

The Barnes Academy

“Where Inspiration Joins Education”

PLEASE DIRECT ALL APPLICATION
MATERIAL TO:

The Barnes Academy
154 Hart Service Road
Hartwell, Ga. 30643
sarahlecroy@yahoo.com

International Student Application 2018-19

Please complete an Application form for each student either clearly printed or typed in English. A non-refundable application fee of \$150.00 per student is due with the application. The Barnes Academy accepts international students in grades 5th—12th. Students on an I-20 (F1 Visa) Must remain in a private school that has assigned the I-20. Those who do not comply will have the F1 Visa terminated.

- ___ Application Fee of \$150.00 US dollars
- ___ Completed and signed application. All forms must be done in English.
- ___ Official Transcripts—all transcripts must be official transcripts and must be translated into English.
- ___ Evaluation/Recommendation Forms. Please include these forms completed by the student’s current teachers. All forms must be done in English.
- ___ Copy of current passport
- ___ Proof of sufficient funds to attend school (bank statement)

After a student is accepted we will need the following items at enrollment:

- ___ Financial Policy Agreement form and Payment: Once your student is admitted to our program, you will need to complete the financial policy agreement form and pay the \$300.00 registration fee and \$700.00 curriculum fee. This fee is due at enrollment and must be paid in full before an I-20 can be issued. All tuition and homestay fees are due before the first day of class. There are no refunds on any fees!

I-20 Issuance: Students from all countries are required to be covered on insurance. Many companies will give a large discounted rate for international students. One suggestion is, Mission Safe 770-394-3800 travel@missionsafe.com www.missionsafe.com

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STEP 1: SUBMIT FORMS AND FEES

- Complete Application for Admission including Statement of Faith or acknowledgement of the Statement of Faith and an application fee of \$300.00 for 6th through 12th grade. This fee is non-refundable and non-transferable. After acceptance a \$700.00 curriculum fee is due before an I-20 will be issued. This fee is non-refundable and non-transferable.
- Supplemental Forms: The following additional forms are necessary to complete your application file. Please submit to appropriate recipients for completion. Recommendations, transcripts, and reference forms must be mailed or faxed directly to The Barnes Academy.

5th – 12th Grade

- Authorization to Release Records (must provide a transcript of all school records in English)
- English, Math and Science or History Teacher References
- Principal Reference
- Copy of passport
- Proof of funds (bank statement)

STEP 2: NOTIFICATION OF ACCEPTANCE

- We will notify you as quickly as possible about your acceptance to The Barnes Academy. Upon acceptance, an I-20 will be issued. Students will then go to the US government site and pay the I 901 fee.
- The following additional forms are due prior to the start of school

Medical Forms:

- Hearing/Vision/Dental Form 3300
- Birth Certificate
- Immunization Form GA 3231
- Notarized Guardianship Letter

HOST FAMILY ADDRESS AND CONTACT (notify the school if you need a host family)

Contact Host Family Name: _____

Address: _____

Contact Numbers: _____

Contact email: _____

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Registration Application 2017-2018

Grade Applying for: _____ Application Date: _____

Student's Legal Name: _____ Date of Birth: _____

Address: _____

_____ Country/Country _____

Sex: ___ Male ___ Female

US Mailing Address:

_____ Street _____ City _____ State _____ Zip _____

Home Phone: (____) _____ Cell Phone: (____) _____

E-Mail Address: _____

Last School Attended: _____ Grade: _____

Student Lives with ___ Mother ___ Father ___ Stepmother ___ Stepfather ___ Guardian

Other: _____ Who has legal custody? _____

Parents are: ___ Married ___ Divorced ___ Separated ___ Widowed ___ Other

Has applicant ever applied for admission to The Barnes Academy: Yes ___ No ___

Medical:

Medical Conditions and/or allergic reactions: _____

Has your child ever been diagnosed with dyslexia or ADHD? _____

Does your child have any medical conditions which need to be brought to the attention of our school personnel?

