

2025 -26 RE-ADMISSIONS APPLICATION

Blessings Parents,

Enclosed is your Re-Admissions Packet. If you would like your child to be considered for Re-enrollment at Cornerstone Christian School for the year **2025-2026**, kindly fill out and return the forms by MARCH 30. A separate form needs to be completed for each child.

<u>Early Bird (by MARCH 30th)</u> Fee per child: \$300.00 (Re-admission, Curriculum & Technology Fee)

After MARCH 30th Re-Admission Fee per child: \$350.00 (Re-admission, Curriculum & Technology Fee)

Please Note: All Tuition payments and school balances for the current school year MUST be paid in FULL prior to your acceptance to the next school year.

2025-26 Tuition will be as follow:

\$800.00 SECURITY FEES per Family Must be paid on July 1, 2025 (No Discount Applicable)

• Early Payment in full due prior to MARCH 30th

2025-26 EARLY BIRD TUITION PAYMENT (5% Discount)					
# of Children	TUITION	5% DISCOUNT	Tuition Cost of Living Fee	TOTAL PAYMENT	
1	\$8,755.00	\$438	\$618	\$8,935.00	
2	\$14,883.50	\$744	\$1,236	\$15,375.50	
3	\$21,877.50	\$1,094	\$1,236	\$22,019.50	
4	\$28,891.50	\$1,445	\$1,236	\$28,682.50	

Payments begin: <u>August 2025 through May 2026</u>

2025-26 TUITION								
# of Children	Tuition	2 nd child Discount 30%	3 rd child Discount 20%	4 th child Discount 20%	TOTAL TUITION	TUITION Cost of Living Fee	TOTAL PAYMENT	MONTHLY PAYMENT 10 MONTHS
1	\$8,755.00	0	0	0	\$8,755.00	\$618	\$9,373	\$937.30
2	\$17,510.00	2626.5	0	0	\$14,883.50	\$1,236	\$16,119.50	\$1,611.95
3	\$26,265.00	2626.5	\$1,751	0	\$21,887.50	\$1,236	\$23,123.50	\$2,312.35
4	\$35,020.00	2626.5	\$1,751	\$1,751	\$28,891.50	\$1,236	\$30,127.50	\$30,12.75



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.

Monthly tuition payments are made through *FACTS Tuition Management*. Tuition payments begin promptly in July each year. This is a <u>direct withdrawal</u> from a checking or savings account. See Registration Packet. Please Note Tuition must be paid in full by the end of April.

Registration applications, submitted after July, will be required to pay the <u>outstanding</u> tuition payments, before attending school.

The following fee schedule is in effect for the 2025-2026 School Year:

Insufficient Funds Check Fee	\$40.00 (per check)
Late Payments Fee	\$25.00 per late payment

LATE FEE and OVERDUE ACCOUNTS

In the event an account becomes overdue, Cornerstone Christian School will continue to hold the parents responsible for satisfying the account. If personal or financial difficulties prevent parents from making payments on or before due dates, they should advise the Cornerstone Finance Office, (845) 637-3439, immediately. Report cards and records will be withheld until payments are satisfied.

Children of parents with delinquent accounts, over 60 days, will not be permitted to attend school until the parents have made arrangements to pay the overdue account. If extenuating circumstances prevail, parents may make an appeal in writing to the administrator.

In the event of non-payment of tuition/fees, parents will be responsible for any legal fees/charges associated with the collection of past due amounts.

WITHDRAWALS and REFUNDS

When a pupil is dismissed or withdrawn from the school for any reason, tuition must be paid in full for each calendar month that the pupil was in attendance at the school. In the event tuition has been paid beyond that month of dismissal or withdrawal, Cornerstone Christian School will refund the parents accordingly.



