

EVAS Registration Checklist

Student Name: _____

The following must be completed and returned for **ALL STUDENTS**:

- Registration Fee – To be paid in the office
- Student Application (2-sided)
- Consent to Treatment
- Emergency Release Form
- Student Medical Record (K, 4th , 7th only)
- Parent Attendance Agreement
- Academic Agreement
- Disciplinary Agreement
- Uniform Policy & Dress Code
- List of Persons Authorized to Provide Rides Form
- Photographic Model Release
- Financial Policy
- Financial Plan Form – To be filled out in office with secretary

4th and 7th Graders must have a new Medical Form signed by their doctor

New Students Only

- Student Medical Form/ Signed by Doctor
 - Immunization Record
 - Original Birth Certificate
-

STUDENT APPLICATION

PACIFIC UNION CONFERENCE OF SEVENTH-DAY ADVENTIST SCHOOLS

Grade applying for _____ Date of application _____

1. Full legal name of student _____ Sex _____
LAST FIRST MIDDLE NICKNAME

2. Date of birth _____ Place of birth _____ Age _____
MO. DAY YR.

Check document submitted to verify birthdate for child entering transitional kindergarten, kindergarten or first grade

Birth certificate Notarized statement
 Hospital statement Passport or visa

Verified by _____
SCHOOL OFFICIAL

3. Student living with: Father Mother Stepfather Stepmother

Other _____
SPECIFY

Home address _____ P.O. Box _____
NUMBER STREET

_____ Telephone _____
CITY ZIP

4.

| Legal names of those checked in #3 | Denom. affiliation | Church where membership held | Languages used at home | Occupation | Business Phone |
|------------------------------------|--------------------|------------------------------|------------------------|------------|----------------|
| | | | | | |
| | | | | | |

5. Is this student sponsored by an Adventist church member? Yes No

Is this student a baptized member of the Adventist church? Yes No

If yes, indicate year baptized _____ Church where membership is held _____

If student has some other church affiliation, specify _____

6. School last attended _____
NAME OF SCHOOL ADDRESS TELEPHONE

7.

| Names of other children in family | Sex | Age | Check if living at home | School child is attending |
|-----------------------------------|-----|-----|-------------------------|---------------------------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |

OFFICE USE ONLY

Enter dates Documents received - _____

Verification of birthdate - _____

Transcripts(s) - _____

Name - _____

Grade enrolled - _____

Room assigned - _____

Withdrawn - _____

8. Has this student been previously identified as qualifying for a gifted education program? Yes No
If yes, what kind? _____ When? _____

Where? _____ By whom? _____

9. Has this student been previously identified as qualifying for a special education program? Yes No
If yes, what kind? _____ When? _____

Where? _____ By whom? _____

10. Does student have an unpaid account at another school? Yes No

If so, state where _____

11. Name and address of person to whom financial statements are to be sent if different from that given in item #3.

NAME ADDRESS TELEPHONE

NAME ADDRESS TELEPHONE

STUDENT CONTRACT:

I agree to uphold the school's regulations. I pledge my cooperation with and loyalty to the school and its employees. I will live in harmony with the school's Christian principles.

DATE STUDENT'S SIGNATURE

PARENT CONTRACT:

I hereby agree to support school regulations and to help my child observe them, to supply physical examination reports for this student, a) entering school for the first time, b) at grade seven (this should include the scoliosis examination), c) at least once in grades nine through twelve, and d) at other grades, when required by the Conference Board of Education; and to accept all financial educational obligations for this student.

DATE PARENT/GUARDIAN'S SIGNATURE

School name EAST VALLEY ADVENTIST SCHOOL

Address 3554 MAINE AVENUE

BALDWIN PARK, CA 91706

CITY STATE ZIP

Pacific Union Conference CONSENT TO TREATMENT

Only designated staff, such as the school nurse or physician, will have access to the completed form. This form will be stored in a locked file.

This form must be filled out at the beginning of each school year to cover the activities for the school year. A copy of each student's form must be taken on off-campus activities.

Student Name _____

Age _____ Date of Birth _____
Mo. Day Yr.

Address _____

Parent/Guardian's Name _____

Father/Guardian Business Phone _____ Home Phone _____

Mother/Guardian Business Phone _____ Home Phone _____

Please describe allergies to substances and medication. _____

If on regular medication, please specify. _____

Date of last tetanus shot _____

Please give the name of your local family physician(s) to be called in case your son or daughter becomes ill or has an accident at school and you cannot be reached.

1. Family Physician _____ Office Phone _____
Address _____

2. Family Physician _____ Office Phone _____
Address _____

Hospital Preference _____ Telephone _____

Please give the names of two relatives or friends who have consented to assume the responsibility of your son or daughter in case of illness or accident until you can be reached. In case of any changes in the named persons, notify the school in writing.

1. Name _____ Telephone _____
Address _____

2. Name _____ Telephone _____
Address _____

If emergency service involving medical action or treatment is required and neither the parent/guardian nor the family physician can be reached for consent, the parent/guardian hereby consents to the rendering of such emergency medical service for the above named student as shall be necessary in the medical opinion of the doctor rendering the service. This authorization is given pursuant to the local state Civil Code.

