

# Cross Lanes Christian School

5330 Floradale Drive, Cross Lanes, WV 25313 (304) 776-5020 FAX: (304) 776-5074

A Ministry of Cross Lanes Bible Church

## Parent Information

**Dear Parent:**

**Thank you for your interest in Cross Lanes Christian School. We believe that children are a heritage of the Lord, and He has given the responsibility of educating children to the parents. Cross Lanes Christian School is dedicated to assisting parents in their God-given responsibility of educating their children by providing a high-quality spiritual and academic program while encouraging children to be a productive member of society and to live obedient, Christ-honoring lives.**

**We provide a strong academic program which challenges children to reach their fullest potential. It is our desire to provide both curricular and instructional systems that will enable any student to achieve at levels that will prepare him/her to enter the next level of education chosen, whatever the academic rigor demands. Our teachers are certified, and we are fully accredited through the American Association of Christian Schools.**

**Cross Lanes Christian School provides a structured atmosphere which is conducive to the growth and development of each child. Our students are happy students who welcome the impact from caring teachers and the friendly interaction with their classmates. Many students leave school each day saying, "I love going to Cross Lanes Christian School."**

**Thank you for taking the time to review our information and complete the enclosed application forms. If you have any questions, or if you are interested in enrolling your child, please feel free to contact our office and schedule an appointment with our Administrator. (304-776-5020)**



**Cross Lanes Christian School**  
**Building Lives on a Firm Foundation**

# Cross Lanes Christian School

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A ministry of Cross Lanes Bible Church

## School Profile

- Description:** Cross Lanes Christian School is a ministry of Cross Lanes Bible Church. It is located near the capital city of West Virginia – Charleston. Cross Lanes is a private, largely college preparatory, co-educational Christian school. Kindergarten for four and five-year olds and grades 1-12 are offered.
- Purpose:** The general goals for Cross Lanes Christian School include: (1) provision of a spiritual and academic program as a complement to the work of the Christian home; (2) assistance to the local churches represented in the student body by challenging the personal lives of saved youth; (3) encouragement for young people as they move toward fruitful service for the Lord Jesus Christ; and (4) offering the message of the gospel to those who may not have received the Lord Jesus Christ.
- History:** Cross Lanes Christian School was organized in 1973 by Cross Lanes Bible Church under the leadership of Pastor James Efaw. The first senior class was graduated in 1980. Since that first graduating class, Cross Lanes Christian School has graduated hundreds of seniors as ambassadors of our Lord. Our graduates are a great representation of the excellence in education that CLCS has maintained. From doctors, lawyers, pastors, and law enforcement to politics, alumni of CLCS agree that their time at Cross Lanes helped equip them to better impact the world.
- Affiliations:** Cross Lanes Christian School is affiliated with the West Virginia Christian Education Association and the American Association of Christian Schools. As a member of each association, the school participates in the programs and activities offered by each association.
- Academics:** Cross Lanes Christian School seeks to provide a largely college preparatory curriculum within a structured but loving environment. A full array of courses are offered within each of the areas of the basic skills, preparing graduates for college, for the military, for technical education, and for living a sanctified life for the Lord Jesus Christ. Students are challenged and held accountable both spiritually and academically. A broad selection of electives is offered including the fine arts.
- Graduate Profile:** Virtually all Cross Lanes Christian School graduates enroll in institution of higher learning, including four-year colleges and universities. Many attend Christian colleges, some in preparing for a life of ministry and others preparing for life as a Christian in the secular world. Many receive scholarships – some for academics and some for athletics. Graduates have attended West Virginia University, Marshall University, West Virginia State College, Bob Jones University, Appalachian Bible College, University of Charleston, Cedarville College, Tennessee Temple University, Clearwater Christian College, West Point Academy, Air Force Academy, Pensacola Christian College and many others. The composite ACT score for graduates is above the state average for core courses at the state level.
- Standardized Testing:** As a member of the American Association of Christian Schools, Cross Lanes Christian School participates in the standardized testing program using the Stanford Achievement Test from K-5 through Grade 10. Average scores consistently place CLCS among the top schools in the nation. The Otis-Lennon School Ability Test is given at grades 1, 4 and 7. The PSAT and ASVAB are given to all juniors.
- School Year:** The academic year consists of 180 days of instruction divided into four nine weeks grading periods. The school day for the secondary program has eight class periods, each of which is about 45 minutes in length.
- Graduation Requirements:** Cross Lanes Christian School meets the graduation requirements of the West Virginia School Board.
- Faculty:** All full-time faculty of Cross Lanes Christian School must hold at least a bachelor’s degree in the field in which they teach. Several have a significant number of credit hours beyond the master’s degree. Half of the high school faculty are men. All are committed to the Lord Jesus Christ and active in a local church. The average tenure at Cross Lanes is eight (8) years.
- Technology and Education Resources:** Cross Lanes Christian School has a science laboratory suitable for teaching advanced courses. Our computer laboratory is used for keyboarding skills in the elementary grades thru advanced Microsoft Office programs in the high school. On-line grades and student assignments provide excellent teacher-parent communication.
- Discipline:** The secondary school is on a merit-demerit system. Good behavior is recognized and unacceptable behavior will result in the issuance of demerits. Students who consistently exhibit unacceptable behavior will face ultimate dismissal from the school. Students are expected to accept the authority of the staff and the administration. The school is drug-free and free of violence. There is no dropout problem. Dress codes for both boys and girls are observed.
- Values:** Cross Lanes Christian School teaches the values of the Bible to govern the personal lives within the family and other social settings. Traditional cultural values are taught and students are encouraged to take an interest in civic and legislative affairs as good citizens.
- Non-Discrimination:** Cross Lanes Christian School admits students of any race, color or national origin to all rights, privileges, programs and activities generally available to others.
- Finance:** Cross Lanes Christian School does not receive any public funds for the operation of the school program. Rather, the program is financed largely through the payment of tuition by parents and through charitable donations to the school from individuals. The school saves the State of West Virginia over \$2,000,000 annually.
- Campus:** Cross Lanes Christian School consists of four classroom buildings and a regulation-size gymnasium. The school is situated on a forty-five (45) acre gated campus in Cross Lanes, West Virginia. The school operates a closed campus atmosphere. Visitors must first report to the school office and students may not leave the campus without parental permission.
- Athletics:** Cross Lanes Christian School offers opportunities for students in grades 6-12 in multiple sports including soccer, baseball, golf, basketball, track & field, and volleyball. Cross Lanes Christian School competes with both private and public schools in all sports on a regular basis. All extracurricular activities are held to the same high standard and mission of the school overall.
- Administration:** Cross Lanes Christian School operates as a ministry of Cross Lanes Bible Church which is lead by the Senior Pastor and the Official Board. Cross Lanes Christian School leadership is provided by the administrator and an appointed school board.