2025-26 RE-ADMISSIONS APPLICATION

Student Name	Grade App	olying for
Address		
City	State	Zip
() Mother's Cell Phone	() Father's Cell Pho	 one
Mother's Email	Father's Email	
If you would like your Re-admission fees added	to <u>FACTS Management</u> , plea	se initial the box below.
 □ Please add my fees to the FACTS mgmt. □ Total Amount to add to FACTS Manager 		
For CCS office Use only:		
Date Method of Payment Amount paid	d	



CORNERSTONE CHRISTIAN SCHOOL

PARENT'S PLEDGE of PARTNERSHIP

Recognizing my partnership with the faculty and administration of Cornerstone Christian School, I pledge to:

- Seek the advancement of Cornerstone Christian School (hereafter will be referred to as school) in word, in deed and in prayer for the progressive good of the school.
- Fully cooperate with school authorities. I understand that parents (guardians) are expected to cooperate with the school authorities and support the overall philosophy and ministry of the school based on scripture from Amos 3:3 "Do two walk together unless they have agreed to do so?" (NIV)
- Pay my financial obligations to the school on or before the respective due dates. If I am unable to make a payment on time, I will notify the school office in advance and I will work with the school toward timely payments. I understand my financial obligations to the school must be met in order for God's work to continue here.
- Support the dress code adopted by the Board of Trustees.
- Actively support and regularly attend school meetings and parent functions. Undertaking areas of assistance and responsibilities at the school as opportunities arise.
- Recommend Cornerstone Christian School to others as the opportunities arise.

As a parent of a child in attendance at Cornerstone Christian School, I recognize my responsibility to strive diligently toward the above. If problems should arise and I become dissatisfied with the school for any reason, I will seek to quickly resolve the matter with the appropriate person(s) using the pattern outlined in Matthew 18:15-18, i.e. going directly to the individual first and only when and if there is no resolution, taking it to other mature spiritual parties to help resolve the issue. Because Scripture admonishes Christians to resolve their differences within the church rather than bring them to secular courts (1Cor. 6:1-7). I agree to follow such a procedure in my dealings with the school.

I understand the admission to Cornerstone Christian School is a privilege and not a right. I 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. I also understand that my conduct can and will affect our child's continued enrollment. Biblical standards and principles are required of parents as well as staff to validate the partnership (*Amos 3:3*) between the school and home to educate the whole child.

I have read the school's *Mission Statement, Statement of Objectives, Tuition Payment Policy, and the Parent's Pledge of Partnership,* and I have agreed to have our child educated in accordance therewith and to fulfill our part in supporting the school. I also understand that our failure to fully cooperate with Cornerstone Christian School authorities and to support the philosophy and ministry of the school is grounds for the removal of our child and can affect our child's current or future enrollment status.

$\qquad \qquad >$	X		X	
	Signature of Father/Guardian	Date	Signature of Mother/Guardian	Date

STATEMENT of PARENT or GUARDIAN

We understand that admission to Cornerstone Christian School 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 of non-payment of tuition, I agree to pay any legal fees, incurred by CCS, to secure payment. We have read the school's brochure, Statement of Objectives, Statement of Faith, Tuition Payment Policy, and the Parent's Pledge of Partnership, and we agree to have our child educated in accordance therewith and to fulfill our part in supporting the school.

