



JOHN KNOX CHRISTIAN SCHOOL

2232 Sheridan Garden Dr. Oakville, Ontario L6J 7T1 PH: 905-829-8048 W: www.jkcs-oakville.ca E: office@jkcs-oakville.ca

Parents Information:

Father

- First Name: _____ Last Name: _____
- Address:
 - Street Address: _____
 - City: _____ Postal Code: _____
- Home Phone: _____ Cell Phone: _____
- Business Phone: _____ Employer: _____
- Occupation: _____
- Email(s): _____

Mother

- First Name: _____ Last Name: _____
- Address: ☐ (same as Father's):
 - Street Address: _____
 - City: _____ Postal Code: _____
- Home Phone: _____ Cell Phone: _____
- Business Phone: _____ Employer: _____
- Occupation: _____
- Email(s): _____

Church Information (for reference check):

- Church Name: _____
- Pastor's Name: _____ Phone: _____
- Church Address:
 - Street address: _____
 - City: _____ Postal Code: _____

Transportation Information:

- Will your child(ren) need to take the bus: Yes ☐ No ☐ (*Bus routes are established in July*)
- Will your child(ren) be driven to school: Yes ☐ No ☐
- Who will be picking up child(ren): Father ☐ Mother ☐
- Other people who have permission to pick up child(ren):
- Name(s) & Relationship(s): _____

Student(s) Information:

Oldest Student

- First Name: _____ Last Name: _____
- Address: same as Father's ☐ same as Mother's ☐
- Other: _____

- Birth Date: Month _____ Day _____ Year _____
- Health Card Number: _____ - _____ - _____
- Gender: Female ☐ Male ☐
- Allergies: **YES** ☐ * no ☐ Asthma: **YES** ☐ * no ☐
 - If **YES**, please indicate allergy: _____
 - Is this allergy anaphylactic?: **YES** ☐ * no ☐
- **If yes, please provide the school with an epi-pen and/or asthma medication and completed Critical Medical Alert form (found on school website) on the first day of school.**
- Photocopy of **Latest Learning Report Attached**: Yes ☐ No ☐
- Grade Level applying for: _____ Starting Date: _____
 - If applying for Kindergarten: **Part-time** (Mondays, Wednesdays & Fridays) ☐ or **Full-time** ☐
- Current School Information (if applicable):
 - Name of current school attended: _____
 - Address: _____
 - Fax: _____ Phone: _____
 - We give permission to contact current school if necessary ☐ Yes ☐ No
- Tell us more about your child (likes, dislikes, personality traits): _____

- Tell us about any special needs or concerns (educational, social or physical): _____

- Please check:
 - Speaks any languages other than English ☐ Yes, we speak _____ at home ☐ No
 - Has a solid understanding of the English language both written and spoken ☐ Yes ☐ No
 - Has an Individual Education Plans (IEP) ☐ Yes (Please attach a copy) ☐ No
 - Has a Psychological Assessment or other testing results? ☐ Yes (Please attach copies) ☐ No
 - Has an Identified Learning Disability? ☐ Yes (Please attach any documentation) ☐ No
 - Has received ANY additional tutoring help (in school or outside of school) ☐ Yes ☐ No

Next Oldest Student

- First Name: _____ Last Name: _____
- Address: *same as Father's* ☐ *same as Mother's* ☐ Other: _____
- Birth Date: Month _____ Day _____ Year _____
- Health Card Number: _____ - _____ - _____
- Gender: Female ☐ Male ☐
- Allergies: **YES** ☐ * no ☐ Asthma: **YES** ☐ * no ☐
 - If **YES**, please indicate allergy: _____
 - Is this allergy anaphylactic?: **YES** ☐ * no ☐
 - **If yes, please provide the school with an epi-pen and/or asthma medication and completed Critical Medical Alert form (found on school website) on the first day of school.**
- Photocopy of **Latest Learning Report Attached**: Yes ☐ No ☐
- Grade Level applying for: _____ Starting Date: _____
 - If applying for Kindergarten: **Part-time** (Mondays, Wednesdays & Fridays) ☐ or **Full-time** ☐
- Current School Information (if applicable):