Yes ___ No ___ If yes, please explain: _____

Is your child currently on medication? _____

If yes, please explain: _____

Does your child use any medication on a regular basis? _____

If yes, please explain: _____

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Family Information

Father's Name: _____

Address: _____

Occupation: _____

Employer: _____

Home Phone: _____

Work Phone: _____

Cell Phone: _____

Email: _____

Mother's Name: _____

Address: _____

Occupation: _____

Employer: _____

Home Phone: _____

Work Phone: _____

Cell Phone: _____

Email: _____

US Guardian Information:

Name: _____

Address: _____

Home Phone: _____

Cell Phone: _____

Email address: _____

Emergency Contact: (Other than parent or guardian) _____

Home/Work Phone Number: _____ Cell Phone Number: _____

CONFIDENTIAL STUDENT INFORMATION

1. Has applicant ever made a profession of faith in Jesus Christ? Yes ____ No ____

2. Educational Background: List applicant's current and any previous schools attended, including Kindergarten

3. Has applicant ever been suspended or expelled from another educational institution? NO _____ Yes / Explain _____

Name of School	City, State	Grades Attended

The Barnes Academy

MEDICAL TREATMENT FORM

In the event that my child becomes ill or is injured while under school supervision, I approve the school authorities to take the following steps in the following order:

1. Contact a parent or legal guardian of the student and follow his or her instructions.
2. In the event of an emergency, when neither parent nor legal guardian can be reached immediately, the school authorities are hereby authorized to use their best judgment in contacting a properly licensed physician, or in transporting my child to the nearest hospital for consultation and/or treatment. Such transportation is to be done either by school provided transportation, or if school officials deem it wise, by ambulance.

If, in the opinion of a properly licensed and practicing physician, my child needs medical or surgical services which require my consent before being supplied, and I cannot be reached, I hereby authorize, appoint, or empower the Principal or his designated representative, to furnish on my behalf such written or oral authorization as may be so required. Furthermore, I release the Principal, or his designated representative, The Barnes Academy, from any liability, which might arise from the giving of such authorization, it being my desire that my child be furnished with such medical or surgical services as soon as possible after the need arises.

Does this student have any physical or emotional problem(s), which require special medication?

If yes, please explain: _____

Does this student have any medical allergies?

If yes, please explain: _____

My child can take the following medications:

Tums _____ Tylenol _____ Ibuprofen _____ Benadryl _____
Anti-Acid _____ Anti Itch Cream _____ Other _____

Does your student have any latex allergy? _____

Does your student use an inhaler _____ or an epi Pin? _____

Do we have the right to have your student's photo used in publications? _____

Signature of parent/guardian: _____ Date: _____

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STATEMENT OF FAITH

We believe in the Father, and the Son and the Holy Spirit of Almighty God. We believe that Jesus died on the cross for our sins, arose three days later, thus having victory over sin and death. We believe in The Holy Bible in its entire text and our school was founded on these beliefs.

MISSION STATEMENT

Our goal is to develop an individualized curriculum for each student to enhance their learning style and reach their full potential in Christ.

CORE VALUE STATEMENTS

1. Love the Lord your God with all your heart and all your soul and with all your mind and with all your strength. (*Mark 12:30*)
2. Love your neighbor as yourself. (*Mark 12:31*)
3. “And whatsoever ye do, do *it* heartily, as to the Lord, and not unto men; knowing that of the Lord ye shall receive the reward of the inheritance: for ye serve the Lord Christ.” Colossians 3:23-24

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FAMILY AND STUDENT COMMITMENT AGREEMENT

In order to protect the integrity of the academy, we ask that all students and parents respect and abide by the rules that are covered in the Student/Parent Handbook. Also, to keep our vision alive we ask that parents stand behind us on disciplinary actions. The Bible says in Matthew 12:25, "Every kingdom divided against itself is brought to desolation; and every city or house divided against itself shall not stand". In order to provide the best atmosphere academically and spiritually, we must work together. According to Ephesians 4:29, "Let no unwholesome word proceed from your mouth, but only such a word as is good for edification according to the need of the moment, so that it will give grace to those who hear." We will not tolerate profanity or inappropriate language at any time. This includes defamation of the character of another student, staff, parent, or the academy. In order to flourish as Christian educators and parents, we must strive to follow God's rules not our own. We must learn to take full responsibility for our actions and have repentant hearts for our transgressions just as the Israelites did when they stole from the plunder from Ai. (Joshua 7) This characteristic must flow through in the attitude, classwork, and respect each child exhibits in the academy for it to be blessed. We stand completely on the Word of God, The Holy Bible, and expect our students, parents, and staff to exemplify Christ to the best of their ability.

