



APPLICATION FOR ADMISSION
JUNIOR KINDERGARTEN

*“Joining with the family to realize personal academic excellence
and Christ-like character in each student.”*



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Dear Parent(s):

Thank you for your inquiry into Bears paw Christian School (BCS). As the Principal, I would like to give you a brief introduction to the school (God's school) and explain the purpose and mission of BCS.

Bears paw Christian School was founded in 1991 in the city of Calgary as Heritage Christian School Society. With the merger of two North West campuses, the current BCS was established in 1998. A grassroots commitment from families and friends of BCS raised approximately \$1.5 M to build our present facility. On September 14, 1998 classes began for 352 students in the new 28,000 square foot building. The school, positioned on 38 acres, is located at 144th Avenue and 69th Street, NW. We enjoy a picturesque setting with views of a wide blue sky and rolling hills.

The mission of BCS is "Joining with the family to realize personal academic excellence and Christ-like character in each student." Striving to fulfill the goal and mission could not be accomplished without the dedication of amazing teachers who proclaim that Jesus Christ is Lord over all areas of their life. Our teachers are certified by Alberta Education and have a passion for children.

As Principal, and as a parent of two children who have graduated from BCS, I am proud of this school and have seen the Lord's blessings in the work here as well as in the lives of our children.

We are eager to share our love of Christian education with prospective parents. We look forward to meeting you, and we welcome you to the BCS family.

May the Lord guide and bless you in your educational choices for your children.

Sincerely,

Judy Huffman
Principal

BCS JUNIOR KINDERGARTEN PROGRAM

2010-2011

Junior Kindergarten is a half-day program (3 hours each day) that runs on Tuesday and Thursday mornings. The cost for this program is \$180 per month plus a \$20 Field Trip Fee (one-time fee) and will follow a similar schedule to the school calendar, from September to June. However, the program begins the second full week of regular BCS classes and ends the first week in June. ***An initial deposit of first and last month's tuition plus the Field Trip Fee will be required to hold a space in Junior Kindergarten.***

Please Note: Because Alberta Learning does not provide education grants for this program; the fee for Junior Kindergarten will NOT be used in the calculation of a family maximum. The program will focus on developmentally appropriate activities, using play as a constructive way of encouraging active learning, promoting positive socialization with other children, and preparing children for Kindergarten. All Junior Kindergarten students are required to complete and follow the BCS general application process, including an interview. If you have any questions, please contact Kevin Bernhardt, Elementary Vice-Principal at kbernhardt@bears paw school.com or 403-295-2566 ext. 1112.

ENTRANCE REQUIREMENTS

Junior Kindergarten is for children who have turned 4 by October 31, 2010 and are able to use washroom facilities independently. It is also important that children can separate without excessive anxiety from their parent/caregiver. If a child has started the program and it is found that the child is not able to use washroom facilities independently or cannot separate without excessive anxiety, the registration will be cancelled until such time as the child is ready. Since all children mature at varying rates (emotionally and socially), some children are not ready for Junior Kindergarten at age 4. If, after attending the program for a month, the child is still very anxious without their parent, or if the child's behaviour requires teachers to provide excessive one on one attention to the child, parents will be contacted to offer suggestions/resources for having the child attend an alternative program. As well, this is not a program designed to accommodate children with special needs. If a learning need or deficit is discovered, the parents will be contacted to offer suggestion/resources for attending an alternative program.

ENGLISH AS A SECOND LANGUAGE STUDENTS AND SPECIAL NEEDS STUDENTS

BCS requires a registering student to be able to understand spoken English and be able to communicate effectively in English in order to be successful in the program. Parents will also need to have to be able to communicate to staff in efficient English.

BCS has limited support for students with learning and behavioural needs, and may decline to accept a child into Junior Kindergarten if it is felt the program is not equipped appropriately or if the expertise is lacking to adequately provide a program for a particular child's needs.

ACCEPTANCE INTO SENIOR KINDERGARTEN

Acceptance into Junior Kindergarten does not guarantee acceptance into Senior Kindergarten the following year. Families who are interested in having their child progress into Senior Kindergarten will have to complete an application package and have their child tested for Senior Kindergarten readiness towards the end of the Junior Kindergarten year.

WITHDRAWAL FROM THE PROGRAM

It is assumed that parents have put time and careful consideration into selecting BCS for their child's Junior Kindergarten experience. The BCS staff will strive to work with families to make the Junior Kindergarten experience a positive one for both parents and children. Withdrawals will **only** be considered in cases where children are not coping well in the program, or where BCS staff recommends alternative placement for the child. Refund of the last month's deposit fee will **only** be given under these exceptional circumstances, and parents agree that if they withdraw their child prior to or during the school year, they forfeit this deposit. There will be **NO EXCEPTIONS** to this policy.