*Cross Lanes Christian School*

APPLICATION  
FOR  
ADMISSION  
PARENT QUESTIONNAIRE

All information must be provided for this application to be processed.

**Version 2011 11-30-12**

Date Received - \_\_\_\_\_

Application Fee \$ \_\_\_\_\_ Ck# \_\_\_\_\_

Registration Fee \$ \_\_\_\_\_ Ck# \_\_\_\_\_

Cash \_\_\_\_\_ Date \_\_\_\_\_

Interview: \_\_\_\_\_

## REQUIRED DOCUMENTATION TO PROCESS APPLICATION

Please attach copies of the following information with this application. Your application cannot be processed until all information is submitted with the application fee.

1. Application Fee
2. Certified copy of birth certificate
3. Immunization records
4. Most recent achievement test results
5. Copy of most recent report card,
6. For students entering 10<sup>th</sup>-12<sup>th</sup> grade, please attach a copy of a report card from each high school year.

**Date of Application**\_\_\_\_\_

Full Legal Name \_\_\_\_\_ Goes By \_\_\_\_\_

Ad-  
dress \_\_\_\_\_  
First Middle Last City State Zip

Age as of Sept. 1<sup>st</sup> \_\_\_\_\_ Sex \_\_\_\_\_ Place of Birth \_\_\_\_\_

Date of Birth \_\_\_\_\_ Social Security Number \_\_\_\_\_

Who does the student reside with? ☐Mother ☐Father ☐Step-Mother ☐Step-Father ☐Grandparents ☐Other

## FAMILY

1. ☐ Natural Father      ☐ Father      ☐ Other \_\_\_\_\_

Name \_\_\_\_\_

Marital Status:   ☐ Married   ☐ Widowed   ☐ Separated   ☐ Divorced   ☐ Remarried   ☐ Single

Social Security # \_\_\_\_\_ Home Phone \_\_\_\_\_ Pick-Up Allowed? ( ) Yes ( ) No

Address	Cell Phone
---------	------------

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

Employer	Phone	E-Mail
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Church \_\_\_\_\_ Pastor \_\_\_\_\_ Church # \_\_\_\_\_ Attend Regularly? ( ) Yes ( ) No

- 2      ☐ Natural Mother      ☐ Mother      ☐ Other

Name \_\_\_\_\_

Marital Status:   ☐ Married   ☐ Widowed   ☐ Separated   ☐ Divorced   ☐ Remarried   ☐ Single

Social Security # \_\_\_\_\_ Home Phone \_\_\_\_\_ Pick-Up Allowed? ( ) Yes ( ) No

Address	Cell Phone
---------	------------

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

Employer	Phone	E-Mail
----------	-------	--------

Church \_\_\_\_\_ Pastor \_\_\_\_\_ Church # \_\_\_\_\_ Attend Regularly? ( ) Yes ( ) No

3. Do you have any other children enrolled at CLCS? \_\_\_\_\_ List names and grades \_\_\_\_\_

4. Who has legal custody of the child for whom application is made? \_\_\_\_\_

**A current copy of any legal documents must be kept on file in the office. It is the sole responsibility of the parent to provide the school with any changes or updated legal documents.**

5. Name of person responsible for tuition and fees:



# STUDENT QUESTIONNAIRE

This page should be filled out by all students entering the 6<sup>th</sup>-12<sup>th</sup> grades.  
The information should be hand written in blue or black ink.

1.

Do you consider yourself a dedicated student regarding homework and study habits? \_\_\_\_\_ Briefly explain your answer.
2.

Describe your hobbies & extra-curricular activities. \_\_\_\_\_
3.

Briefly tell us about any jobs you do in or outside of the family. \_\_\_\_\_
4.

Salvation Experience: Relate briefly your salvation experience. You may use scripture. \_\_\_\_\_
5.

Christian walk: What in your life indicates that you are walking with the Lord? \_\_\_\_\_
6.

Please state why you wish to attend CLCS (to be completed by new student in 7th - 12th grade in their own handwriting).

## STATEMENT OF FAITH

We believe the Bible, both the Old and the New Testaments, is verbally inspired by God and inerrant in the original writing and is God’s final word to humanity for faith and practice.  
We believe in one eternal and holy God who exists as three persons -- God the Father, Jesus Christ the Son, and the Holy Spirit.  
We believe in the creation of the world by God in six literal days by the word of His mouth.  
We believe that man was created in the image of God. However, because man disobeyed God, all men are born with a sinful nature which alienates them from God and condemns them to eternal death.  
We believe God sent His Son, Jesus Christ, to be born of a virgin, to live a sinless life, to die a cruel death as a sacrifice for the sins of all mankind, and to have victory over death, and that He now lives in Heaven interceding for believers.  
We believe that all who place their trust in Christ are justified in the eyes of God by the blood of Jesus as the only payment for their sins. Acceptance of His gift of salvation is the only basis for a personal relationship with God and salvation from eternal death.  
We believe God sends His Holy Spirit at salvation to live within each who accepts Christ as his Savior, to convict of sin and to guide him in accordance with His Word.  
We believe in the imminent return of our Lord and Savior, Jesus Christ.  
We believe in the bodily resurrection of the just and the unjust -- the just to eternal blessing with the Lord and the unjust to everlasting punishment.