Signature of Parent or Guardian _____ Date _____

EAST VALLEY ADVENTIST SCHOOL

3554 North Maine Ave.

Baldwin Park, CA 91706

Tel.: (626) 960-4751

EMERGENCY RELEASE FORM

Child's Name _____ Teacher _____ Grade _____

Home Address _____ Home Telephone _____

In case of an emergency for which it would be necessary to close the school, I hereby give E.V.A.S. my consent to release my child to any of the following persons.

1) Name _____ Relationship _____

Address _____ Telephone _____

2) Name _____ Relationship _____

Address _____ Telephone _____

If none of the above named individuals are available (check one):

_____ Release my child to any adult person whom he/she recognizes favorably.

_____ Do not release my child to anyone not named above.

An out-of-state emergency contact is:

Name _____ Relationship _____ Tel. _____

I hereby authorize East Valley Adventist School personnel, that in the case of an emergency, to release my child as I have already stated or to act according to what they see the situation require for the safety of my child.

Parent or Guardian Signature _____ Date _____

OFFICE USE ONLY

Child has been picked up by: _____ and taken to the following location _____
Telephone _____ Date _____ Time _____

STUDENT MEDICAL RECORD

Only designated staff, such as the school nurse or physician, will have access to the completed form. This form will be stored in a locked file.

Name _____ Birth Date _____

Address _____

Name of Father _____ Name of Mother _____

History (past illnesses and allergies. Please check those he/she has had.)

- Cancer
- Chicken Pox
- Diabetes
- Diphtheria
- Epilepsy
- Heart Disease
- Measles

- Rheumatic Fever
- Scarlet Fever
- Tuberculosis
- Whooping Cough
- Ear Infections
- Other

- Allergies:
- Asthma
 - Hay Fever
 - Insect Bites
 - Penicillin
 - Other Drugs

Explain briefly factors such as surgeries, serious accidents or injuries, congenital defects, which may affect the child's school experience.

Indicate physical problem by check: Hearing Heart Sight Speech

Other _____
SPECIFY

IMMUNIZATIONS – An official record of immunizations must accompany this medical record for all students entering school for the first time in the United States regardless of grade level. Records considered official are:

- State Immunization Record
- Health Provider Record – must have signature, stamp, or initials next to each date.
- Physician's Record
- County Health Department Record
- Official Immunization Record from another state
- School Immunization Record

LABORATORY RECORD

| TB SKIN TESTS | Type* | Dates Given | Given By | Date Read | Read By | Impression |
|--------------------------|--------------------------|-------------|----------|-----------|---------|-----------------------------------|
| | <input type="checkbox"/> | PPD Mantoux | | | | |
| <input type="checkbox"/> | Other _____ | | | | | <input type="checkbox"/> Negative |
| <input type="checkbox"/> | PPD Mantoux | | | | | <input type="checkbox"/> Positive |
| <input type="checkbox"/> | Other _____ | | | | | <input type="checkbox"/> Negative |
| <input type="checkbox"/> | PPD Mantoux | | | | | <input type="checkbox"/> Positive |
| <input type="checkbox"/> | Other _____ | | | | | <input type="checkbox"/> Negative |

*If required by school entry, must be Mantoux unless exception granted by local health department

CHEST X-RAY Film date: _____ Impressing: normal abnormal

Person is free of communicable tuberculosis yes no

Signature/Agency _____

PHYSICIAN'S EXAMINATION*

Height _____ Weight _____ Blood Pressure _____

| | Normal | Abnormal | Not Examined | |
|--|--------------------------|--------------------------|--------------------------|-----------------------|
| Skin | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Explain Abnormalities |
| Eyes, vision, glasses | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| Ears, hearing | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| Nose and throat | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| Mouth, teeth, speech | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| Glands | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| Chest, lungs | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| Cardiovascular, heart | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| Abdomen, enlargement | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| tenderness | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| hernia | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| Spine, back | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| Scoliosis for Grade 7 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| Posture | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| Extremities | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| Genitourinary | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| Nervous System, reflexes | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| Nutritional status and general appearance of the child | | | | |

Recommendations for additional medical or dental care _____

This student may participate in a normal physical education program which includes such activities as running, jumping, tumbling. Yes No

If student must be restricted from participating in activities such as are listed above, please indicate physical activities that may be permitted.

Date _____ Physician's Signature _____

Address _____

*To be completed by the family physician and kept on file at the school for all children, a) entering school for the first time, b) at grade seven (this should include the scoliosis examination), c) at least once in grades nine through twelve, d) at other grades when required by the Conference Board of Education.



