

*Freedom in Christ, Joy in Learning!*

Dearest Future Guardian Academy Family Member,

Peace be with you and may God’s blessings ll your cup today! We are honored that you are considering becoming a part of Guardian Academy. We believe that God put this on your heart for such a time as this. The mission of Guardian Academy is to transform this and future generations through sound academic education with a distinct Biblical worldview. In a world that is fallen and led with confusion, Guardian Academy is a refuge of protection for our precious children. Here, they are safe to learn and grow with God’s Word as their foundation.

At Guardian Academy, we see each child as Psalm 139 beautifully denes them. They are carefully and lovingly sculpted by God in His image. Each little soul is a unique glimpse at our Heavenly Father, and comes with their own special personalities and talents. We honor that perfect creation in each of them by seeking out and nurturing their strengths, building them up where they need help, and developing a love for learning and a sense of compassion and community in their hearts.

Our sincere hope at Guardian Academy is that our students will become passionate lifelong learners who are bold in their faith and secure in their eternity. They will go forth from our school ready to transform the world around them for God’s glory in their homes and in their careers. We are so excited to meet and mentor your child! No doubt your child will become a valuable member of our family. As we celebrate each accomplishment and discover the path for each student, we anticipate a joy they will carry with them that spills over onto everyone around them. You will begin to experience the benefits of this at home and perhaps be inspired in your daily walk as well. You are already in our hearts and prayers as you make this important decision to enroll your students with Guardian Academy. We look forward to seeing you soon!

***Meet the Staff!***



Michelle Dover – Principal/Teacher Jessica Robinson – Teacher

[michelle@guardianacademyok.com](mailto:michelle@guardianacademyok.com) [jessica@guardianacademyok.com](mailto:jessica@guardianacademyok.com)

\*Not pictured Amanda Love- Bookkeeper/ Admin Amanda@guardianacademyok.com

When you have completed this enrollment packet and are ready to submit it, call or email us to set an appointment for an in-person interview with our staff. Then mail to 764 S. 145th E Ave. Tulsa, OK 74108 or email to [Info@guardianacademyok.com](mailto:Info@guardianacademyok.com)

*We are glad to answer any questions and assist you in your education journey! Please email us @* [**info@guardianacademyok.com**](mailto:info@guardianacademyok.com)or by calling our office at (918) 800-1264.

# \*Please return Pages 3-8

# APPLICATION FOR ENROLLMENT

Application Date \_\_\_\_\_\_\_\_\_ Applying for Grade\_\_\_\_\_\_\_\_\_\_ School Year 2023 / 2024

**Method of Payment**: Payment in Full / Monthly Payments (circle one)

**Student Information**

Name

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Last), (First) (Middle)

Nickname\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Age\_\_\_\_\_\_\_Gender\_\_\_\_\_\_\_ Birth Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Last School Attended\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last Grade Completed \_\_\_\_\_\_\_\_\_

**FAMILY INFORMATION**

Father/Guardian\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employer\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Position\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Business/Cell \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mother/Guardian\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employer\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Position\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Business/Cell \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Telephone Number other than those already listed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Marital Status of parents/guardians:** Married / Divorced / Remarried / Separated / Widow/ Widower / Single

**If divorced, who has legal custody?** Father / Mother / Joint / Other (Explain):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(***Copy of legal custody document must be in student file.)***

Children in family of school age:

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Age\_\_\_\_\_\_\_\_\_

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Age\_\_\_\_\_\_\_\_\_

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Age\_\_\_\_\_\_\_\_\_

**RELIGIOUS INFORMATION**

Church Attending\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Pastor\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*PLEASE CIRCLE THE APPROPRIATE ANSWER*

Father, born-again Christian (John 3:3-5) **(Yes / No)**

Mother, born-again Christian (John 3:3-5) **(Yes / No)**

Family Practice – Daily Devotions? **(Yes / No)**

Family Practice – Grace at Meals? **(Yes / No)**

Has the applicant ever made a profession of faith in Christ? **(Yes / No)**

Church Attendance: **Regular** (3-4 Weeks a Month) **Occasional** (Once Per Month) **Seldom**

**Applicant:** Regular / Occasional / Seldom

**Father:** Regular / Occasional / Seldom

**Mother:** Regular / Occasional / Seldom

**We request that you consider the following items and respond to them for our mutual understanding:**

A. How do you provide spiritual training for child(ren) in the home?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

B.What would your spiritual and academic goals be for the training and development of your child(ren) as individuals? This helps us better understand and be on the same page as the parent/guardian.

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C.What made you choose Guardian Academy to partner with for your child’s education?

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**SCHOLASTIC INFORMATION**

Has this student ever been suspended, dismissed, or refused admission to another school? **(Yes / No) If yes, explain:** (Previous disciplinary action does not affect our decision to accept your application. We just want to know what you have experienced before.)

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Please indicate if any of the following apply to the previous school, to the home, or to other instances:

**Behavioral and/or disciplinary problems / Placed on probation**, **Explain:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Has the student ever skipped a grade?** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Repeated a grade?** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If so, please Explain

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

When calling your previous school, what comment could we anticipate?