## LIFESTYLE STATEMENT

Lifestyle Statement Cross Lanes Christian School is a uniquely religious, educational institution that seeks to provide a quality education in a distinct Christian environment. One of the goals of Cross Lanes Christian School is to work with parents and guardians to train Christian young men and women to be salt and light in their communities. Cross Lanes Christian School believes that the Bible is the inspired Word of God and sets forth absolute truth by which Christians are to live. Cross Lanes Christian School expects and requires that both students and parents will support the school in its distinct mission and in its Biblical beliefs. In relying on the teachings of Scripture, Cross Lanes Christian School believes that the Bible prohibits sexual immorality of any type, including but not limited to pornography, homosexuality, or any other sexual activity outside the marriage of one man and one woman. On those occasions in which a particular home or student is acting counter to or in opposition to the Biblical beliefs and lifestyle that the school teaches, the school reserves the right, in its sole discretion, to refuse admission to an applicant or to discontinue enrollment of a current student. This includes, but is not limited to, living in, condoning, or supporting any form of sexual immorality; practicing or promoting a homosexual lifestyle or alternative gender identity; or otherwise having the inability to support the moral principles of the school as stated throughout the handbook. 1 Thessalonians 4:1-8; Colossians 3:1-8; Genesis 2:18-25; Galatians 5:16-21; Acts 15:29; Ephesians 5:1-21 ; Revelation 21:8; Judges 19:22; Genesis 19:1-38; Hebrews 13:1-25; Jude 1:7; Mark 10:6-9; 1 Timothy 1:10-11; 1 Corinthians 7:2; Leviticus 20:13-15; Romans 1:32; Romans 1:26-28; 1 Corinthians 6:9-11; Leviticus 18:22. Approved by CLCS Board (7/16/14)

**Due to the limited scope of our school ministry to meet the needs of young people with serious behavioral needs, Cross Lanes Christian School has established a zero tolerance policy for specific behaviors. All students must abstain from involvement with tobacco, drugs, alcohol, sexual immorality and profane language both on and off the school campus. In addition, we request that students submit to the authority of their parents, teachers, and school officials as given to them by the Lord. This is a committed lifestyle, not just during school hours, but each day of the year. Violations are considered as breaking a firm commitment that each student makes when voluntarily choosing to attend CLCS. Students will be expected to exert a positive influence in their social relationships and participate in the daily activities of school as a responsible member of the CLCS student body.**

EDUCATIONAL BACKGROUND

List below all schools your child has attended (include home schooling).

Name of School	Address (Street, City, State, Zip)	Enrollment Dates (Month of Year)	Grade

Reason for leaving last school.

Has any grade been repeated? \_\_\_\_\_ If yes, list: \_\_\_\_\_

Reason \_\_\_\_\_

Has applicant had any discipline problems or been suspended or expelled? \_\_\_\_\_

If yes, explain: \_\_\_\_\_

Has applicant ever been arrested? \_\_\_\_\_

If yes, explain: \_\_\_\_\_

Does applicant have any physical, emotional, or mental problems or handicaps that may affect activities or progress? \_\_\_\_\_

If yes, please explain: \_\_\_\_\_

Has applicant ever taken any type of psychiatric, psychological or educational testing other than the regularly administered school achievement tests? \_\_\_\_\_ If yes, explain: \_\_\_\_\_

Has applicant ever been seen by a psychologist or psychiatrist? \_\_\_\_\_ If yes, explain: \_\_\_\_\_

Has applicant ever been enrolled in Behavior Modification program in a public or private school ? \_\_\_\_\_

Has applicant been diagnosed as being A.D.D. or A. D. H. D.?

Has applicant ever received any tutoring or therapy? \_\_\_\_\_ Explain: \_\_\_\_\_

We heard about this school by: ( ) Friend ( ) Radio ( ) Newspaper ( ) Other \_\_\_\_\_

Please state clearly why you wish to send your child to Cross Lanes Christian School \_\_\_\_\_

Parent(s) Personal Testimony: Please briefly describe your salvation and personal relationship with the Lord.

Cross Lanes Christian School

Policy Information

Please carefully read the following information.

APPLICATION POLICY

- The application must be complete in order to be submitted.
- Notification of status for the next school year will be made after March 12th.

ACCEPTANCE POLICY

- CLCS reserves the right to accept or deny admission based on the information provided in the completed application packet.
- Notification of acceptance is usually made 7-10 working days after application process is complete.
- Required paperwork and medical forms (current school physical & immunization record) must be on file before the student will be admitted to class.

I have read the above policies and agree to abide by these policies and the policies outlined in the Parent / Student Handbook of Cross Lanes Christian School.

X

Parent / Legal Guardian Signature

Date

TESTING POLICY

- Test dates will be scheduled according to availability.
- An entrance/readiness test may be required for grades K5 - 12<sup>th</sup>.
- The Stanford Achievement Test is used at CLCS.

FINANCIAL POLICY

- All families are expected to abide by the financial policies detailed in the Parent/Student Handbook.

FERPA

- CLCS abides and adheres to FERPA general guidelines for students

Application and Reservation fees are non-refundable

How Did You Hear About Our School?