East Valley Adventist School

Parent Attendance Agreement

School attendance is important for the success of every student. Excessive tardiness and absences are detrimental to the student's daily progress. For this reason, it is important that you make every effort to ensure that your child is in regular class attendance. Please initial each statement below showing that you have read and understand the following terms of the East Valley Adventist School Attendance Policy:

1. ____ A student should be in attendance at school for a total amount of time that is not less than 10% of a 180-day school year or in accordance to California State Truancy Laws and the Conference Office of Education Policies. In other words, a student should not be absent in excess of 18 days during a complete school term from August to June. **Three (3) tardies are equivalent to one (1) unexcused absence.**
2. ____ A legitimate doctor's note should be given for extended periods of absence due to illness of three (3) or more days. Such a note should be produced no later than the first day when the child returns to class in order to be counted as an excused absence. In case of illness or hospitalization, parents should contact the school as soon as possible or within a 24-hour period.
3. ____ Family outings, vacations, doctor visits, dental and/or optometry appointments, etc., are not viewed as legitimate reasons for an excused absence. Every attempt should be made to plan doctor visits and family vacations around the student's school schedule.
4. ____ Any student who accumulates more than five (5) days of unexcused absences within a quarter, will be required to schedule a meeting with the Disciplinary Committee.
5. ____ Any student who accumulates more than 20 days of excused or unexcused absences during the course of the school year may: A) be forced to withdraw from EVAS or B) be held in the same grade for the following school year according to California State Law.
6. ____ When a student is tardy or leaves early, he/she will miss important classroom instruction, which could adversely affect their GPA and be reflected in their report card.

By signing and dating below, you indicate that you have read, understand and agree to abide by this agreement.

Student's Name: _____

Parent/Guardian's Name: _____

Signature: _____ Date: _____



East Valley Adventist School

Acuerdo de Asistencia para Padres

La asistencia escolar es importante para el éxito de cada estudiante. La tardanza excesiva y las ausencias son perjudiciales para el progreso diario del estudiante. Por esta razón, es importante que usted haga todo lo posible para asegurarse de que su hijo esté asistiendo regularmente a clase. Por favor, coloque sus iniciales enseguida de cada declaración abajo mostrando que usted ha leído y entiende los siguientes términos de la política de asistencia de la Escuela Adventista de East Valley:

1. ___ Un estudiante debe asistir a la escuela por un período de tiempo total que no sea menos del 10% de un año escolar de 180 días o de acuerdo con las leyes de ausentismo del estado de California y la oficina de la Conferencia de Políticas Educativas. En otras palabras, un estudiante no debe ausentarse en exceso de 18 días durante un período escolar completo de agosto a junio. **Tres (3) tardanzas equivalen a una (1) ausencia injustificada.**
2. ___ Una nota legítima de un médico debe ser presentada por períodos prolongados de ausencia por enfermedad de tres (3) o más días. Tal nota debe ser entregada a más tardar el primer día cuando el niño regrese a clase para ser contado como una ausencia excusada. En caso de enfermedad o hospitalización, los padres deben ponerse en contacto con la escuela lo antes posible o en un período de 24 horas.
3. ___ Salidas familiares, vacaciones, visitas al médico, citas dentales y/o de optometría, etc., no son vistas como razones legítimas de una ausencia excusada. Se debe hacer todo lo posible para planificar las visitas al médico y las vacaciones familiares fuera del horario escolar del estudiante.
4. ___ Cualquier estudiante que acumule más de cinco (5) días de ausencias sin excusa dentro de un trimestre, tendrá que programar una reunión con el Comité Disciplinario.
5. ___ Cualquier estudiante que acumule más de 20 días de ausencias excusadas o sin excusa durante el curso del año escolar puede: a) ser obligado a retirarse de EVAS o b) se mantendrá en el mismo grado para el siguiente año escolar según la ley del estado de California.
6. ___ Cuando un estudiante llega tarde o se va temprano, se pierde de instrucción importante en el aula que podría afectar adversamente su puntuación de grado (GPA) o se puede reflejar en su reporte de calificaciones.

Al firmar y fechar este acuerdo, usted indica que usted ha leído, entiende y se registrará por este acuerdo.

Nombre del Estudiante: _____

Nombre del Padre o Guardián: _____

Firma: _____

Fecha: _____



East Valley Adventist School

Academic Agreement

East Valley Adventist School wants to ensure that your child is achieving to his/her utmost academic potential. Please initial each section after you read it:

1. ___ Every student is required to turn in assignments that have been completed in a neat and appropriate manner.
2. ___ Every student is required to turn in properly completed assignments on their due date.
3. ___ Each assignment should reflect the student's honest and best attempt at completing the required task. Parents are encouraged to help students with their assignments, but not to do the work for the children.
4. ___ Parents should supply the student with the correct materials, information and support that is necessary and within the appropriate time frame in order to complete each task. This includes, but is not limited to, taking your child to the library or acquiring necessary materials for special reports and projects.
5. ___ If a student fails to turn in assignments on a regular basis and as a result his/her achievement scores fall below 60% in one or more classes throughout the grading period a meeting will be scheduled with the student, parent/guardian, and teacher to discuss the matter. If there is no improvement, EVAS may ask a student to withdraw from school for the following reasons: A) due to the persistent, continuous and willful act of not completing assignments, B) due to negligence and an unwillingness to do assignments, C) failure to improve after the teacher has discussed the student's academic status with the parents.
6. ___ The teacher is not responsible for giving failing student extra time to complete the work that was not finished in the time specified. The teacher is not responsible to give extra credit work to a student that is having problems completing assignments in a timely manner. It is the responsibility of each student to complete assignments as they are given.
7. ___ Extra time for the completion of an assignment will be given for all valid, excused absences. The time given will not extend beyond one day after the close of a grading period if such a time is seen as sufficient for completing all of the course work. If the excused absence was close to the end of a grading period, the time allotted for the completion of such work should not extend beyond three weeks into a new grading period.
8. ___ Students who fail to bring the necessary books and materials to class on a daily basis may be sent home until the proper materials are once again available.