- Name of current school attended: _____
- Address: _____
- Fax: _____ Phone: _____
- We give permission to contact current school if necessary ☐ Yes ☐ No
- Tell us more about your child (likes, dislikes, personality traits): _____

- Tell us about any special needs or concerns (educational, social or physical): _____

- Please check:
 - Speaks any languages other than English ☐ Yes, we speak _____ at home ☐ No
 - Has a solid understanding of the English language both written and spoken ☐ Yes ☐ No
 - Has an Individual Education Plans (IEP) ☐ Yes (Please attach a copy) ☐ No
 - Has a Psychological Assessment or other testing results? ☐ Yes (Please attach copies) ☐ No
 - Has an Identified Learning Disability? ☐ Yes (Please attach any documentation) ☐ No
 - Has received ANY additional tutoring help (in school or outside of school) ☐ Yes ☐ No

Next Oldest Student

- First Name: _____ Last Name: _____
- Address: *same as Father's* ☐ *same as Mother's* ☐
 Other: _____
- Birth Date: Month _____ Day _____ Year _____
- Health Card Number: _____ - _____ - _____
- Gender: Female ☐ Male ☐
- Allergies: **YES** ☐ * no ☐ Asthma: **YES** ☐ * no ☐
 - If **YES**, please indicate allergy: _____
 - Is this allergy anaphylactic?: **YES** ☐ * no ☐
- **If yes, please provide the school with an epi-pen and/or asthma medication and completed Critical Medical Alert form (found on school website) on the first day of school.**
- Photocopy of **Latest Learning Report Attached**: Yes ☐ No ☐
- Grade Level applying for: _____ Starting Date: _____
 - If applying for Kindergarten: **Part-time** (Mondays, Wednesdays & Fridays) ☐ or **Full-time** ☐
- Current School Information (if applicable):
 - Name of current school attended: _____
 - Address: _____
 - Fax: _____ Phone: _____
 - We give permission to contact current school if necessary ☐ Yes ☐ No
- Tell us more about your child (likes, dislikes, personality traits): _____

- Tell us about any special needs or concerns (educational, social or physical): _____

- Please check:
 - Speaks any languages other than English ☐ Yes, we speak _____ at home ☐ No
 - Has a solid understanding of the English language both written and spoken ☐ Yes ☐ No
 - Has an Individual Education Plans (IEP) ☐ Yes (Please attach a copy) ☐ No
 - Has a Psychological Assessment or other testing results? ☐ Yes (Please attach copies) ☐ No
 - Has an Identified Learning Disability? ☐ Yes (Please attach any documentation) ☐ No
 - Has received ANY additional tutoring help (in school or outside of school) ☐ Yes ☐ No

Next Oldest Student

- First Name: _____ Last Name: _____
- Address: *same as Father's* ☐ *same as Mother's* ☐
Other: _____
- Birth Date: Month _____ Day _____ Year _____
- Health Card Number: _____ - _____ - _____
- Gender: Female ☐ Male ☐
- Allergies: YES ☐ * no ☐ Asthma: YES ☐ * no ☐
 - If YES, please indicate allergy: _____
 - Is this allergy anaphylactic?: YES ☐ * no ☐
- **If yes, please provide the school with an epi-pen and/or asthma medication and completed Critical Medical Alert form (found on school website) on the first day of school.**
- Photocopy of **Latest Learning Report Attached**: Yes ☐ No ☐
- Grade Level applying for: _____ Starting Date: _____
 - If applying for Kindergarten: **Part-time** (Mondays, Wednesdays & Fridays) ☐ or **Full-time** ☐
- Current School Information (if applicable):
 - Name of current school attended: _____
 - Address: _____
 - Fax: _____ Phone: _____
 - We give permission to contact current school if necessary ☐ Yes ☐ No
- Tell us more about your child (likes, dislikes, personality traits): _____

- Tell us about any special needs or concerns (educational, social or physical): _____

- Please check:
 - Speaks any languages other than English ☐ Yes, we speak _____ at home ☐ No
 - Has a solid understanding of the English language both written and spoken ☐ Yes ☐ No
 - Has an Individual Education Plans (IEP) ☐ Yes (Please attach a copy) ☐ No
 - Has a Psychological Assessment or other testing results? ☐ Yes (Please attach copies) ☐ No
 - Has an Identified Learning Disability? ☐ Yes (Please attach any documentation) ☐ No
 - Has received ANY additional tutoring help (in school or outside of school) ☐ Yes ☐ No