If at any time, we, The Barnes Academy, feel that children, parents, or staff are not in complete agreement with the above mission statement, we reserve the right to separate ourselves and proceed with the vision God has laid before us.

I, _____, and my child, _____, understand the mission of The Barnes Academy and will support this ministry to the best of our ability. We understand that the academy reserves the right to expel a child due to his/her behavior and the behavior of his/her parents. We respect this mission because it protects the integrity and educational foundations attached to The Barnes Academy thus protecting our child.

Mother's Signature

Student's Signature

Father's Signature

Administrator's Signature

I beseech you therefore, brethren, by the mercies of God, that ye present your bodies a living sacrifice, holy, acceptable unto God, which is your reasonable service. And be not conformed to this world: but be ye transformed by the renewing of your mind, that ye may prove what is that good, and acceptable, and perfect, will of God." Romans 12:1-2

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2017-2018 Tuition and Fees

International Tuition: Due 10th of the month (\$50.00 late fee after the 10th)

1 child	\$725.00 per month
2 children	\$1320.00 per month
3 or more children	\$1910.00 per month
Additional fee for students requiring smaller class sizes and individual instruction (ESOL)	\$300.00 per month

Bus/Van Fee

Family	\$90.00 per month
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Registration: (If paid by May 1st, after May 1st \$25.00 more per reg.)

Each Child	\$300.00
Multiple Children	\$125.00 each

International Students Boarding Fee:

\$1500.00 per month

Curriculum Fee: (Due July 1st, after July 1st \$25.00 more)

6 th – 8 th grades	\$700.00 per year
High School	\$700.00 per year

Uniform Fees:

\$50.00 per shirt

Testing: (Due Jan. 30, 2016)

Stanford 10 (Required for K5-8 th)	\$50.00 per year
PSAT (Required for 9 th – 11 th)	\$25.00
SAT, ACT, or COMPASS (12 th)	\$50.00

Yearbook: (Due Jan. 30, 2016)

\$60.00 per yearbook

Must pay online: yearbookforever.com; School name: **Barnes Academy**

Elective Fees: (K-12th)

Each child	\$300.00 per sport
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Middle School Field Trip:

\$1000.00

High School Field Trip:

\$1000.00

*Souvenir money is not included in this price.

Afterschool (3:00-5:00) Preschool to 5th grade only

1 child	\$10.00/day
2 children	\$15.00/day
After 5:15	\$1.00/minute

High School Graduation fee

\$500.00

The Barnes Academy

CONFIDENTIAL CLASSROOM TEACHER REFERENCE MATH (5th-12th GRADES)

Parent

Please sign this waiver and submit this form to the applicant's classroom teacher. Thank you.

My child is an applicant for admission to The Barnes Academy. I hereby authorize you to release to TBA the following confidential reference form *that you should mail directly to **The Barnes Academy Admissions Office***. I waive my right to review the information provided on this form.

Parent's Signature Date

Student's Name: _____ Grade: _____

School Name: _____ Teacher: _____

School Address: _____

Teacher:

Please assess the above named student in relation to peers in his/her present school. Additional comments are appreciated and may be attached separately.

Please rank the student's level of performance in each of the following areas:

	Excellent	Satisfactory	Poor
Completes Class Assignments			
Turns in Homework Assignments			
Works Well in Groups			
Performs on Grade Level			
Pays attention/Stays on Task			
Works to the best of his/her ability			
Makes good use of time			
Works independently			
Interacts well with other students			
Respects the rights and property of others			
Respectful and courteous to others			
Accepts adult authority/discipline			
Follows class rules			
Accepts responsibility for his/her behavior			
Attendance			

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Return this form to:
The Barnes Academy * 154 Hart Service Road * Hartwell, Ga. 30643

Please make a short comment on the following:

Do you have any concerns or comments regarding this student's academic performance? Please explain any concerns: _____

Parental support and involvement _____

Has outside help been recommended? Yes No Been Given: Yes No

Please explain: _____

Describe how well the applicant is respected by adults/peers _____

	<i>Strongly Recommend</i>	<i>Recommend</i>	<i>Do Not Recommend</i>
Academic Promise	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Character and Personality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall Recommendation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional comments _____

Please indicate your recommendation for admission to The Barnes Academy here:

I have known this student for _____ years.