If you have read the Academic Policy above, understand what you have read and agree to abide by such rules, please sign and date below.

Student's Name: _____

Parent/Guardian's Name: _____

Signature: _____ Date: _____



East Valley Adventist School

Acuerdo Academico

La Escuela Adventista de East Valley (EVAS) quiere asegurarse que su hijo/a esté alcanzando su máximo potencial académico. Por favor coloque sus iniciales enseguida de cada sección después de leerla:

1. ____ Se le requiere a cada estudiante entregar las tareas que se han completado en una manera ordenada y adecuada.
2. ____ Se le requiere a cada estudiante entregar las tareas completadas adecuadamente para la fecha establecida.
3. ____ Cada tarea debe reflejar el intento honesto y mejor del estudiante de completar la tarea requerida. Se anima a los padres a ayudar a los estudiantes con sus tareas, pero no a hacer el trabajo para los niños.
4. ____ Los padres deben proveer al estudiante los materiales correctos, la información y el apoyo que son necesarios y dentro del marco de tiempo apropiado para completar cada tarea. Esto incluye, pero no se limita a, llevar a su hijo/a a la biblioteca o adquirir los materiales necesarios para reportes especiales y proyectos.
5. ____ Si un estudiante en forma regular no entrega las tareas y como resultado sus calificaciones caen por debajo del 60% en una o más clases durante el período de calificaciones, se programará una reunión con el estudiante, padre/guardián y maestro/a para discutir el asunto. Si no hay mejoría, EVAS puede pedirle al estudiante que se retire de la escuela por las siguientes razones: a) debido a un acto persistente, continuo e intencional de no completar las tareas, B) debido a negligencia y falta de voluntad para hacer las tareas, C) falta de mejoría después de que el maestro/a haya discutido el estatus académico del estudiante con los padres.
6. ____ El maestro/a no es responsable de dar tiempo adicional al estudiante para terminar el trabajo que no fue completado en el tiempo especificado. El maestro/a no es responsable de dar trabajo de crédito adicional a un estudiante que está teniendo problemas para completar las tareas en el tiempo debido. Es responsabilidad de cada estudiante completar las asignaciones tal como se dan.
7. ____ Tiempo adicional para completar una tarea será dado en casos de ausencias válidas y justificadas. El tiempo dado no se extenderá más allá de un día después del cierre de un período de calificaciones si se considera que tal tiempo es suficiente para completar todo el trabajo del curso. Si la ausencia justificada fue cercana al final de un período de calificación, el tiempo asignado para la terminación de dicho trabajo no debe extenderse más allá de tres semanas en un nuevo período de calificación.
8. ____ Los estudiantes que no traigan los libros y materiales necesarios a la clase diariamente pueden ser enviados a casa hasta que los materiales apropiados estén de nuevo disponibles.

Si ha leído la política académica anterior, entiende lo que ha leído y acepta cumplir con dichas reglas, por favor firme y feche abajo.

Nombre del Estudiante: _____

Nombre del Padre/Guardián: _____

Firma: _____ Fecha: _____



East Valley Adventist School

Disciplinary Agreement

Please initial each section after you read it.

1. ___ East Valley Adventist School will not tolerate any student who: A) threatens to inflict harm to another student or teacher, B) assaults another student or teacher, C) propagates or acts upon beliefs that are based on prejudice and bias against other students who are of a different race, color, or belief, D) acts in a lewd, sexually and/or physically inappropriate manner, either by him/herself and/or with other students or teachers, E) uses or distributes illegal substances and/or weapons.
2. ___ Each student is to stand as an individual whose decisions reflect the personal choice he/she has made. Each student is responsible for his/her own actions regardless of the provocation, influence, or impetus given by other students and or people.
3. ___ All major disciplinary action is subject to the decision of the Disciplinary Committee and will be considered on an individual basis. Disciplinary action will be taken in consideration of the individual's needs, the act itself, and other pertinent factors. In extreme cases, such as that of expulsion, the School Board may be asked to advise on the situation.
4. ___ Repeated failure to complete assignments in the classroom or at home is seen as a disciplinary problem and will be treated as such, according to the Academic Agreement.
5. ___ Disruption of class will not be permitted.
6. ___ Academic integrity is expected at all times.
7. ___ Failure to comply with the school uniform policy will be seen as a disciplinary problem and will be treated as such, according to the Uniform Policy and Dress Code Agreement.
8. ___ East Valley Adventist School believes in using redemptive discipline which allows the individual student to reconcile the wrongdoing and to further change his/ her future course of action. This type of discipline is a process rather than executive action. The process seeks to instill in each student intrinsic values of what is right and wrong. Discipline, then, is not meant to simply punish the student, but rather to allow the individual the opportunity to make a new and better choice. If an executive disciplinary action must be taken, it will be done so after repeated attempts to bring the student back to a greater understanding of what it means to work and live with others in a cooperative, loving and respectful environment. However, in some cases the student may commit an act that will not allow EVAS the opportunity to practice such forms of redemptive discipline (see section one (1), the No Tolerance Clause). In these cases disciplinary action will be swift and final.