X		X	
Signature of Father/Guardian	Date	Signature of Mother/Guardian	Date



EMERGENCY CONTACT and MEDICAL INFORMATION

Student Name: _____ **Grade:** _____

±	and name of a neighb	or or relative	who may be	called for assis	stance if th	ne parent
will be attempted. A	Should school close ALL BUSSED STUI NE UNLESS PREVI	DENTS WILL	BE SENT O			
STUDENT NAM	E :				DATE C	OF BIRTH:
CURRENT ADDRE					MALE /	FEMALE (CIRCLE
NAME	RELATIONSHIP	HOME PHONE	CELL PHONE	WORK PHONE	ONE) EMAIL	
<u>l</u>	MOTHER / GUARDIAN					
2	FATHER / GUARDIAN					
3						
l l						
ARENT/GUARDIA.	N (PLEASE PRINT)	SIGNATUR	\boldsymbol{E}			DATE
HEALTH HISTOI Conditions (chec	ck all that apply)	Allergie	_ `	dicate severi	•	hat apply)
Conditions (checo	ck all that apply)		<u>s</u> : (Please in Specify		•	
Conditions (checo	ck all that apply) tions	Food*	_ `		•	hat apply)
Conditions (checonomic Conditions) Frequent Ear Infect Diabetes* Heart Defects/Disease	ck all that apply) tions	Food* Animals	_ `		•	hat apply)
Conditions (check) O Frequent Ear Infect O Diabetes* O Heart Defects/Disease O Hypertension	ck all that apply) tions ase	Food* Animals Hay fever	Specify		•	hat apply)
Conditions (checonomic Checonomic	ck all that apply) tions ase	Food* Animals	Specify gs*		•	hat apply)
Conditions (check Frequent Ear Infect Diabetes* Heart Defects/Disect Hypertension Convulsions/Epileps	ck all that apply) tions ase	Food* Animals Hay fever Insect Sting	Specify gs*		•	hat apply)
Conditions (check Frequent Ear Infect Diabetes* Heart Defects/Disect Hypertension Convulsions/Epileps Behavioral	ck all that apply) tions ase sy*	Food* Animals Hay fever Insect Sting Medications	Specify gs*		•	hat apply)
Conditions (check Conditions (ck all that apply) tions ase sy*	Food* Animals Hay fever Insect Sting Medications	Specify gs*		•	hat apply)



Physician's Name (print clearly)	Business Number
Dentist/Orthodontist's Name (print clearly)	Business Number
Health Care:	
If the student is currently under physician's care for any illness it is $\underline{\nu}$ appointment and discuss it with the school nurse. Are there conditions that will restrict the students' involvement in any	
Are there any dietary concerns on which the school should be made a	aware? Please explain:
If your child is on any medications during the school year, plo Students are not allowed to carry medications on them while authorized by their physician and cleared through the CCS of	on the school grounds unless
from the CCS office should your child need to have medicatio school year.	
Please note any special concerns, conditions or restrictions should be made aware of:	s the student's teacher or office
AUTHORIZATION FOR MEDICAL CARE: I , as a parent or legal gual certify that the above information is correct and give permission for the illness/injury. The person herein described has permission to engage except as noted above by me. I give permission to Cornerstone Christ from a doctor and/or hospital for emergency treatment. Furthermore, Administrator or designate to allow hospital personnel and/or a licens and administer emergency medications. This authorization shall rema	he release of medical records in the case of in all prescribed Outdoor School activities tian School staff to transport my child to or . I give permission to CCS School ed physician to perform emergency treatment
PLEASE PRINT NAME SIGNATURE	DATE



> PART 1 - Photo

Parent Signature	Date
I am aware that stage photos along with videos mour school social media at our discretion in exclusion	
I am the parent and/or guardian ofStudent Name	Grade
\square NO, I do not give permission for videos	
☐ YES, I give permission for videos	
I hereby grant permission for Cornerstone Christian related use while enrolled as a student in any, and all for special events, advertising, and our school social and the videos will not identify the students by their name.	programs. These videos may be used media pages.
> PART 2 - Video	
\square NO, I do not give permission for videos	
\square YES, I give permission for photos	
The videos will not identify the students by their name	<u>ne.</u>
slideshow, in a brochure, or on a board display for sp	2 0
in which my child appears while enrolled as a stuc- photographs may be displayed on our website, o	1 0
I hereby grant permission for Cornerstone Christian S	



In accordance with the "Children's Internet Protection Act" (CIPA), Cornerstone Christian School has established a School <u>Computer Usage & Internet Safety Policy</u>. This policy applies to all faculty, staff, and students at Cornerstone Christian School in New City, New York.