FIELD TRIPS

Junior Kindergarten students may periodically take field trips within the city of Calgary. These trips will have definite educational value and are an integral part of the school program. The cost of such trips will be in addition to the monthly fee. A special notice will be provided with information naming the site to be visited and the times. All parents must sign a release for their child to attend field trips. Parent volunteers may be requested, however, siblings are **not** allowed on field trips.

SNACKS

Parents are responsible to provide a nutritious "**nut-free**" snack along with a drink for Junior Kindergarten students. When it is your child's birthday, we ask that you send in a nut-free snack for each child in the class. BCS has a nut-free policy, which asks that children not bring any snacks that contain nuts due to the high occurrence of nut allergies in children.

MEDICATION

BCS staff will not administer any medication to Junior Kindergarten students; exceptions are EpiPens, Benadryl, or asthma inhalers, which will be administered as needed in an emergency.

PARENT VOLUNTEERS

Parents are crucial members of the Junior Kindergarten program. Each class we ask that a parent volunteer participates in assisting the classroom teacher. **When you volunteer, your child will be Student of the Day.** A schedule will be organized at the beginning of the year with parent volunteer days approximately once every six weeks. If a parent is unable to participate, it is his or her responsibility to find a replacement.

NEW STUDENT APPLICATION

Please Provide Bears paw Christian School with:

- A Copy of the Child's Birth Certificate**
- A Copy of the Child's Alberta Health Care Card**
- A Deposit Cheque (Made out to Bears paw Christian School) for the first and last month's tuition plus the Field Trip Fee(\$380.00).**

Full name of child: _____

Gender: _____ Date of birth (MM/DD/YYYY): _____

Home Phone: _____

Address: _____

City: _____ Prov.: _____ Postal Code: _____

Citizenship: _____

Father's or Legal Guardian's Name: _____

Work Phone: _____ Cell: _____

Email 1: _____ Email 2: _____

Address (if different than student) _____

City: _____ Prov.: _____ Postal Code: _____

(Check all that apply)

- Lives With Legal Custody OK to pick up from school Receives mailings from school

Mother's or Legal Guardian's Name: _____

Work Phone: _____ Cell: _____

Email 1: _____ Email 2: _____

Address (if different than student) _____

City: _____ Prov.: _____ Postal Code: _____

(Check all that apply)

- Lives With Legal Custody OK to pick up from school Receives mailings from school

Emergency Contact Name: _____

Relation to child or family (e.g. Family Friend, Cousin, Aunt) _____

Home Phone: _____ Cell: _____

Work Phone: _____ Email: _____

Please answer the following questions:

1) Has your child previously attended Preschool? Daycare? Dayhome? If so, please specify name of organization and year(s) attended.

2) Does your child speak and understand English? _____

3) What other language(s) is/are spoken in your home? _____

4) Is your child able to use washroom facilities independently? _____

5) How long ago was your child toilet trained? _____

6) Does your child have any allergies or health concerns that we should be aware of? If so, please state. ***If your child has a life-threatening allergy or medical concern, please complete the 'Severe Allergy/Health Concern Alert' Form***

7) Has your child been involved in organized activities (such as Sunday school or sports teams) where a parent is not the leader? Please describe.

8) Do you anticipate that your child may experience separation anxiety?

9) Has your child had experience correctly using: (Check all that apply)

scissors crayons felt pens (markers) pencil (using a proper grip)

10) What are your child's favourite activities or special interests?

11) Does your child have any fears or anxieties that the teachers should be aware of?

12) Would you characterize your child as a leader? A follower? Always in charge? Please explain.

13) List anything you feel would help the teachers in meeting your child's needs.

14) Is there any person(s) NOT allowed access to your child? Please provide details.

15) Are you able to volunteer during class times? Yes No

If not, are you willing to assist with out-of-school preparations for class activities?

Yes No

(A Classroom Room Parent will be in contact with you to set up volunteer dates)

STATEMENT OF FAITH

Upon enrollment of your child(ren) at BCS, parents become members of Bears paw Christian School Society. Members of the Society are united by their acceptance of the following statement of faith. They are joined together for the purpose of spiritual growth, academic progress and personal development. Together we seek to honour Christ by integrating faith and learning while our hearts and lives reflect the process of maturing in Christ. We are an inter-denominational Christian school comprised of families who agree with our statement of faith.