By signing and dating below, you indicate that you have read, understand and agree to abide by this agreement.

Student's Name: _____

Parent/Guardian's Name: _____

Signature: _____ Date: _____



East Valley Adventist School

Acuerdo Disciplinario

Por favor, coloque sus iniciales en cada sección después de leerla.

1. ____ La Escuela Adventista de East Valley (EVAS) no tolerará a ningún estudiante que: A) amenace con infligir daño a otro estudiante o maestro/a, B) agreda físicamente a otro estudiante o maestro/a, C) promulgue o actúe sobre creencias que se basan en prejuicio y parcialidad contra otros estudiantes que son de un diferente raza, color, o creencia, D) actúe de manera obscena y/o, sexual o físicamente inapropiada, ya sea por sí mismo y/o con otros estudiantes o maestros, E) que utilice o distribuya sustancias y/o armas ilegales.
2. ____ Cada estudiante debe presentarse como un individuo cuyas decisiones reflejan la elección personal que uno ha hecho. Cada estudiante es responsable de sus propias acciones, independientemente de la provocación, influencia, o ímpetu dado por otros estudiantes y/o personas.
3. ____ Todas las acciones disciplinarias importantes están sujetas a la decisión del Comité Disciplinario y serán consideradas individualmente. Se tomarán medidas disciplinarias en consideración de las necesidades del individuo, del acto en sí y de otros factores pertinentes. En casos extremos, como el de la expulsión, se puede pedir a la junta escolar que le asesore sobre la situación.
4. ____ La falta repetida de completar las tareas en el aula o en el hogar se considera un problema disciplinario y será tratada como tal, según el Acuerdo Académico.
5. ____ No se permitirá la interrupción de la clase.
6. ____ La integridad académica se observará en todo momento.
7. ____ El incumplimiento de las reglas de uniforme escolar será considerado como un problema disciplinario y será tratado como tal, de acuerdo con las Reglas de Uniforme y Acuerdo de Código de Vestimenta.
8. ____ La Escuela Adventista de East Valley cree en el uso de la disciplina redentora que permite al estudiante individual reconciliar la maldad y cambiar su futuro curso de acción. Este tipo de disciplina es un proceso más que una acción ejecutiva. El proceso busca inculcar en cada estudiante un valor intrínseco de lo que está bien y lo que está mal. Por lo tanto, la disciplina no pretende simplemente castigar al estudiante, sino más bien permitir al individuo la oportunidad de hacer una nueva y mejor elección. Si se debe tomar una acción disciplinaria ejecutiva, se hará así después de repetidos intentos de traer al estudiante de vuelta a una mayor comprensión de lo que significa trabajar y vivir con otros en un ambiente cooperativo, amoroso y respetuoso. Sin embargo, en algunos casos el estudiante puede cometer un acto que no le permitirá a EVAS la oportunidad de practicar tales formas de disciplina redentora (vea la sección uno (1), la cláusula de no tolerancia). En estos casos la acción disciplinaria será rápida y definitiva.

Si usted ha leído el Acuerdo Disciplinario expresado arriba, entiende lo que ha leído y acepta cumplir con tales reglas, por favor firme y feche abajo.

Nombre del Estudiante: _____

Nombre del Padre/Guardián: _____

Firma: _____ Fecha: _____



East Valley Adventist School

Uniform Policy and Dress Code Agreement

East Valley Adventist School strives to be an institution that upholds the highest Christian standards of modesty in dress. We believe that our attire should be worthy of the God we serve and should exemplify the ideals of a healthy Christian. Furthermore, we believe that students should be free from having to worry about fashion and the distractions that come from such pursuits (whether they have or don't have the "right" style, if they can afford or cannot afford what is in vogue, etc.). Finally, we believe that our attire should help to create an atmosphere of learning, respectability and high standards, preparing for service to mankind and for the professional environments that they will one day be a part of.