Teacher's Name (please print): _____

Signature

Date

School Address

Telephone

The Barnes Academy

City _____

State _____

Zip _____

CONFIDENTIAL TEACHER REFERENCE ENGLISH (5TH -12TH GRADE)

Parent

Please sign this waiver and submit this form to the applicant's classroom teacher. Thank you.

My child is an applicant for admission to The Barnes Academy. I hereby authorize you to release to TBA the following confidential reference form *that you should mail directly to the **The Barnes Academy Admissions Office**.* I waive my right to review the information provided on this form.

 Parent's Signature _____ Date _____
 Student's Name: _____ Grade: _____
 School Name: _____ Teacher: _____
 School Address: _____

English/Math Teacher:

Please assess the above named student in relation to peers in his/her present school. Additional comments are appreciated and may be attached separately.

Please rank the student's level of performance in each of the following areas:

Academic Characteristics	Excellent	Above Average	Average	Below Average	Non Applicable
Reading Skills					
Writing Skills					
Grammar					
Originality of thought					
Effort					
Study Habits					
Completion of work on time					
Peer Relations					
Respect for Authority					
Reaction to Criticism					
Leadership Ability					
Self-Confidence					

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Please make a short comment on the following:

Parental support and involvement: _____

Has outside help been recommended? Yes No Been Given: Yes No

Please explain: _____

Applicant's social and emotional development compared with others of the same chronological age

Describe how well the applicant is respected by adults/peers _____

Please indicate your recommendation for admission to The Barnes Academy here:

	<i>Strongly Recommend</i>	<i>Recommend</i>	<i>Do Not Recommend</i>
Academic Promise	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Character and Personality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall Recommendation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I have known this student for _____ years.

Teacher's Name (please print): _____

Signature

Date

The Barnes Academy

School Address

Telephone

City

State

Zip

CONFIDENTIAL PRINCIPAL REFERENCE (5TH -12TH GRADE)

Parent

Please sign this waiver and submit this form to the applicant's principal. Thank you.

My child is an applicant for admission to The Barnes Academy. I hereby authorize you to release to FCS the following confidential reference form *that you should mail directly to **The Barnes Academy Admissions Office***. I waive my right to review the information provided on this form.

Parent's Signature

Date

Student's Name: _____ Grade: _____

School Name: _____ Teacher: _____

School Address: _____

Principal:

Please assess the above named student in relation to peers in his/her present school. Additional comments are appreciated and may be attached separately.

Confidential Information

1. In what capacity have you known the applicant? _____

2. Please comment on the applicant's attitude toward school. _____

3. Does applicant exhibit a motivation for or apathy toward learning? Does applicant's behavior foster or inhibit learning among his/her classmates? _____

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Principal Signature

Name (Please Print)

Date

Return this form to:

The Barnes Academy * 154 Hart Service Road * Hartwell, Ga. 30643

PHOTO/AUDIO/VIDEO RELEASE

I hereby irrevocably consent to and authorize the reproduction, publication and/any other use by The Barnes Academy, Inc., its licensees and assigns, of the photographs/audio/video identified below, in whole or part in conjunction with other photographs/audio/video, in any medium and for any lawful purpose, including illustration, promotion, advertising or web content, without any royalty or compensation to me.

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PHOTOGRAPHS/AUDIO/VIDEO:

FOR MINOR: I am the parent/guardian of _____

I have read and understand the above. I consent to the foregoing on his/her behalf.

Parent Signature: _____ Date: _____

Print Name: _____

Address: _____

The Barnes Academy

Dress Code

Elementary (Pre-K – 4th)

Dress code for young ladies is as follows:

- A “Barnes Academy” blue or white polo uniform shirt (Can only be purchased from the academy)
- Below the knee khaki skirt, khaki jumpers, loose fitting khaki capris, khaki shorts (to the knee), or khaki slacks
- Belt if pants have loops
- Clean dress shoes or tennis shoes (NO FLIP FLOPS) All shoes must have a strap on the back.
- Hair must be neatly groomed.

