

Responsible Person's Name (please print) _____ Relationship: _____

FOR OFFICE USE ONLY

Tuition Due: _____	Paid Regist Fee: _____	Date: _____
	Paid Intl Fee: _____	Date: _____
	Paid Sem 1: _____	Date: _____
Paid in Full: _____	Paid Sem 2: _____	Date: _____