Emergency Contact (other than parents, in the event we cannot contact you):

First Name: _____ Last Name: _____
Relationship to child(ren): _____ Home Phone: _____
Cell Phone: _____ Business Phone: _____
Email(s): _____

First Name: _____ Last Name: _____
Relationship to child(ren): _____ Home Phone: _____
Cell Phone: _____ Business Phone: _____
Email(s): _____



JKCS Society Statement of Faith

By applying for membership in John Knox Christian School Society, I (we) understand and support the following statements:

Believing that the Lord God, by graciously giving us the Scriptures, has revealed to His people ordering principles intensely relevant to education, and mandates us to bring the whole Word of God to bear in all its power upon education, we confess:

Life: Human life in its entirety is religious, since God created us to serve Him everywhere. This requires us to educate our children for His service.

Bible: That the Bible as the written Word of God is the Truth by which the Holy Spirit enlightens our understanding of God, ourselves and the world, and the infallible authority by which He directs and governs all our activities, including the education of our children.

Creation: That we can understand the world rightly only in its relation to God, because the world, in its origin, gracious preservation and ultimate restoration is the world of the Triune God, and since the glorification of His Name is its purpose.

Mankind: That we were created in the image of God to enjoy covenantal fellowship with our Creator and to reflect in our person and works the excellencies of our Maker, and were instructed to exercise dominion over the world in strict and loving obedience to God and to interpret all reality in accordance with His design and law.

Sin: That sin is disobedience to God's law and that we, by sinning, forsook our office and task, estranged ourselves from God and our neighbour, and brought God's curse upon the creation. As a result, we have become corrupt in heart and blind to the true meaning of life and repress and misuse the knowledge of God which confronts us in creation and in Scripture.

Christ: That Jesus Christ, of whom the Scriptures testify, who is truly God and fully man, has reconciled the world to God and redeems our life in its entirety. Through His Spirit He renews our heart to love God and our neighbour, and redirects our understanding to know rightly God, ourselves and the world.

The Kingdom of God: That the Kingdom of God is His present and future, righteous and universal reign through Jesus Christ. This reign of grace and power makes education possible and meaningful. In obedience to Christ we submit in every area of life to His commandment to love the Lord with all our heart and mind.

Purpose of Education: That the purpose of Christian education is to direct and guide the children to commit their hearts to Christ the Truth, to attain understanding, wisdom and righteousness, to perform competent and responsible service to the Lord in church, state and society.

Parents/Guardians: That God has given parents/guardians the responsibility to nurture and educate their children. Therefore parents/guardians should establish and maintain schools. The Christian school is an institution established and controlled by an association of Christian believers, to function in education in total and voluntary submission to Christ, the King.

The Student: That the student as a child, entrusted by God to parents/guardians needs ordering, correction and instruction. Children of the Christian home are a heritage of the Lord and share in the promises and the demands of His covenant. Hence they ought to receive Christian education.

The Teacher: That "teachers", as servants of God, exercise authority in the performance of their office in educating the children in school."

I have read the Educational Principles of the JKCS Community as outlined above, and agree to have my child(ren) taught according to this educational philosophy.

Signature of Father/Guardian

Signature of Mother/Guardian

Date

Parent & School Agreement:



We understand that enrollment in JKCS may be terminated for non-payment of fees. We agree that we will be fully responsible for the required payments of: 1) A one-time non-refundable Capital Assessment & Admission fee of \$2,500 which is payable in full upon enrollment 2) Annual Tuition fee (paid monthly or once a year) 4) Bus fee (if applicable). We understand that even if we are to leave the school, we remain responsible to pay any outstanding fees in full, before leaving the school.