In order to help us reach our goals in standards of dress and presentation, EVAS has implemented the following Uniform Policy and Dress Code. Please initial each section after you read it:

1. _____ Individuals enrolled in EVAS and their parents will agree that students may only wear uniforms that have been approved by the school and may only purchase them from the company that the school has contracted with.
 - A. Parents and students agree to accept the disciplinary actions (including possible fines) that may result from not complying with the uniform policy. See *Uniform Notice* attachment at the end of this document.
 - B. Parents and students agree that EVAS has the right to enforce its Uniform Policy and Dress Code.
2. _____ Individuals enrolled in EVAS and their parents will agree that students will wear the correct uniform on the required days and special occasions. This applies, but is not limited to, Chapel Days (Friday), school field trips, and special events/presentations.
3. _____ Individuals enrolled in EVAS and their parents will agree that students will not use jewelry or anything that would resemble jewelry (wrist bands, ankle bands, etc.) at school or during any school-sponsored activity (field trips, church visitations, special presentations, etc.)
4. _____ In an effort to maintain modesty and age appropriateness, students will agree to not use fingernail polish and will use makeup sparingly and at an appropriate age.
5. _____ Individuals enrolled in EVAS and their parents will agree that students should maintain good personal hygiene and proper grooming. This includes, but is not limited to, regular bathing, combed/brushed hair, neat/clean fingernails (clipped to a proper length), washed face and hands and fresh clothes.
6. _____ Due to safety and insurance liability issues, students are not allowed to wear open-toed footwear, shoes that have no heel or shoes that have open slots or that do not cover the entire foot. If students do not wear the proper footwear, they will be asked to not participate in certain events or will be sent home to change.
7. _____ Individuals enrolled in EVAS and their parents will agree that **Free Dress Days** does not imply that there is no dress code. Clothes should continue to be to the standards of the dress code, exemplifying the same high principles that have already been expressed. This includes, but is not limited to, shirts with writing, logos, designs, and so on, that are deemed to be inappropriate and/or not exemplifying the standards/beliefs of our institution. Also, clothes that are either too loose fitting (baggy pants, sagging waistline), too tight fitting, shirts that are not full length covering the midriff, tank top shirts, etc., are all examples of what is not acceptable as free dress wear.
8. _____ Individuals enrolled in EVAS and their parents will agree that the enforcement of this policy is subjective and under the criteria of the Administration, Faculty and the EVAS School Board. Also, that the school has the right to enforce or create rules regarding the Uniform Policy and Dress Code as the need may arise.

| | | |
|--|--|-----------------------------|
| UNIFORM NOTICE East Valley Adventist School | Student | Date |
| | Teacher | Grade |
| | <input type="checkbox"/> Warning <input type="checkbox"/> 1 st Notice / \$1 <input type="checkbox"/> 2 nd Notice / \$2 <input type="checkbox"/> 3 rd Notice / \$3 | |
| This notice is to inform you that your child was out of uniform today. Please see that he/she is attired in proper uniform tomorrow. Continued violation of the uniform policy will result in a fine increasing with each notice. The money from the fine will go towards the Worthy Student Fund. | | |
| REASON FOR NOTICE: <input type="checkbox"/> Nails <input type="checkbox"/> Sweater / Jacket <input type="checkbox"/> Chapel Shirt <input type="checkbox"/> Polo Shirt <input type="checkbox"/> Jewelry <input type="checkbox"/> Chapel Pants <input type="checkbox"/> Pants <input type="checkbox"/> Shoes <input type="checkbox"/> Chapel Skirt / Dress | | |
| COMMENTS: | | |
| Teacher Signature: | | Parent/ Guardian Signature: |

If you have read this Uniform Policy and Dress Code Agreement, understand what you have read and agree to abide by such rules, please sign and date below.

Student's Name: _____

Signature: _____ Date: _____

**Students from Grades 5-8 must also sign showing that they read, understood and promise to abide by the uniform policy.*

Parent/Guardian's Name: _____

Signature: _____ Date: _____



East Valley Adventist School

Reglas de Uniforme y Acuerdo de Código de Vestimenta

La Escuela Adventista de East Valley se esfuerza por ser una institución que mantiene los más altos estándares cristianos de modestia en el vestido. Creemos que nuestra forma de vestir debe ser digna del Dios que servimos y debemos ejemplificar los ideales de un cristiano sano. Además, creemos que los estudiantes deben estar libres de tener que preocuparse por la moda y las distracciones que provienen de tales actividades (si tienen o no tienen el estilo "correcto", si pueden pagar o no pueden pagar lo que está en boga, etc.). Por último, creemos que nuestra forma de vestir debe ayudar a crear una atmósfera de aprendizaje, respetabilidad y altos estándares, preparándose para el servicio a la humanidad y para el ambiente profesional del cual serán parte algún día.

Por favor coloque sus iniciales enseguida de cada sección después de leerla:

