



CORNERSTONE CHRISTIAN SCHOOL

Transitional Kindergarten – Stage 1

A Ministry of Gracepoint Gospel Fellowship

384 NEW HEMPSTEAD ROAD, NEW CITY, NY 10956

845-634-7977 (PH) / 845-634-7979 (FAX) / CCSOFFICE@CCSNY.ORG

ADMISSIONS PROCESS

The Admissions Committee welcomes applications from parents who fully understand and support the school's philosophy, statement of faith, objectives and standards. Parents should believe that the Bible is the inerrant Word of God, and uphold biblical standards and not oppose the biblical teaching and biblical standards of the school.

Our Mission is to partner with parents to develop well-educated, spiritually mature persons, dedicated to Christ, equipped to contribute to His church, society, and their own well-being.

To apply for admission to CCS Transitional Kindergarten, parents of prospective students should do the following:

1. **Student Application** including the *Statement of Faith* and *Affirmation Statement* must be completed and signed by both parents
2. **Application Fee** Enclose \$125 non-refundable fee for each student seeking admission with the Student Application (Check or money order payable to Cornerstone Christian School)
3. **Teacher Recommendation Form** Give to your child's current teacher and request completion of it as soon as possible

Return the Student Application with fee to: CCS Transitional Kindergarten – Stage 1

Attn: Office of Admissions
384 New Hempstead Road
New City, NY 10956

Applications that are received and fully completed will be reviewed. After they are reviewed, a student screening will be scheduled to continue the Admissions Process. Additional Registration documents will be required following acceptance to the school.

5. **Birth Certificate** - A copy of your child's birth certificate. (All incoming Kindergarteners must be five years old by December 1st)
6. **Emergency Contact / Medical Information** – Phone numbers, email addresses and medical history will be required

NON-DISCRIMINATORY POLICY

Cornerstone Christian School admits pupils of any sex, race, color, nationality and ethnic origin to all rights, privileges, programs and activities generally accorded or made available to pupils at the school. It does not discriminate on the basis of sex, race, color, nationality or ethnic origin in the administration of its admissions and educational policies, financial aid, scholarship programs, athletic and other school-administered programs.



CORNERSTONE CHRISTIAN SCHOOL
 "...with Jesus Christ himself as the chief cornerstone."
 -Ephesians 2:20

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 384 New Hempstead Road • New City, NY 10956 • www.ccsny.org
 PHONE: (845)634-7977 • FAX: (845)634-7979

Transitional Kindergarten-Stage 1 Application

A Non-Refundable Application Fee of \$125 Must Be Submitted with the Application in Order for the Application Process to continue.

Applicant Information *(Please print all information)*

APPLYING FOR GRADE _____ STARTING DATE _____ Date of Application _____

Last Name _____ First Name _____ Middle Name _____

Address (Number, Street, Apt.#) _____

City _____ State _____ Zip Code _____

Home Phone # _____ School District of Residence _____

Date of Birth _____ Birthplace (City and State) _____

For office use only: ____ / ____ / ____ Date Application rec'd. ____ / ____ / ____ Date Application fee paid <input type="checkbox"/> Cash or <input type="checkbox"/> Check # _____
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Present School Name _____ Current Grade _____

Street Address _____ City, State and Zip Code _____ Phone # _____

PLEASE CHECK ALL THAT APPLY <i>(These questions are optional)</i>: <input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> African American <input type="checkbox"/> American Indian <input type="checkbox"/> Asian/Pacific Islands <input type="checkbox"/> Caucasian <input type="checkbox"/> Hispanic <input type="checkbox"/> Other Language(s) spoken most often at home: _____
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List all schools previously attended (most recent first):

Name of School	Address	Grade(s) Attended	Year(s) Attended	Principal

Has student repeated a grade? _____ If yes, which grade and why? _____

- 1 Has applicant ever been placed on "Out-of-School or In-School" suspension? Yes* No
- 2 Has applicant had detention two times or more during the past school year? Yes* No
- 3 Has applicant any history of an unusual physical or emotional condition which has required professional attention? Yes* No
- 4 Has applicant ever been evaluated or classified by a child study team? Yes* No
- 5 Does applicant have any communicable disease(s) for which special precautions need to be taken? Yes* No