- ☐ Sibling @ School
- ☐ Friend
- ☐ CLCS website
- ☐ School Family
- ☐ Other Website
- ☐ Radio
- ☐ Newspaper
- ☐ Phone Book
- ☐ Flyers
- ☐ Bill Board
- ☐ Other \_\_\_\_\_

Required Documentation from Applicant for Enrollment	**** ADMISSIONS CHECKLIST **** For Office Use ONLY
<div>Step 1 – Application</div> <div><div><div>_____ Application</div><div>_____ Application Fee</div><div>_____ Statement of Cooperation</div><div>_____ Pastor Recommendation</div><div>_____ Records from Prior School</div><div><div>___ copy of latest report card</div><div>___ students entering 10<sup>th</sup>-12<sup>th</sup> grade</div><div>attach a copy of each high school year</div></div><div>_____ Certified Copy of Birth Certificate</div><div>_____ Immunization Records</div><div>_____ Medical Release / Health Emergency Contact Information Form</div><div>_____ Family Information Sheet</div><div>_____ Transportation Form (if applicable)</div><div>_____ In-Lieu of Transportation (if applicable)</div></div></div> <div>Step 2 - Testing</div> <div>Testing Date/Time_____</div> <div>Waived <input type="checkbox"/> _____</div> <div>Step 3 - Interview</div> <div>Date/ Time: _____</div> <div>Step 3 - Evaluation</div> <div><div>_____ Application Accepted</div><div>_____ Application Not Accepted</div></div>	<div>Conditions: _____</div> <div><div>Cross Lanes 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 in the administration of its educational policies, admission policies, scholarships, athletic and other administrative programs.</div></div>

# Cross Lanes Christian School

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A Ministry of Cross Lanes Bible Church

## Statement of Cooperation For School Year \_

Parent / Guardian Name: \_\_\_\_\_ Student Name: \_\_\_\_\_

Student Name: \_\_\_\_\_ Student Name: \_\_\_\_\_ Student Name: \_\_\_\_\_

1. I understand that, as parent or guardian, I am ultimately responsible before God for the kind of education provided for my Child(ren). Yet another may be authorized to help me carry out that task. I understand that the ministry of Cross Lanes Christian School is agreeing to aid in that task of education by accepting my child(ren) for enrollment. I understand that attendance at CLCS is a privilege and not a right. I do commit myself to being active in the process of education for my child(ren) and will show great interest and involvement in the life of my child(ren) during this period of enrollment. I will be faithful to this task.
2. I will cooperate fully with the school in its endeavor to maintain a quality spiritual and academic environment for my child. I promise to attend all meetings which the school deems necessary for the betterment of my child and the educational process.
3. I understand that CLCS is a ministry of Cross Lanes Bible Church and operates under the statement of faith adopted by that ministry. I have read the statement of faith and understand that this statement of faith will be taught exclusively and without apology. Furthermore, I understand that opinions opposed to this statement of faith may not be publicly expressed in the school setting.
4. I understand that a student or parent who displays a negative, uncooperative spirit, becomes verbally or physically abusive, or threatens a faculty or staff member, may be asked to withdraw from CLCS.
5. I understand that any student who is found to be out of harmony with the academic, spiritual, or general conduct of the school may be invited to withdraw. I have read and understand the Parent/Student Handbook requirements and will, to the best of my ability, abide and support these rules and regulations with a Christian attitude while enrolled at CLCS.
6. The undersigned hereby consent to the use of my name, likeness, picture, photograph or quotation in all forms and manner by Cross Lanes Christian School for educational, instructional, advertising, or promotional purposes (including yearbooks, brochures and/or web pages, whether in printed or electronic form) without consideration to the undersigned, and I hereby waive any right to inspect or approve the final version or any copy that might be used in connection therewith.
7. I agree to the financial policies of CLCS and I understand that payments for tuition and fees will be made by the first of each month and if late, my account will be billed a late charge of \$20. If my payment is past due for more than 45 calendar days my child may be withdrawn from school until my account is made current.
8. My child is permitted to take part in all school activities, including but not limited to sports, and school-sponsored field trips. I absolve the school and church from liability to me or my child in case of accident or injury to my child while on campus or during any school-sponsored outing.
9. As parents, we agree, in accordance with the principle of Matthew 18:15-17 to bring any and all questions and criticisms to the person most directly involved. If we have a question about a specific classroom action or procedure, we will contact the appropriate teacher. If satisfactory conclusion is not reached, we will then contact the Administrator.

**Please sign you have read the Cross Lanes Christian Statement of Cooperation.**

X \_\_\_\_\_  
*Parent Signature*

X \_\_\_\_\_  
*Student #1 Signature*

X \_\_\_\_\_  
*Sibling #2 Signature*

X \_\_\_\_\_  
*Sibling #3 Signature*

X \_\_\_\_\_  
*Sibling #4 Signature*

## Sycamore Education Subscription Agreement For School Year \_

(Sycamore Education is our online school management system connecting school to home by means of a secure Internet connection )

Parent E-Mail Address(s): \_\_\_\_\_

Additional E-Mail Address(s): \_\_\_\_\_

**Please initial you have read the CLCS Sycamore Subscription Agreement:**

☐ \_\_\_\_\_  
**Parent Initial**

*Subscribers to this service agree to the following:*

Our Agreement :To provide a private, secure e-mail address that is only accessible by the parents/guardians of the students.