1. _____ Los individuos inscritos en EVAS y sus padres estarán de acuerdo en que los estudiantes sólo pueden usar uniformes que han sido aprobados por la escuela y sólo pueden comprarlos de la compañía aprobada.
 - A. Los padres y los estudiantes acuerdan aceptar las acciones disciplinarias (incluyendo las posibles multas) que pueden resultar de no cumplir con esta política. Vea el formulario de *Aviso Sobre Uniforme* al final de este documento.
 - B. Los padres y estudiantes acuerdan que EVAS tiene el derecho de hacer cumplir esta póliza.
2. _____ Los individuos inscritos en EVAS y sus padres estarán de acuerdo en que los estudiantes usarán el uniforme correcto en los días requeridos y en ocasiones especiales. Esto se aplica, pero no se limita a, días de capilla (viernes), excursiones de la escuela, y eventos/presentaciones especiales.
3. _____ Los individuos inscritos en EVAS y sus padres convendrán que los estudiantes no usarán la joyería o cualquier cosa que se asemejaría a la joyería (pulsera de silicona de muñeca o tobillo, etc.) en la escuela o durante cualquier actividad patrocinada por la escuela (excursiones, visitas de la iglesia presentaciones especiales, etc.)
4. _____ En un esfuerzo por mantener la modestia y la apariencia adecuada a la edad, los estudiantes estarán de acuerdo en no usar esmalte de uñas y usarán maquillaje con moderación y a una edad apropiada.
5. _____ Los individuos inscritos en EVAS y sus padres convendrán que los estudiantes deben mantener buena higiene personal y el aseo apropiado. Esto incluye, pero no se limita a, el baño regular, el pelo cepillado, las uñas limpias (recortadas adecuadamente), la cara y las manos lavadas y ropa fresca.
6. _____ Debido a problemas de seguridad y contratos de seguro, a los estudiantes no se les permite usar calzado de punta abierta, zapatos que no tengan tacón o zapatos que tengan ranuras abiertas o que no cubran todo el pie. Si los estudiantes no usan el calzado adecuado, no podrán participar en ciertas actividades o serán enviados a casa para que se cambien.
7. _____ Las personas inscritas en EVAS y sus padres estarán de acuerdo en que los días donde están libres de usar uniforme (free dress days) no implica que no haya código de vestimenta. La ropa debe seguir siendo a los estándares del código de vestimenta, ejemplificando los mismos altos principios que ya se han expresado. Esto incluye, pero no se limita a, camisas con escritura, logotipos, diseños, etc., que se consideran inapropiados y/o que no ejemplifican los estándares/creencias de nuestra institución. También, ropa que este demasiado floja (pantalones sueltos o que no se ajustan a la cintura), ropa demasiado apretada, camisas que no son lo suficientemente largas para cubrir el abdomen, camisetas de tirantes (tank tops), etc., son los ejemplos de qué no es aceptable en los días libres de uniforme.

8. _____ Las personas inscritas en EVAS y sus padres estarán de acuerdo en que la aplicación de esta política es subjetiva y bajo los criterios de la Administración, la Facultad y la Concilio Escolar de EVAS. La escuela tiene el derecho de hacer cumplir o modificar reglas con respecto a esta política si llega a ser necesario.

| East Valley Adventist School | | |
|---|--|---|
| UNIFORM NOTICE --- AVISO SOBRE UNIFORME | Student / Estudiante | Date / Fecha |
| | Teacher / Maestra | Grade / Grado |
| | Circle one / Circule uno: | |
| | Warning / Aviso | 1 st Notice/ 1 ^a Notificación = \$1 |
| | 2 nd Notice / 2 ^a Notificación = \$2 | _____ Notice / _____ Notificación = \$ _____ |
| Reason for Notice / Motivo de este Aviso | | |
| Nails / Uñas | Sweater or Jacket / Sueter o Chaqueta | Chapel Shirt / Camisa de Capilla |
| Polo Shirt / Camisa Polo | Jewelry / Joyas | Chapel Pants / Pantalones de Capilla |
| Pants / Pantalones | Shoes / Zapatos | Chapel Skirt or Dress / Falda o Vestido de Capilla |
| <p>This notice is to inform you that your child was out of uniform today. Please see that he/she is attired in proper uniform tomorrow. Continued violation of the uniform policy will result in a fine increasing with each notice. The money from the fine will go towards the Worthy Student Fund.</p> <p style="text-align: center;">-----</p> <p>Este aviso es para informarle que su hijo/a estuvo sin uniforme completo hoy. Por favor procure que él/ella esté vestido/a con el uniforme apropiado mañana. Una continua violación de la póliza de uniforme resultará en un aumento de la multa con cada notificación. El dinero de las multas se utilizará para el fondo de ayuda para estudiantes.</p> | | |
| Teacher Signature / Firma de Maestra: | | Parent or Guardian Signature / Firma de Padres o Guardián |

Al firmar y fechar este acuerdo, usted indica que usted ha leído, entiende y se registrá por este acuerdo.

Nombre del Estudiante: _____

Firma: _____ Fecha: _____

**Los estudiantes en los grados del 5-8 también deberán firmar mostrando que leyeron, entendieron y prometen registrarse por esta política de uniforme.*

Nombre de Padre/Guardián: _____

Firma: _____ Fecha: _____



EAST VALLEY ADVENTIST SCHOOL

List of Persons Authorized to Provide Rides to My Student Lista de Personas Autorizadas para Transportar a Mi Alumno 2018-2019

Student Name/Nombre de Alumno _____ Grade/Grado _____

**The following persons are authorized to give a ride to my student:
Las siguientes personas están autorizadas para transportar a mi alumno:**

Name/Nombre _____ Phone/Teléfono: _____

Relationship to the student/Relación al alumno: _____

Name/Nombre _____ Phone/Teléfono: _____

Relationship to the student/Relación al alumno: _____

Name/Nombre _____ Phone/Teléfono: _____

Relationship to the student/Relación al alumno: _____

Name/Nombre _____ Phone/Teléfono: _____

Relationship to the student/Relación al alumno: _____

Name/Nombre _____ Phone/Teléfono: _____

Relationship to the student/Relación al alumno: _____

PLEASE NOTE THAT IF A PERSON NOT NAMED ON THIS LIST COMES TO PICK UP YOUR STUDENT, EVAS IS NOT AUTHORIZED TO RELEASE YOUR CHILD TO THAT PERSON.