****If you answered YES to any of the above, please explain using this space:***

- Question # ___ Explanation _____

- Question # ___ Explanation _____

CCS TRANSITIONAL KINDERGARTEN - STAGE 1 - STATEMENT OF FAITH

There is one God who is infinitely perfect, existing in three persons: Father, Son and Holy Spirit. They are never identical as to person, nor confused as to relation, nor divided in respect to the Godhead, nor opposed as to cooperation.

Jesus Christ, the Son, having been conceived by the Holy Spirit and born of a virgin, is true God and true man. He died upon the cross, as a substitutionary sacrifice, and all who repent of their sins and believe in Him are justified through His shed blood. He arose from the dead according to the scriptures and is now at the right hand of the Father as our High Priest.

The Holy Spirit is a divine person sent to indwell, guide, teach and empower the believer and convince the world of sin, righteousness and judgment. The Scriptures, both the Old and New Testament inerrant as originally given, were verbally inspired by God and are a complete revelation of His will for the salvation of man. They constitute the divine and final authority for Christian faith and practice.

Man, originally created in the image of God, fell through disobedience; consequently, the human race was separated from God. From this condition, man can be saved only by the grace of God through the atoning work of Christ and the agency of the Holy Spirit. The portion of the impenitent and the unbeliever is existence forever in conscious torment, while that of the believer is everlasting joy and bliss.

Salvation has been provided through Jesus Christ for all men. Those who repent and believe in Him are born again of the Holy Spirit, receive the gift of eternal life, and become the children of God. It is the will of God that each believer be filled with the Holy Spirit, sanctified wholly, separated from sin and the world, and fully dedicated to the will of God, thereby receiving power for holy living and effective service.

The Church consists of all those who believe in the Lord Jesus Christ, are redeemed through His blood, and are regenerated by the Holy Spirit. The local church is a body of believers who are joined together for worship, the study of God's Word, proclaiming the Gospel, and Christian service.

There shall be bodily resurrection of the just unto eternal life, the unjust unto judgment. The Second Coming of the Lord is imminent. This hope is a vital truth, which is an incentive to holy living and faithful service.

I am in agreement with Cornerstone's Statement of Faith and will support the school's doctrinal position.

<i>Please print your name above</i>	<i>Please print your name above</i>
_____/_____/_____ <i>Signature of Father/Guardian</i>	_____/_____/_____ <i>Signature of Mother/Guardian</i>
_____ <i>Date</i>	_____ <i>Date</i>

Family Information

Father/Guardian

Last Name _____ First _____ MI _____

Address _____
_____ Street _____ (APT #) _____

Town _____ State _____ Zip Code _____

Phone # (_____) _____

Cell Phone # (_____) _____

E-mail address _____

Social Security # _____

Employer _____

Business phone # (_____) _____

Education: High school _____# years completed

College _____# years completed

Marital status: Married Separated Divorced

Widowed Remarried Single

Church affiliation _____

Address _____
Street _____

Town _____ State _____ Zip Code _____

Senior Pastor _____

Have you accepted Jesus Christ as your personal Savior? _____

If yes, please share how and when that decision was made:

Mother/Guardian

Last Name _____ First _____ MI _____

Address _____
_____ Street _____ (APT #) _____

Town _____ State _____ Zip Code _____

Phone # (_____) _____

Cell Phone # (_____) _____

E-mail address _____

Social Security # _____

Employer _____

Business phone # (_____) _____

Education: High school _____# years completed

College _____# years completed

Marital status: Married Separated Divorced

Widowed Remarried Single

Church affiliation _____

Address _____
Street _____

Town _____ State _____ Zip Code _____

Senior Pastor _____

Have you accepted Jesus Christ as your personal Savior? _____

If yes, please share how and when that decision was made:

List the names of all your children:

Name	Date of Birth	Current School	Current grade or highest grade completed in school

APPLICANT LIVES WITH:

Both parents Mother Father Other _____

For all school contacts, indicate primary e-mail _____

What would you like the Cornerstone Christian School to know about your child? Please include his/her strengths, weaknesses, greatest gifts, passions, etc.