- To provide us with a private, secure e-mail address that is only accessible by the parents/guardians of the students.
- To maintain the integrity of this service by not sharing passwords or other access privileges. In the event that a new password is needed, contact the school office and we will issue a new password.
- To avoid unauthorized usage or hacking (which will result in suspension of a family’s Sycamore Education privilege).
- To refrain from using this service to address matters of conflict. Using this service to criticize, disparage, belittle, degrade, or disgrace an individual or school official, will result in immediate suspension of service for the subscriber.
- To notify the school office of any known errors in the data presented.
- If any of the following is outstanding or delinquent, your access to this service maybe suspended: lunch account, athletic fee, lost library book, library fee, attendance forms
- If your account is in arrears 45 days or more, (or is not current at the end of May), your access to this service may be suspended.
- Sycamore Education service is available to all CLCS families. This service is included in your student activity fee.

Violation of any part of this agreement may result in termination of a family’s privilege of using Sycamore.

**I understand that in signing below, I am agreeing to accept and abide by the rules and philosophy of Cross Lanes Christian School contained in the Statement of Cooperation and Sycamore Subscription Agreement.**

X \_\_\_\_\_  
**Parent / Guardian Signature**

**DATE:** \_\_\_\_\_

# Cross Lanes Christian School

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## Student Emergency Health Information for School Year

### MEDICAL RELEASE

### THIS FORM MUST BE NOTARIZED

To: Emergency Personnel

I hereby give my consent to any emergency medical personnel to administer necessary treatment to my child(ren),

\_\_\_\_\_, in the event of an emergency at which time I cannot be reached. I give consent to transport by ambulance if the situation warrants it.

I hereby grant permission for my son/daughter to participate in any and all sports and all extra-curricular activities, and school-related activities including recess, field trips, or other school-sponsored trips away from the school premises. I waive, release, absolve, and hold blameless Cross Lanes Bible Church and Cross Lanes Christian School and their administrators, teachers, supervisors, physical education directors, managers, persons transporting my child to and from school activities and other participants, from any claim arising out of an injury or sickness to my child.

I authorize the personnel at Cross Lanes Christian School to administer first aid to my child in the event of their involvement in an accident, injury or sickness.

Student Name \_\_\_\_\_  
Date of Birth \_\_\_\_\_  
Grade Entering \_\_\_\_\_

A

Student Name \_\_\_\_\_  
Date of Birth \_\_\_\_\_  
Grade Entering \_\_\_\_\_

B

Student Name \_\_\_\_\_  
Date of Birth \_\_\_\_\_  
Grade Entering \_\_\_\_\_

C

Student Name \_\_\_\_\_  
Date of Birth \_\_\_\_\_  
Grade Entering \_\_\_\_\_

D

State of West Virginia

On the \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me  
Came \_\_\_\_\_, to  
me known to be the individual described in and who executed the same.

NOTARY PUBLIC

SIGNATURE OF PARENT OR LEGAL GUARDIAN

DRIVERS LICENSE#

My Commission Expires: \_\_\_\_\_

### CONTACT INFORMATION

Please mark check box ☐ beside each phone number below you DO NOT wish to be on our School/Cast Emergency Alert System.

Custodial Parent/Guardian \_\_\_\_\_ Relationship \_\_\_\_\_  
Address \_\_\_\_\_

☐ Home#: \_\_\_\_\_ ☐ Work#: \_\_\_\_\_ ☐ Cell#: \_\_\_\_\_ ☐ Other # \_\_\_\_\_

Place of Employment \_\_\_\_\_ Phone # \_\_\_\_\_

Second Parent/Guardian \_\_\_\_\_ Relationship \_\_\_\_\_  
Address \_\_\_\_\_

☐ Home#: \_\_\_\_\_ ☐ Work#: \_\_\_\_\_ ☐ Cell#: \_\_\_\_\_ ☐ Other # \_\_\_\_\_

Place of Employment \_\_\_\_\_ Phone # \_\_\_\_\_

Names and Grades for Brothers and Sisters \_\_\_\_\_

Email Address: \_\_\_\_\_

### EMERGENCY INFORMATION:

Child's Doctor \_\_\_\_\_ Office Phone \_\_\_\_\_

Child's Dentist \_\_\_\_\_ Office Phone \_\_\_\_\_

Hospital Preference \_\_\_\_\_

Name and Number of Medical Insurance \_\_\_\_\_

**PICK-UP/ EMERGENCY LIST:** Please list the people who may be contacted in the event a parent cannot be located. Only those listed below will be permitted to pick up your child in case of illness or emergency. **It is the sole responsibility of the parent / legal guardian to notify the school of any changes to this list.**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Home #: \_\_\_\_\_ Work #: \_\_\_\_\_ Cell #: \_\_\_\_\_ Other # \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Home #: \_\_\_\_\_ Work #: \_\_\_\_\_ Cell #: \_\_\_\_\_ Other # \_\_\_\_\_

PLEASE COMPLETE BOTH SIDES OF THIS FORM

2014\_01\_15

STUDENT EMERGENCY CONTACT INFORMATION & MEDICAL RELEASE



# Cross Lanes Christian School

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## Student Emergency Health Information For School Year

### MEDICAL HISTORY

*Note below if Health Information is for A, B, C, D student from OTHER SIDE OF FORM **OR** request additional forms for each student.*

Date of last Tetanus (lockjaw) shot: \_\_\_\_\_

Previous hospitalization? ( ) No ( ) Yes- If yes, why? \_\_\_\_\_

Is the child under the care of a doctor? ( ) No ( ) Yes -If yes, for what reason? \_\_\_\_\_

Current Health Issues: (Such as diabetes, seizures, asthma ,etc.) \_\_\_\_\_

Any history of convulsions? ( ) No ( ) Yes- If yes, please describe \_\_\_\_\_

Are there any special instructions that we should know about? ( ) No ( ) Yes- If yes, please list \_\_\_\_\_

Explain \_\_\_\_\_

Health History: (Include past surgeries, serious illnesses, head injuries, etc.) \_\_\_\_\_