- We believe that there is one God, who is infinitely perfect and eternally existent in three equal persons: the Father, the Son and the Holy Spirit.
- We believe the Bible to be the inerrant, inspired and only authoritative, written Word of God.
- We believe God is the creator of heaven and earth, and upholds and directs all things according to His will and by His power.
- We believe in the full deity and full humanity of our Lord Jesus Christ, in His pre-existence, in His virgin birth, in His sinless life, in His atoning death, in His bodily resurrection, in His ascension to the right hand of the Father, and in His personal return in power and glory to establish His kingdom of righteousness and peace.
- We believe in the Holy Spirit, sent to indwell, guide, teach and empower the believer; and to convict the world of sin, righteousness and judgment.
- We believe that every believer should walk in obedience to God's will as revealed in the Bible; through faith in prayer and in God's promises, and above all, through love toward God and toward others.
- We believe that the church is the body of born-again believers in fellowship with Christ and with fellow believers.
- We believe in the resurrection of all people, the saints to everlasting joy and bliss, and the lost to judgment and eternal separation from God.
- We believe that it is God's intent that each believer should maintain regular attendance at a Bible-believing, Christ-confessing Church.

PARENT COVENANT

- I fully agree with and wholeheartedly support the Statement of Faith.
- I am committed to support the mission, vision and school policies as stated in the Parent/Student Handbook.
- I will ensure that my child(ren) regularly attend(s) school and arrive at school on time.
- I am committed to communicating regularly with my child's teachers.
- I will practice the principle found in Matthew 18 where I am asked to resolve any difficulties with school personnel directly. If the conflict is unresolved, I will discuss the matter with the next person in authority. The line of authority is as follows: teacher, vice-principal, principal, president.
- I will support the school in maintaining a high standard of Christian conduct for its students. I accept that BCS administration has the right to discipline my child(ren) if he/she does not respect its standards.
- I will regularly attend functions requiring parent participation.

Father/Guardian Signature

Mother/Guardian Signature

PERSONAL INFORMATION PROTECTION ACT (PIPA) FORM

In accordance with the Alberta Personal Information Privacy Act c. P-6.5, BCS is diligent to protect the information that you provide to us. ***We require that parents initial their choice and complete only one form per family.***

1) Parent Contact Information (Please initial one)

In order to effectively administer the activities of the school, it is desirable to provide parent contact information to Bears paw Christian School (BCS) staff and volunteers.

_____ I consent to BCS disclosing my personal contact information as necessary. My contact information may be used for class lists, team rosters, school directories, volunteer directories, and any other activities reasonably related to the operation of the educational and extra-curricular activities of BCS.

_____ I do not consent to the disclosure of my personal contact information for the purposes described above.

2) Student Photographs (Please initial one)

_____ I also consent to photographs and/or videos of my child/children being used on class web pages in ParentsWeb and in BCS's promotional material (including web sites). My child's name will not be associated with any photograph or video that is used in promotional material or on BCS's promotional web site (www.bears pawschool.com).

_____ I do not consent to the use of photographs and/or videos as described above.

_____ Parent/Guardian Signature

_____ Date

Student Last Name	Student First Name	Grade Student is Entering
		J.K.

*Please note that this form is not to be altered. No additions or subtractions will be accepted.

SEVERE ALLERGY/HEALTH CONCERN ALERT FORM

If your child has a life-threatening allergy or medical concern, please complete this form.

The information on this form will be posted with a photo in the staff room and made available in the classroom in order to respond to potential emergency situations.

Name of Student: _____ Medic Alert ID: _____

DESCRIPTION OF ALLERGY & PRECAUTIONS

This student has a DANGEROUS, life-threatening allergy to the following: _____

SYMPTOMS FOLLOWING EXPOSURE TO A PARTICULAR MATERIAL CAN INCLUDE: *(check which apply)*

- | | |
|--|--|
| <input type="checkbox"/> hives and itchiness on any part of the body; | <input type="checkbox"/> nausea, vomiting, diarrhea; |
| <input type="checkbox"/> coughing, wheezing or change of voice; | <input type="checkbox"/> difficulty breathing or swallowing; |
| <input type="checkbox"/> fainting or loss of consciousness; | <input type="checkbox"/> panic or sense of doom; |
| <input type="checkbox"/> swelling of any body parts, especially eyelids, lips, face or tongue; | <input type="checkbox"/> throat tightness or closing; |
| <input type="checkbox"/> other, please specify _____ | |

EMERGENCY MEASURES *(check applicable measures)*

- Get EpiPen® (epinephrine) or other Medication** and administer immediately.
- HAVE SOMEONE CALL AN AMBULANCE** and advise of need for an **EpiPen® (epinephrine)**.
- Unless student is resisting, lay student down, tilt head back and elevate legs.
- Cover and reassure student.
- Record the time at which **EpiPen® (epinephrine)** was administered.
- Have someone call the parent.
- If the ambulance has not arrived in 10-15 minutes, and breathing difficulties are present, administer a second **EpiPen® (epinephrine)**.
- Even if symptoms subside, take the student to the hospital immediately because there may be a delayed reaction.
- If possible, have school staff member accompany the student to the hospital.
- Provide ambulance and/or hospital personnel with a copy of the Severe Allergy/Health Concern Alert Form for the student and the time which the **EpiPen® (epinephrine) or Medication** was administered.