Why do you want your child to attend CCS Transitional Kindergarten?

How did you hear about CCS Transitional Kindergarten?

Friend/Relative: _____ Name Current CCS Family? Yes No

Open House Website Social Media Newspaper/Advertising Other _____

*****AFFIRMATION STATEMENT of PARENT or GUARDIAN*****

We understand that admission to CCS Transitional Kindergarten is a privilege and not a right. We agree that our child's admission, continuance in Cornerstone, and graduation are subject to the right of the authorities of Cornerstone Christian School to require our child's withdrawal for scholastic, disciplinary, or other reasons deemed sufficient by them.

In the event that I/we fail to timely pay tuition and expenses payable hereunder, I/we agree to pay any legal fees, costs, and disbursements incurred by CCS Transitional Kindergarten, to recover payment. Students will not be permitted to attend school if the tuition becomes 60 days past due.

Please print your name above

Please print your name above

_____/_____/_____
Signature of Father/Guardian Date

_____/_____/_____
Signature of Mother/Guardian Date

CCS TRANSITIONAL KINDERGARTEN – STAGE 1

Teacher Recommendation Form

TO THE PARENTS: Please read and fill in the top portion of this form, then give it to a teacher who knows your child well at your child's present school.

Name: _____
(Last) (First) (Middle)

Present School: _____

To the Teacher: Your assessment of the student will be kept confidential and will play an important part in our admissions process. We appreciate the time and effort you put into writing this evaluation.

Please mail this form to: Cornerstone Christian School
Attention: Office of Admissions
384 New Hempstead Road
New City, NY 10956

Or FAX: 845-634-7979

Teacher's Name: _____

School Address: _____

Position: _____ Phone: _____

How do you know the student? In what role or capacity have you worked with him or her?

(Circle One)

Please assess the degree to which the student...	Highest.....	Lowest				
Demonstrates excitement for learning	5	4	3	2	1	NA
Respects the rights and feelings of others	5	4	3	2	1	NA
Is self-motivated	5	4	3	2	1	NA
Has good work habits	5	4	3	2	1	NA
Organizes thoughts	5	4	3	2	1	NA
Articulates thoughts	5	4	3	2	1	NA
Writes clearly and expressively	5	4	3	2	1	NA
Understands abstract concepts	5	4	3	2	1	NA
Takes pride in his/her work	5	4	3	2	1	NA
Responds positively to discipline	5	4	3	2	1	NA
Is involved in classroom activities	5	4	3	2	1	NA
Exercises age-appropriate judgment	5	4	3	2	1	NA
Exhibits intellectual curiosity	5	4	3	2	1	NA
Demonstrates leadership	5	4	3	2	1	NA
Has listening skills	5	4	3	2	1	NA
Can follow directions	5	4	3	2	1	NA
Completes assignments	5	4	3	2	1	NA

CCS TRANSITIONAL KINDERGARTEN – STAGE 1

Teacher Recommendation Form

➤ Please comment on what you would consider the student's chief academic strength. Please give examples.

➤ Please comment on what you would consider the student's chief academic weakness. Please give examples.

How often have you observed the student exhibiting the following traits?

Often = O Sometimes = S Rarely = R Never = N

- _____ Argumentative behavior
- _____ Defies adult authority
- _____ Displays unprovoked aggression or violence towards others
- _____ Exhibits impulsive behavior
- _____ Exhibits disruptive behavior
- _____ Complains about things in general
- _____ Is easily disappointed
- _____ Tends to be non-compliant
- _____ Tends to react strongly
- _____ Is avoided by other children

Thank you for your time and consideration in this matter.

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