Medications: AT HOME \_\_\_\_\_

AT SCHOOL \_\_\_\_\_

**NOTICE:** No medication will be dispensed without a completed “Medication Administration Form” (i.e. Tylenol, Motrin, etc)

Allergies: (Including those to insects, food, medications, environmental, etc.) \_\_\_\_\_

Reaction? \_\_\_\_\_ EpiPen? Yes \_\_\_\_\_ No \_\_\_\_\_

Restrictions: Describe any necessary restrictions or limitations: \_\_\_\_\_

Vision: Does your child wear: glasses? \_\_\_\_\_ contacts? \_\_\_\_\_ Describe any eye/vision problems: \_\_\_\_\_

Eye Doctor (if student has one) \_\_\_\_\_ Phone # \_\_\_\_\_

Hearing: Describe any hearing problems: \_\_\_\_\_

Ear Doctor (if student has one) \_\_\_\_\_ Phone # \_\_\_\_\_

Signing below gives Cross Lanes Christian School permission to share the above information with the school health nurse, other school personnel, or emergency medical services on a “need to know” basis.

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

Student Medical History

# Cross Lanes Christian School

5330 Floradale Drive, Cross Lanes, WV 25313 (304) 776-5020 FAX: (304) 776-5074

A ministry of Cross Lanes Bible Church

## School Entry Immunization Requirements

### County Health Requirement

Cross Lanes Christian School has been notified by our school health nurse that all kindergarten children entering school must have all the following vaccinations prior to entering school. **According to state law, no student is to enter school without written documentation (month, day and year) for each dose of required immunization as given below.** This is a county and state requirement and will be enforced countywide.

## Required Immunizations

KANAWHA COUNTY SCHOOLS HEALTH SERVICE 200 Elizabeth Street; Charleston, WV 25311 Telephone: (304) 348-7732

### West Virginia Immunization Requirements for New School Enterers

State law and rules<sup>1</sup> require that all children entering school in West Virginia for the first time in grades K-12 must show proof of immunization against diphtheria, pertussis, tetanus, polio, measles, mumps, rubella, varicella and hepatitis B unless properly medically exempted<sup>2</sup>. The table below outlines immunization requirements as most commonly met.<sup>3</sup> The West Virginia Bureau for Public Health recommends that vaccine doses administered 4 days or fewer before the minimum interval or age should be considered valid.

Vaccine	Requirement	Provisional Enrollment	Additional Information
DTaP/DTP Td/Tdap	Before admission, four doses required. One dose must be after the 4 <sup>th</sup> birthday.	After one dose, student may be allowed up to 8 months to complete the series.	<ul style="list-style-type: none"><li>Three doses only for children completing primary series at age 7 years and older.</li><li>Children exempted from the pertussis component of DTaP vaccine should receive DT vaccine instead, or if past 7<sup>th</sup> birthday, Td / Tdap vaccine, as applicable.</li></ul>
Polio (IPV)	Before admission, three doses required. One dose must be after the 4 <sup>th</sup> birthday.	After one dose, student may be allowed up to 90 days to complete the series.	<ul style="list-style-type: none"><li>If polio immunization series included both OPV and IPV, then a total of 4 doses are required.</li></ul>
Measles, Mumps & Rubella (MMR)	Before admission, two doses required. First dose must be after the 1 <sup>st</sup> birthday.	After one dose, student may be allowed up to 30 days to complete the series.	<ul style="list-style-type: none"><li>Doses should be a minimum of 28 days apart.</li></ul>
Varicella	Before admission, two doses required. First dose must be after the 1 <sup>st</sup> birthday.	After one dose, children less than 13 years of age may be allowed up to 90 days to obtain 2 <sup>nd</sup> dose; children aged 13 years and older may be allowed up to 30 days to obtain the 2 <sup>nd</sup> dose.	<ul style="list-style-type: none"><li>Children less than 13 years of age must have a minimum interval of 12 weeks between the 1<sup>st</sup> and 2<sup>nd</sup> doses.</li><li>Children aged 13 years and older may receive the 2<sup>nd</sup> dose 28 days after the first dose.</li><li>Immunity may also be demonstrated through the legal guardian's written or verbal attestation of varicella (chickenpox) disease.</li></ul>
Hepatitis B	Before admission, three doses required. Last dose must be after the age of 8 months.	After one dose, student may be allowed up to 4 months to complete the series.	<ul style="list-style-type: none"><li>Final dose is not valid if administered before 24 weeks / 6 months of age.</li></ul>

<sup>1</sup> See WV Code §16-3-4 and 64CSR95 for further information.  
<sup>2</sup> Medical exemptions must be requested by a physician who has treated or examined the child and be reviewed and approved by the local health officer in the county in which the child attends school. Requests for exemptions must be based on current standards of immunization practice and include the following information: the vaccine(s) being exempted, the specific medical reason for the exemption, whether the exemption is temporary or permanent, and, if temporary, when the exemption should be reevaluated. West Virginia State Law does not allow for non-medical exemptions to immunization requirements.  
<sup>3</sup> Occasionally, based on product used or the age at which a child is being immunized, deviations from these requirements may be acceptable. Any deviation must be consistent with applicable, age appropriate immunization schedules found at <http://www.cdc.gov> and searching under "Immunization Schedules".

### West Virginia Immunization Requirements for 7<sup>th</sup> & 12<sup>th</sup> Graders

State law and rules<sup>1</sup> require that all children entering school in West Virginia in grades 7 and 12 must show proof of immunization against diphtheria, pertussis, tetanus, and meningococcal disease unless properly medically exempted<sup>2</sup>. The table below outlines immunization requirements as most commonly met.<sup>3</sup> The West Virginia Bureau for Public Health recommends that vaccine doses administered 4 days or fewer before the minimum interval or age should be considered valid.