*****Parent/Guardian Initials:** _____

We also agree to sign up for a 12-month, automatic monthly withdrawal banking program **OR** an annual payment (with a 1% reduction). Both payment options begin in July. If the annual payment is made and your family is transferred out of the Oakville/Mississauga area, any unused portion may be refunded unless you have received a tax receipt for the payment. In this case, in accordance with CRA regulations, it may not be refunded. We agree to give JKCS 30 days' notice in writing if we plan to withdraw our child(ren) from the school.

We understand that our application is subject to the availability of an appropriate space or program available for our child(ren).

We agree to abide by the following school policies/guidelines which are detailed in the Parent Handbook or are listed as separate policies, all of which are located on the school website, www.jkcs-oakville.ca under "About JKCS" and then "Policies":

- 1) Parent Handbook & JK/SK Handbook 2) Discipline Policy 3) Bus Use Policy 4) Child Welfare Policy 5) Accessibility Standards 6) Sports Policy 7) Technology

We also understand that our child(ren) may be assigned a school login, password and/or email account and that they will be held accountable for using in a way appropriate to a John Knox Christian School student.

We agree to support the Administration in any disciplinary action necessary for our child(ren).

We agree to have our child(ren)'s Ontario School Record (OSR) transferred to JKCS.

We agree to cheerfully fulfill any GIFTS volunteer responsibilities **OR** we will pay the \$1000 opt-out fee.

We agree to allow our child(ren) to participate in any school activities/class or sporting trips at or away from school. We will not hold the school responsible for any accidents, illness or injuries of any nature.

We agree to let our child(ren)'s photographs be used for promotional purposes and understand that at no time will names be published:

☐ Yes, I agree to let JKCS publish photographs **OR** ☐ No, I do not wish my child(ren)'s photos published

☐ Yes, I agree to let JKCS publish my home address in the parent directory **OR** ☐ No, don't wish to have my home address published in the parent directory

Father's/Guardian Name: _____

Signature: _____ Date: _____

Mother's/Guardian Name: _____

Signature: _____ Date: _____

Parents: Kindly KEEP THIS INFORMATION PAGE at home

Welcome to the JKCS Family!

If you have any questions big or small, please contact: Melissa Kuyvenhoven, Director of Admissions at mkuyvenhoven@jkcs-oakville.ca or (905) 829-8048 x300

Finance Information for the 2020-21 School Year

In order to have your enrollment confirmed, the school needs to:

- 1) Receive your completed application forms,
- 2) Receive notice of your acceptance into admission and membership of the John Knox Christian School Society by means of a personal interview with both parents and the Principal and then approval by the board,
- 3) Receive your Capital Assessment/Admission fee cheque of \$2,500 payable to: JKCS.

Tuition & Fees Statement:

Each March, tax receipts will be mailed out to every family. The automatic bank withdrawal program will continue throughout your student(s) stay at JKCS so you do not have to renew your agreement each year.

2020-21 Tuition Fees

Any tuition increases are voted on at the Spring Membership Meeting by JKCS Society Members:

Family Status:	Tuition Rate:	Membership Rate:
1 part-time JK or SK student only (M W F)	\$10,800	\$200 per family (paid yearly)
1 full-time student (or full-time JK or SK)	\$13,400	
2 student family	\$18,600	
3 student family	\$20,800	
4+ student family	\$23,000	

Capital Assessment Fee for New Families:

All new families are assessed a one-time, non-refundable **Capital Assessment Fee of \$2,500** which is due and payable in full upon enrollment. This amount is paid separately from your tuition and is eligible for a full tax receipt.

Transportation Fee:

Busing is currently available to all JKCS families living within the transportation boundaries. There is an additional fee of **\$1650 per family** to use the bus service (Fee subject to change. No tax receipt issued). Bus routes are set in June before the start of the school year. Students who join the school after the bus routes are set may join an existing stop.

Grade 6, 7, 8 Fee:

There is an additional **\$850 fee for each child in grade 6, 7 or 8** which covers the cost of additional programming (instrument rentals etc.) and overnight trips. Grades 7 & 8 travel to Ottawa and Quebec City alternate years 3-4 days. Grade 8 travels to leadership camp for 3 days.