POR FAVOR TOMEN EN CUENTA QUE SI UNA PERSONA QUE NO ESTA NOMBRADA EN ESTA LISTA VIENE A RECOGER A SU ALUMNO, EVAS NO ESTA AUTORIZADA PARA ENTREGAR A SU ALUMNO A ESA PERSONA.

Mother's Signature/Firma de Mama _____ Date/Fecha _____

Father's Signature/Firma de Papa _____ Date/Fecha _____

Guardian's Signature/Firma de Guardian: _____ Date/Fecha _____



Southern California Conference Schools
OFFICE OF EDUCATION

PHOTOGRAPHIC MODEL RELEASE

STUDENT NAME: _____ GRADUATION YEAR: _____

The undersigned hereby declares that he/she understands that Southern California Conference has taken, or will take his/her photograph(s) and/or video(s) during the course of his/her enrollment at his/her school. The photograph(s) and/or video(s) will be used by the conference for its own educational and public relations purposes, including but not limited to its internet web site and additional promotional brochures and materials.

The Southern California Conference shall retain the negative(s), positive(s), digital image(s), video(s), or any other format of said photograph(s) and/or video(s) as its own property.

Furthermore, the undersigned consents to the use of said photograph(s) and/or video(s) and any format of them prior to their use.

If the undersigned is under the age of eighteen (18), his/her parent or legal guardian has read and understands the foregoing and consents to all the terms herein.

Student Signature

Date

The student/model is under the age of eighteen (18) and the undersigned is his/her parent or legal guardian and approves and consents to all of the foregoing.

Parent/Guardian Signature

Date



East Valley Adventist School

Financial Agreement

East Valley Adventist School's priority is to provide an excellent academic experience for your student in the best way possible. In order to provide this service, we expect that you, as your child's guardian, understand and cooperate with our financial policy as it is stated below.

Tuition at EVAS for the 2018-2019 school year is as follows:

| | |
|---|-----------------------|
| Registration Fee - Grades K-8 | \$300 |
| Tuition for SDA Church Members | \$3,250 / school year |
| - 10 Payments (August - May) | \$325 / month |
| Tuition for Non-SDA Church Members | \$3,300 / year |
| - 10 Payments (August - May) | \$330 / month |
| 5% discount when the full year is paid in advance | |
| 5% discount for two or more students in the same family | |

****Please note that the above costs do not include miscellaneous fees, field trips, uniforms or day care charges, these will be added to your bill as appropriate. Discounts are available at the discretion of EVAS.****

Please initial each section after you read it.

1. _____ Registration and first payment is due by the first day of school.
2. _____ Statements will be sent out by the 5th of the month for payments due by the 20th.
3. _____ Payments received after the 25th of the month will incur a \$15 late fee and a reminder will be sent in the mail.
4. _____ If we have not received payment by the 30th of the month, we will be calling to remind you.
5. _____ If we have not received payment by the 5th of the following month, we will ask that you make an appointment to meet with us to discuss your situation.
6. _____ If in any case your account were ever to reach a place where two (2) months tuition is owed to EVAS, you will receive a copy of this sheet signed by you and a letter that your child will be placed on financial suspension until this matter can be resolved.
7. _____ If in any case the registration fee is paid and a family decides to un-enroll their student from EVAS, half of what was paid will be returned.

Please sign below indicating that you understand that EVAS is supplying a service to you and your children and that you agree to pay according to this financial policy and understand the penalties involved if you do not follow this policy.

Student's Name: _____

Parent/Guardian's Name: _____

Signature: _____ Date: _____

2018-2019 Financial Plan



East Valley Adventist School, 3554 Maine Avenue, Baldwin Park, CA 91706
(626) 960-4751

Parent/Guardian Name: _____

Student Name: _____ Grade: _____

Student Name: _____ Grade: _____

Student Name: _____ Grade: _____

Please check one:

_____ SDA Member of the _____ Church

_____ Not a Seventh-day Adventist

| | |
|--------------------------------|----------|
| Registration Fee | \$300.00 |
| Discount | |
| Total Registration Paid | |

If in any case the registration fee is paid and a family decides to un-enroll their student from EVAS, half of what was paid will be returned.

| <u>Fee</u> | <u>Annually</u> | <u>Monthly</u> |
|------------------------------|-----------------|----------------|
| Tuition | | |
| EVAS Scholarship | | |
| Church Assistance | | |
| Other Scholarship | | |
| Other | | |
| Total Tuition Payment | | |

I understand the above plan and will pay the specified amount to EVAS for the services provided.

Parent Signature: _____ Date: _____