#### 7<sup>th</sup> Grade School Entry Requirement

Vaccine	Requirement	Provisional Enrollment
Tdap (tetanus, diphtheria, acellular pertussis)	Proof of booster dose of Tdap vaccine	No provisional enrollment permitted
MCV4 (meningococcal / meningitis)	Proof of 1 <sup>st</sup> dose of MCV4 vaccine	No provisional enrollment permitted

#### 12th Grade School Entry Requirement

Vaccine	Requirement	Provisional Enrollment
Tdap (tetanus, diphtheria, acellular pertussis)	Proof of booster dose of Tdap vaccine	No provisional enrollment permitted
MCV4 (meningococcal /meningitis)	One or two doses required. One dose of MCV4 is required if received <u>after</u> the 16 <sup>th</sup> birthday. Second dose is required if first dose was before 16 <sup>th</sup> birthday.	No provisional enrollment permitted

Frequently Asked Questions / Answers regarding these requirements may be found online at [www.immunization.wv.gov](http://www.immunization.wv.gov).

See WV Code §16-3-4 and 64CSR95 for further information.  
Medical exemptions must be requested by a physician who has treated or examined the child and be reviewed and approved by the local health officer in the county in which the child attends school. Requests for exemptions must be based on current standards of immunization practice and include the following information: the vaccine(s) being exempted, the specific medical reason for the exemption, whether the exemption is temporary or permanent, and, if temporary, when the exemption should be reevaluated. West Virginia State Law does not allow for non-medical exemptions to immunization requirements.  
Occasionally, based on product used or the age at which a child is being immunized, deviations from these requirements may be acceptable. Any deviation must be consistent with applicable, age appropriate immunization schedules found at <http://www.cdc.gov> and searching under "Immunization Schedules".



# Cross Lanes Christian School

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## Information Sheet For School Year \_\_\_\_\_

Student(s) Name(s): 1. \_\_\_\_\_ Grade \_\_\_\_\_  
2. \_\_\_\_\_ Grade \_\_\_\_\_  
3. \_\_\_\_\_ Grade \_\_\_\_\_  
4. \_\_\_\_\_ Grade \_\_\_\_\_

☐

Check here if  
New Address  
For Current  
Year

Parents' Names: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone No.: \_\_\_\_\_ E-mail: \_\_\_\_\_

Parents' Occupation: (Husband) \_\_\_\_\_

Work No. \_\_\_\_\_ Cell No. \_\_\_\_\_

(Wife) \_\_\_\_\_

Work No. \_\_\_\_\_ Cell No. \_\_\_\_\_

Church you attend \_\_\_\_\_ Pastors Name \_\_\_\_\_

Church Address \_\_\_\_\_

Zip \_\_\_\_\_ Telephone No. \_\_\_\_\_

(Please list below only those presently living.)

### Maternal Grandparents:

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

Address: \_\_\_\_\_

Zip: \_\_\_\_\_

### Maternal Great-Grandparents:

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

Address: \_\_\_\_\_

Zip: \_\_\_\_\_

### Paternal Grandparents:

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

Address: \_\_\_\_\_

Zip: \_\_\_\_\_

### Paternal Great-Grandparents:

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

Address: \_\_\_\_\_

Zip: \_\_\_\_\_

### Very Important People (Friends, Family, etc. such as god-parents who live nearby):

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

Address: \_\_\_\_\_

Zip: \_\_\_\_\_

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

Address: \_\_\_\_\_

Zip: \_\_\_\_\_

Information Sheet

# Cross Lanes Christian School

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Pastor / Church Information

***Note to the applicant:** Please request your pastor to complete the following evaluation and send it to Cross Lanes Christian School. This evaluation form is vital for our application review process. Thank you.*

Applicant’s name \_\_\_\_\_ Grade \_\_\_\_\_ Date \_\_\_\_\_

Dear Pastor: The student whose name appears above has applied for enrollment at Cross Lanes Christian School. We desire to make a wise enrollment decision that is in the best interest of both Cross Lanes Christian School and the applicant. Therefore, we request an evaluation from the applicant’s pastor in order to aid us in this decision. Would you, please, take a few minutes and candidly answer the following questions?

Applicant Information

How long have you known the applicant? \_\_\_\_\_

How well do you know the applicant? ☐ Close relationship ☐ Fairly well ☐ Casually

Please describe the church attendance of the applicant.  
☐ All services regularly ☐ Some services regularly (1-2 weekly) ☐ Attends occasionally (1-3monthly)

Does the applicant profess to be saved/born again? ☐ Yes ☐ No ☐ I don’t know

Do you observe evidence to support this profession? ☐ Yes ☐ No

How would you describe the applicant’s attitude toward authority?

- ☐ Consistent with Biblical teaching
- ☐ Have not observed
- ☐ Questionable – Please explain below
- ☐ Definite concern – Please explain below

Comments:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Recommendation

Based on my knowledge of this applicant and his/her family; I.....

- ☐ Highly recommend ☐ Recommend ☐ Do not recommend
- ☐ Have no recommendation ☐ **Would like to discuss this recommendation by phone (optional)**

..... enrollment in the ministry of Cross Lanes Christian School.  
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Pastor’s signature \_\_\_\_\_ Date \_\_\_\_\_

Pastor’s name (please print) \_\_\_\_\_

Church \_\_\_\_\_ Phone \_\_\_\_\_

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

Pastor/Church Information

# Cross Lanes Christian School

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## In Lieu of Transportation

The “In-lieu of Transportation” reimbursement is a direct payment of money from the county to families who do not use public school transportation. The counties that reimburse in our area are Boone County (\$1 per student, per day), Kanawha County (\$1 per student, per day) and Putnam County (75 cents per student, per day). Cross Lanes Christian School does all the record keeping and correspondence with the individual counties. Checks are issued to families directly from the county in which they live.