Tuition Assistance Bursaries:

You may apply for a Tuition Assistance or High School bursary (if you have an older child in a Christian High School). Applications due Mar 31, 2020. **Please contact the Financial Administrator for details regarding bursary or answers to any financial questions – Alta van Niekerk at 905-829-8048 ext. 225 or avanniekerk@jkcs-oakville.ca**

Admissions Next Steps Checklist:

- ☐ Completed admissions forms
- ☐ Copy of birth certificate for each child
- ☐ Copy of most recent learning report for each child (if applicable)
- ☐ Copy of IEP, assessment, or any other necessary educational documents
- ☐ Submit a copy of immunization records for each child to <https://www.halton.ca/For-Residents/Immunizations-Preventable-Disease/Immunization/Report-Your-Immunizations>
 - Email completed admissions forms, birth certificate and learning report to Melissa Kuyvenhoven at mkuyvenhoven@jkcs-oakville.ca
 - Once these documents have been received, you will be contacted to book an admissions interview with our Principal, Mr. George Petrusma.
 - Payment of the one-time, non-refundable \$2,500 Capital Assessment fee is due upon admissions approval at the completion of the interview. Payment of this fee will hold and guarantee a spot for your child(ren) in their class.

Police Checks:

Our school insurance requires a **Police Check** (including a vulnerable sector screening) for any parent that will be in the school in any volunteer capacity during the school year. Please provide original copy at time of family interview.

- **Peel (Mississauga) residents** can come to the JKCS office to pick up an individually authorized application form. Drop off locations are numerous and are listed on the back of the form.
- **Halton (Oakville) residents** can go to the Police Station located at 95 Oak Walk Dr. (just west on Dundas past Trafalgar) open between 8:30 am – 10:00 pm **OR** the Bronte Police Station located at 1151 Bronte Rd., Oakville (just north of the QEW) between 7:30 am – 3:00 pm. Please bring 2 pieces of government issued I.D., one of which is a photo I.D. The cost is \$20 payable by VISA, MasterCard, Debit or Cash.

After your police check arrives at your home by mail (usually in 4-6 weeks), please forward the original to the office.

Watch for more information:

- **Sycamore:** Contains daily news, classroom information, homework, family directory and yearly calendar.
- **Website:** The website is updated on a regular basis with school information.
- **Social Media:** Check us out on Facebook, Instagram, and Twitter to be kept up to date with news, photographs, and coming events.
- **Meet the Teacher Evening & New Parent Info Sessions:** Held the Thursday evening before school begins so that our newest students can come and see their classrooms, meet their teachers and classmates. A new parent information session is held just before the class visits.
- **Welcome BBQ:** A fun, social night held the second Friday night of the school year to welcome all new and returning parents/guardians and their children.
- **Late start on Fridays:** Teachers participate in PLC time (Professional Learning Communities) from 8:00-8:50am. Students will have extended supervised time outside starting at 8:20am.

Uniforms:

- **Available at:** InSchoolwear located at 886 Sinclair Road, Oakville, OR www.inschoolwear.com
- **Required InSchoolwear pieces (*):** jumpers, kilts, pants, shorts, skorts, hoodies, white/maroon logoed shirts, and gym t-shirts and shorts.
- **Pieces purchased at any store:** black knee socks, black tights, white socks, blue socks
- **Used Uniforms for purchase:** Please contact the school office at: office@jkcs-oakville.ca to set up an appointment to come to the school to shop our “Used Uniform” inventory which is located in the mezzanine.
- **More Details:** See the website www.jkcs-oakville.ca for photos and more details of what is required for each grade under “About JKCS” and then “Uniforms”.

Girls Gr. JK-4 wear: Jumpers* (with black knee socks or tights only) or pants* (with white or navy socks), burgundy hoodie*, white or maroon (short or long sleeved) logoed tops with collars*. Warm weather wear: navy skorts* or plain navy shorts (with white or navy socks).

Girls Gr. 5-8 wear: Kilts* (with black knee socks or tights) or pants* (with white or navy socks), burgundy hoodie*, white or maroon (short or long sleeved) logoed tops with collars*. Warm weather wear: plain navy shorts (with white or navy socks).

Boys Gr. Jk-8 wear: Pants* (with navy or white socks), burgundy hoodie*, white or maroon (short or long sleeved) logoed tops with collars*. Warm weather wear: navy shorts (with white or navy socks)