



Salvation Christian Academy

PARENT COMMITMENT FORM 2020-21

Last and First Name _____

Name(s) of child(ren) attending SCA school _____

____ 1. We read and agree with the SCA statement of faith, established policies and guidelines, as stated in the Parent-Student Handbook

____ 2. We will faithfully support the school through our prayers and positive attitude, and share any complaints, questionable or negative comments, with ONLY the people involved (administration or faculty), and NOT around our child.

____ 3. We will uphold the spiritual emphasis of SCA and support the high academic standards of the school by providing a place at home for our child to study and giving our child encouragement in the completion of assigned homework.

____ 4. We understand the importance of commitment and involvement to insure success for our child/children. We understand that it is our responsibility to make sure our child/children spend a minimum of one to two hours a day, five days a week on assigned schoolwork or enough time to complete all assignments in the daily schedule.

____ 5. We understand that parents' failure to comply with the established SCA policies and discipline, and lacking parental commitment (including but not limited to bringing children to required school performances, attending school events, participating in school fundraisers, and financial obligations) will forfeit the student's privilege to attend SCA.

____ 6. We understand that we need to have our own medical and major accident insurance in case of an emergency situation during school hours at the church facility and school related events. We give permission to the school authorities, in case of emergency, to obtain medical treatment for our child in our absence.

____ 7. We understand that SCA is a tuition driven school and so requires each family involvement through completion of 12 service hours per student/year (for single parent home 5hrs/yr); minus 2 hours for each additional student. In the case of service hours' incompleteness, we agree to pay off the remaining hours (\$15/hr). By the end of January each family should strive to complete 50% of assigned hours.

____ 8. We understand that withdrawal penalty (20% during 1st semester and 10% during 2nd semester) will apply for any withdrawal reasons and school records will be on hold until all accounts are settled and materials returned. We understand that withdrawal during the school year might result in unnecessary complications when transitioning from school to school.

____ 9. We understand that it is our responsibility to contact the SCA office regarding any changes to contact (phone/email) and/or address information.

SCHOOL EVENT PERMISSION (please initial):

____ I hereby certify that my child has permission to participate in SCA field trips and other related school events that are part of the school curriculum. (Information about each event will be sent via email. If additional permissions are needed, it will be indicated to the parents.)

____ I hereby grant permission for SCA to photograph/videotape my son/daughter for the school yearbook, publications, school Facebook, Instagram, or website.

Signature of Parent 1 _____

Date _____

Signature of Parent 2 _____

Date _____