If you live in any of these counties and are more than the minimum distance\*\* from Cross Lanes Christian School *by the nearest, direct route*, you are entitled to receive reimbursement for each day your child is present in school from your county school system.

The reimbursement applies whether you drive to school, ride a Cross Lanes Christian School vehicle, or take public-transit system rides. The only way it does not apply is if you ride on your county’s owned and operated vehicles. \*\*\***NOTE: If you have a rural route address in Kanawha County, please indicate name of road.**

County	**Minimum distance from school	Refund per student per day
Boone	mileage not required	\$1
Kanawha	2.1 miles	\$1
Putnam	mileage not required	\$.75

Please fill out the following form only if you qualify according to the above stipulations.

Parents’ information		Names of students	Grades
Parent’s Name/s		First	
Street Address (** Kanawha County)		Second	
City	Zip	Third	
One-way distance from home to school:  * Kanawha County Only (must be minimum distance of 2.1 miles)  _____. _____ (Miles and tenths: for example 5.5 miles)		Fourth	

☐ Please check this box if this address is different from last year, and write old address on the line below.

Old street address	Old city	Old zip
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This certifies that I/we live in \_\_\_\_\_ county at least the minimum miles required from Cross Lanes Christian School by the nearest route, and I/we are eligible to receive reimbursement.

Parent/Legal Guardian Signature	Date
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# Cross Lanes Christian School

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## RECORDS RELEASE AUTHORIZATION

To be completed by parent:

I hereby give my permission for Cross Lanes Christian School to request and receive school and health records for:

Name	Date of Birth	Grade Last Attended

Parent's Signature: \_\_\_\_\_

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

Records to be requested from:		School Fax Number:
School		
Address		
City		
State		Zip

Please forward the following records to Cross Lanes Christian School:

- Up-to-date transcript – including:
  - Dates of entry/withdrawal
  - Grading scale
  - All subjects' grades
  - Grades to the date of withdrawal
  - Achievement Test Scores
  - Attendance records
- Any discipline records;
- Health records including physicals and immunization records

Prior consent for disclosure not required if the disclosure is to officials of another system in which the student seeks admission or intends to enroll.

Federal Register, Volume 41, No. 118, Section 99.31, June 17, 1976

REV: 2010\_01\_15

record request

# SchoolCast Registration Form

Schoolcast is a rapid alert notification system that enables out school to reach students, parents, faculty and staff, within moments through a variety of popular communication methods.

In 2015, the Federal Communications Commission (FCC) updated its rules to prohibit calls made using automatic telephone dialing equipment or a prerecorded message to any telephone number assigned to a cell phone or any service for which the called party is charged for the call without prior consent, unless the call is for emergency purposes as defined by the Telephone Consumer Protection Act. (Reference 47 U.S. Code @ 227)

Therefore, you will need to complete this form giving our school permission to call and/or text your landline and/or cell phone numbers with information utilizing the SchoolCast rapid alert notification system. If you do not complete this form you will not receive important information. However, according to the current TCPA guidelines, you will still be contacted in the event of an emergency.

Student Name: \_\_\_\_\_Grade: \_\_\_\_\_

Parent/Guardian Name(s): \_\_\_\_\_

I give permission to be called and/or texted using automatic dialing equipment at the following numbers.

By signing this form, I certify that I am the owner of the phone numbers listed.

Landline Phone 1: \_\_\_\_\_

Landline Phone 2: \_\_\_\_\_

Cell/Mobile Phone 1: \_\_\_\_\_Text Message: YesNo

Cell/Mobile Phone 2: \_\_\_\_\_Text Message: YesNo

I do not give permission to be called using automated dialing equipment and understand that I will only be called in the event of a school emergency.

Signature: \_\_\_\_\_Date: \_\_\_\_\_

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## LIFESTYLE STATEMENT

Lifestyle Statement Cross Lanes Christian School is a uniquely religious, educational institution that seeks to provide a quality education in a distinct Christian environment. One of the goals of Cross Lanes Christian School is to work with parents and guardians to train Christian young men and women to be salt and light in their communities. Cross Lanes Christian School believes that the Bible is the inspired Word of God and sets forth absolute truth by which Christians are to live. Cross Lanes Christian School expects and requires that both students and parents will support the school in its distinct mission and in its Biblical beliefs. In relying on the teachings of Scripture, Cross Lanes Christian School believes that the Bible prohibits sexual immorality of any type, including but not limited to pornography, homosexuality, or any other sexual activity outside the marriage of one man and one woman. On those occasions in which a particular home or student is acting counter to or in opposition to the Biblical beliefs and lifestyle that the school teaches, the school reserves the right, in its sole discretion, to refuse admission to an applicant or to discontinue enrollment of a current student. This includes, but is not limited to, living in, condoning, or supporting any form of sexual immorality; practicing or promoting a homosexual lifestyle or alternative gender identity; or otherwise having the inability to support the moral principles of the school as stated throughout this handbook. 1 Thessalonians 4:1-8; Colossians 3:1-8; Genesis 2:18-25; Galatians 5:16-21; Acts 15:29; Ephesians 5:1-21 ; Revelation 21:8; Judges 19:22; Genesis 19:1-38; Hebrews 13:1-25; Jude 1:7; Mark 10:6-9; 1 Timothy 1:10-11; 1 Corinthians 7:2; Leviticus 20:13-15; Romans 1:32; Romans 1:26-28; 1 Corinthians 6:9-11; Leviticus 18:22. Approved by CLCS Board (7/16/14)

Signing below means you have read and agree to follow the Cross Lanes Christian School Lifestyle Statement

Parent/Guardian Signature \_\_\_\_\_ Date: \_\_\_\_\_

Student Signature (6th Grade or above) \_\_\_\_\_ Date: \_\_\_\_\_