I agree that the school may post my student's picture, take the Emergency Measures and that this information will be shared, as necessary, with the staff of the school and health care providers.

Parent/Guardian Signature

Date

PHYSICIAN INFORMATION (To be completed by a physician)

Nature of Allergy/Allergens/Medical Concerns: _____

Symptoms of Reaction: _____

Recommended Response to Reaction: _____

Medication: _____ Dosage: _____

Suggested Location of Medication (ie: backpack, front pouch) _____

Additional Instructions or Information: _____

Physician Name

Physician Signature

Telephone

Date



CHARACTER REFERENCE FORM

ONE FORM COMPLETED PER STUDENT

Name of Student Applying: _____
 Your Name: _____ Title: _____
 Church/Organization: _____ Phone: _____

CHURCH LEADER: To be completed by Pastor, Youth Leader, Children’s Minister or Sunday School Leader/Teacher.

The above student has applied for acceptance at our school. It is our desire to develop a supportive relationship between home, school and church. **Please assist us by completing this form and returning this form directly to the school by fax (403) 275-8170.** New families are not interviewed until this form is received. BCS will keep the contents of this questionnaire confidential. Thank you for taking the time to fill this form out. Your input is very valuable.

- How long have you known the student? _____ In what relationship? _____
- How often are you in contact with the student? Weekly Monthly Occasionally Seldom
- Please place a check in one box in each category.

Participation	Self-Control	Integrity	Friendships
<input type="checkbox"/> High level of participation in activities	<input type="checkbox"/> Maintains a high level of self-control during activities	<input type="checkbox"/> Consistently responsible and honest – owns own behaviour and actions	<input type="checkbox"/> Gets along extremely well with other peers
<input type="checkbox"/> Consistently active participator in activities	<input type="checkbox"/> Overall a good level of self-control during activities	<input type="checkbox"/> Generally responsible and honest yet will own behaviour and actions.	<input type="checkbox"/> Liked by others and overall gets along well with peers
<input type="checkbox"/> Inconsistent participator	<input type="checkbox"/> Blurts out/yells; uses inappropriate language	<input type="checkbox"/> Concern in honesty or will not own behaviour or actions	<input type="checkbox"/> Avoided by peers
<input type="checkbox"/> Will not participate in activities	<input type="checkbox"/> Will wander away from/leave activities.	<input type="checkbox"/> No Opportunity to observe	<input type="checkbox"/> Concern(s) observed in peer relationships

4. Place a check mark beside the word/phrase(s) that characterizes this student (to the best of your experiences with them).

- | | |
|---|---|
| <input type="checkbox"/> positive attitude | <input type="checkbox"/> likes to be the centre of attention |
| <input type="checkbox"/> participates in group activities | <input type="checkbox"/> inappropriate emotional responses |
| <input type="checkbox"/> gets along well with peers | <input type="checkbox"/> cannot handle disappointment |
| <input type="checkbox"/> forms friendships easily | <input type="checkbox"/> changes moods often |
| <input type="checkbox"/> polite towards others | <input type="checkbox"/> easily angered |
| <input type="checkbox"/> thankful and appreciative | <input type="checkbox"/> likes to do things his/her own way |
| <input type="checkbox"/> teachable spirit | <input type="checkbox"/> occasionally rebellious or disrespectful |
| <input type="checkbox"/> assertive in a positive way | <input type="checkbox"/> controlling |
| <input type="checkbox"/> obedient towards parents | <input type="checkbox"/> aggressive towards others |
| <input type="checkbox"/> respects authority | <input type="checkbox"/> easily influenced by peers |
| <input type="checkbox"/> emotionally mature for age | <input type="checkbox"/> needs continual parental assurance |
| <input type="checkbox"/> creative | <input type="checkbox"/> sometimes takes advantage of people |
| <input type="checkbox"/> heart after God | <input type="checkbox"/> can be withdrawn |
| <input type="checkbox"/> spiritual maturity | <input type="checkbox"/> quiet or shy |
| <input type="checkbox"/> playful | |

5. Based on your knowledge of this student, would you recommend acceptance?
 ___ Yes ___ No If No, please explain: _____

6. In 2 or 3 sentences, please describe your experience with this student.

 Signature of Reference Date