Rotation (5th – 12th)

Dress code for Rotation is as follows:

- A “Barnes Academy” yellow or black polo uniform shirt (Can only be purchased from the academy)
- Below the knee khaki skirt, khaki jumpers, loose fitting khaki capris, khaki shorts (to the knee), or khaki slacks
- Clean dress shoes or tennis shoes (NO FLIP FLOPS). All shoes must have a strap on the back.
- No extra body piercing (tongue rings, eyebrow piercing, ETC....) No piercing on boys.
- Hair must be neatly groomed (Including facial hair) .

**All clothes must be neat in appearance. No unnecessary skin should show at any time.

Dress Down Fridays

Students are allowed to wear jeans and tops of their choice on Fridays. Jeans must be of good taste with NO HOLES in them. Tops with writing must be appropriate for all ages to read. (Tops with sexual, occult, or offensive messages are strictly prohibited.) Also, NO CLEAVAGE is allowed to be shown! Remember this is a Christian school, so clothing should exemplify the characteristics of Christ.

I, _____, completely understand the dress code and will abide by it.

Student’s Signature

Parent’s Signature

Date _____ 20 ____

The Barnes Academy

Policies and Procedures

Established 2005

- 1. Classes begin promptly at 8:00 AM. Please be an example to your child and have them at the academy on time.*
- 2. Afternoon release is 3:00 PM. Please, understand that this is for release only! If you need to speak to your child's teacher, he/she will be available at 3:15 for conferences.*
- 3. Students that are remaining at school after 3:00 PM without prior arrangements will be sent to the after-school program and charged a \$5.00 fee for this program. Please remember that our teachers have other obligations to their families, churches, and community after school.*
- 4. Students can only be released to authorized parents and guardians. If you have a change of transportation in the afternoon, please notify the office of these changes otherwise your child will not be released. Identification is required for anyone new picking up a child.*
- 5. All student drivers must have a copy of their license and current insurance card on file in the office in order to drive on campus.*
- 6. Seniors with only 3 classes to complete may leave at 12:30 if they are enrolled in dual enrollment classes or if they have an after school job.*
- 7. Emergency contact numbers and medical release forms must be kept current in the front office in case of an emergency.*
- 8. All medications must be given to your child's teacher at the beginning of the day and a medication administration form must be filled out before any medication can be administered.*
- 9. All students must have current immunization records in the front office in order to remain at the academy.*
- 10. According to Georgia state law, children between the ages of 7 and 16 must attend school. Students are required to be present at school or have a written excuse from home and/or a physician. Any student missing more than 10 days in a semester will be required to attend summer school. This will be pro-rated according to the amount of days over 10 missed by the student. **This is strictly enforced!***
- 11. Tuition is due on the first school day of each month. We are trying to keep tuition rates down and yet compensate our staff appropriately. Prompt payment of tuition will ensure this.*
- 12. Afternoon tutoring is available to any student that requires extra help for an additional fee of \$20.00 per hour and \$15.00 per ½ hour. This fee is due at the time of the service to the tutor.*

****I completely understand these policies and procedures and will follow them to the best of my ability.***

The Barnes Academy

Parent/Guardian's Signature

Letter from student:

The Barnes Academy

Letter from parents:

The Barnes Academy

It is now required that confirmation of flight information and signed approval from Local Representative, and Home Office is needed for travel/flight approval during School Vacation Dates. We ask this is approved 3 weeks prior to departure. (Urgent requests may also be approved depending on circumstances)

I Do hereby give my Son/Daughter _____ Permission to Travel to:

City: _____ State: _____ Country: _____

My Son/Daughter will be traveling from (Dates): _____ to _____

Airline: _____ Flight Number: _____

Airport of Departure: _____ Airport of Arrival: _____

My Son/Daughter will be staying/traveling with:

Name _____ Age: _____

Address _____

Phone _____ E-mail _____

Signed (By Parent or Guardian) _____

Printed Name _____

Date _____

Flight/travel corresponds with school dates or is approved by School Official.

Local / School Representative:

Print Name _____

Signature _____

Parents:

The Barnes Academy

Print Name _____

Signature _____