On-Site Computer Usage and Internet Access

- Internet access is provided to students in grades K to 8 for educational purposes during their Computer Instructional Session or classroom instruction.
- Inappropriate matter (including and not limited to obscene, child pornography, and harmful images) on the Internet is blocked from CCS students with Internet Web Filtering on the server.
- Internet access is additionally monitored by the teachers in classrooms and the technology instructor in the computer lab during computer sessions.
- All educational websites are pre-tested prior to each student computer session. Pop-ups are blocked with settings at the 'high' level.
- Chromebooks are assigned to students in grades 4 through 8. Devices remain on the school campus and cannot be taken off the premises.
- Teachers of Grades 4 to 8 monitor students while students are using their assigned Chromebooks.
- Teachers and staff are strictly prohibited from emailing students using their personal email or communicating with students using text messages or any social networking. <u>Any communication</u> to a student's school email address is to be copied to the parents/guardian of that student.
- Students are not permitted to use personal email or to participate in any social networking, including but not limited to Facebook, Twitter, Snapchat, Instagram or texting while they are using school computers. School/Student email accounts will be set up by the Technology Instructor and provided to the students in grades 4 through 8. Restrictions are applied to all accounts of students under the age of 18.

• Standard of Internet Usage

Teachers/Instructors will educate students about safe and unsafe interaction while on the Internet. Students will be instructed that they should never give their name or address to anyone on the computer that they do not personally know. Students will be educated about appropriate Internet conversations and understanding how to recognize 'bullying' on a computer, otherwise known as 'Cyber Bullying'.

• Student Responsibility

Students are responsible for appropriate behavior on the school computers as they are for general school rules that apply to behavior and communications. It is expected that all students will comply with the Cornerstone Christian School standards and the specific rules set forth. The use of computers and the Internet is a privilege, not a right, and may be suspended or revoked if abused. Each student is personally responsible for his/her actions in accessing and utilizing Cornerstone computer resources.



• Plagiarism/Copyright Laws

Students are prohibited from downloading any commercial software, shareware, freeware, etc. onto the school computers. Students are not allowed to copy and use information in their work that violates copyright laws. Students will be instructed that they should assume that all material they find in documentation is copyrighted and copying the information created by someone else is both morally and legally wrong.

• Inappropriate materials or Language

Students are responsible for the words they type in reports while using the computers in school. Profane, vulgar, or impolite language should not be used to communicate a story, a poem, or any report that is required of them from their teachers.

Privacy

Program folders and files are created for each student while using an application in the Computer Lab. These folders/files are unique to each student. Students may only 'Login' or 'Sign-in' with their first name and the first initial of their last name. Students are not to login or sign-in a program using any name other than their own. Students are to respect their classmates and not attempt to read/write in the files of other students.

Return Signature Form to School
I have read the Cornerstone Christian School <u>Computer Usage and Internet Policy</u> and understand the purpose of this policy. I will discuss and review the importance of this policy with my child. I agree to comply with the terms that are stated in the policy and will be supportive of this important measure to protect the students of Cornerstone Christian School mandated under the "Children's Internet Protection Act."
STUDENT NAME:
Parent Name:
Parent Signature:
Date:
*Ctudents will not be normitted to use the school computers until this form is signed and returned

*Students will not be permitted to use the school computers until this form is signed and returned to the School Office. Thank you for your cooperation.



If you have used FACTS before, simply Sign In to manage your account.

<u>If you are new to FACTS</u>, click on the "Create a username & password" button to create an online account.

https://online.factsmgt.com/signin/3L6P4

(School Code: **6878**)

For Help Signing up: with FACTS: Phone Number: 866-412-4637

Please note:

- July 1, there is a One-time Security fee of \$800.00
- Tuition payments start in August through May
- Students will not be considered fully registered until payment plan is in place.