**(Good Student / Discipline Problem / Learning Disabilities)**

Is there anything you feel we should know about your child in order to teach or discipline him/her effectively? Explain:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Does the applicant have any mental, emotional or physical handicaps that may affect his/her activities or progress that should be known? **If yes, please explain**:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Please indicate academic level of student’s previous work: **Excellent / Good / Average / Poor**

**MEDICAL INFORMATION**

Family Physician \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Hospital Preferred \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Permission to use: Tylenol \_\_\_ Advil \_\_\_ Neosporin \_\_\_ None \_\_\_

Insurance Company’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Insurance Company’s Policy Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Insured’s Name In Case of Emergency \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Contacts Name and Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Does the child have any physical disabilities or allergies? Explain:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are there any diagnosed learning disabilities such as dyslexia, ADD, ADHD, etc., that require special treatment and/or programs? Yes/ No, If yes, explain:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Is your child on medication? Yes/ No, If yes, please list medications and explain usage:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Permission and Medical Release**

I hereby give permission to Guardian Academy staff to obtain any necessary medical treatment or hospital care for the above mentioned child in the event of an emergency. I understand that all reasonable safety precautions will be taken at all times by the Guardian Academy staff. I also understand that if medical attention is needed, every reasonable attempt will be made to notify me and/or the emergency person.

Signature of Parent or Guardian \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_

**CONSENT FOR RELEASE OF PERSONALLY IDENTIFIABLE INFORMATION**

*For the purpose of this* *release, personally identifiable information shall be limited to the student’s name, photograph, video, yearbook, school website, or newsletter.*

I, the undersigned, \_\_\_ do \_\_\_ do not give permission to Guardian Academy staff to release personally identifiable information from the above named student for the sole purpose of use in the class photograph, school or local newspaper or other media, school programs, personal or class recognition, involvement in school activities, as well as approved fundraising and support requests from parent organizations.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature of Parent/Guardian \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date

**Tuition and Fees:**

|  |  |  |
| --- | --- | --- |
| Fee: | Cost: | Frequency: |
| Application Fee | $25 | One Time Only Fee |
| Tuition | $375 | Monthly on the 1st of Each Month |
| Yearly Tuition | $4500 | Yearly Tuition Due on Sept.1st |
| Enrollment Fee | $200.00 | 1 Time Yearly Fee for Curriculum |

**\*Application Fee is due when application is submitted. Please Send to Cash App $GuardianAcademy**

**\*\*Late Fee will be charged after the 5th of the month ($25).**

**\*Note:**

**Enrollment Fee due 2 weeks after acceptance email.**

### MISSION OF GUARDIAN ACADEMY

The mission of Guardian Academy is to transform this and future generations through sound academic education with a distinct Biblical worldview. To instill a passion for learning and thirst for truth in both academics and in life. To model and teach love for one another with a sense of compassion and community. To be a refuge for students where they can rest in the safety and comfort of God's Holy Word as they learn and grow.

**Guardian Academy Statement of Faith**

**The Bible**

The Bible is the infallible, unchangeable Word of God. (Rev. 22:18-19)

**Eternal Life**

Accepting and living for Jesus Christ as your Lord and Savior is the only way to receive eternal life in heaven. (John 3:16-17)

**The Trinity**

God is three united persons in one; The Father, The Son, The Holy Spirit. (Matthew 28:18-20)

**The Holy Spirit**

The Holy Spirit comes to live in us when we accept Jesus Christ (2 Cor 5:17), but there is also a separate outpouring of the Holy Spirit that is available to all believers. (Acts 2:1-4)

**Water Baptism**

Water baptism is not a requirement for eternal life, it is simply an outward expression of an inward change. (Acts 22:15-16)

**Identity**

All humans are created in the image of God and their identity comes solely from God’s Word, not worldly constructed definitions and ideology. (Genesis 1:27, John 1:14)

**Morality**

God’s Word is the final authority for all moral goodness with all humans, including the sin of homosexuality and sex outside of marriage. Within our school, all sin will be referred to as sin and viewed as something to only be discouraged and never celebrated or excused. (Psalm 145, Matthew 22:36-40, I Corinthians 6:9

## PARENT’S CODE

1. I will pray earnestly for Guardian Academy.
2. I will cooperate fully in the educational functions of Guardian Academy doing my best to make Christian education effective in the life of each of my children so that he or she may love and serve the Lord Jesus Christ all of his or her life. I will not take up the offense of my child.
3. I will pay all of my financial obligations to Guardian Academy on or before the date due. If I am unable to pay on time, I will notify Guardian Academy in advance,
   1. Giving a reasonable explanation for the delay, and
   2. stating when payment can be made.
4. I will attend meetings and parent functions of the school regularly and will make every effort to have my child present at all school programs.
5. If I become dissatisfied with the school in any respect, I will seek to resolve the matter with the person or persons most directly involved rather than to spread criticism or hold a negative attitude in my heart. I will go to the teacher first, the School Principal second, School Board last.
6. I will seek the advancement of Guardian Academy in all areas. I will speak positively about the school in the community and support all school efforts to accommodate my child.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date

**\*Please bring this page to Interview**