

Gideon Academy
Important Enrollment Information



School hours

Monday through Friday from 8am- 2:30pm (except holidays and Student Conventions)

Lunch

Students bring their own sack lunch daily. Microwavable is available for food in a Microwavable container and include proper utensils (Forks, Spoons, Napkin etc.)

Monday - Thursday only.

Please send a cold lunch on Fridays due to chapel services

PE Days

Tuesday and Thursday from 1:40-2:30pm

Morning Routine:

Devotional and prayer with pledges (Christian Flag, American Flag, and Bible) Students must be in their office by 8:00am to avoid disruptions to the class and demerits.

Chapel Service:

Fridays from 11:10-12:00 is Chapel (Church Service) Subject to change

School Uniform: ALL UNIFORMS MUST BE ORDERED FROM OUR CATALOG

Girls: Blue/red plaid skirt with a light blue peter-pan collar and black tennis (running or walking) shoes.

Boys: Navy Blue pants with a light blue dress shirt (long or short sleeve) and black tennis (running or walking) shoes.

Chapel Days (Fridays): **Girls** will wear a blue/red plaid crossbow tie. **Boys** will wear a blue/red plaid tie (All day).

Uniforms can be purchased at www.frenchtoast.com by using our school code of **QS5ZPPS**.

PE uniform:

Girls: Navy Blue culottes and a Navy Blue Gideon T-shirt with running shoes.

Boys: Navy Blue warm-up pants and a Navy Blue Gideon T-shirt with running shoes.

Note: There are also sweatshirts available with the Gideon design for cold weather. These are the only ones allowed, even on Mighty Mondays.

Required paperwork along with application forms: Copy of Birth Certificate and Immunization Records

Tuition 2024/2025

Tuition (10 Monthly payments due the 1st of each month) Tuition (1 time Annual 10% Discount due August 15th)

\$300.00

\$2700.00

Note: A \$35 late Fee will be added for payments not received by the 10th of each month

New Student Fees (Due at registration) 2024/2025

Diagnostic Testing \$ 25.00 (waived if transferred from ACE)

Application \$ 250.00

Registration (Due June 15th, Increases to \$300 after June 15th) \$275.00 (total to begin at Gideon)



GIDEON ACADEMY

HONOR INTEGRITY SERVANTHOOD

1316 SHAFTER ROAD, BAKERSFIELD, CA 93313
PHONE: 661.833.9894 FAX: 661.829.4185
WWW.GIDEONACADEMY.ORG

"A SCHOOL FOR TODAY'S CHILDREN TO GROW INTO TOMORROW'S CHRISTIAN LEADERS..."

APPLICATION FOR ENROLLMENT FORM

Submit one for each new student applying for enrollment with the academy.

STUDENT INFORMATION

Student's Name: _____ Male ___ Female ___ Birth Date: _____
Social Security Number: _____ - _____ - _____ Citizenship: _____ Birthplace: _____
Home Address: _____ City & Zip: _____
Mailing Address (if different): _____ City & Zip: _____
Home Number: _____ Father's Cell: _____ Mother's Cell: _____
Email Address: _____ 2nd Email Address: _____

PREVIOUS EDUCATION

Name of Last School Attended _____
Street Address: _____
City, State & Zip: _____
The type of educational institution: Public _____ Private _____ Homeschool* _____
Years Attended _____ Highest Grade Completed _____ Was the A.C.E. curriculum used in this school? _____
If you are currently using the A.C.E. curriculum, please list the last PACE completed in each of the following subjects:
Math _____ English _____ Social Studies _____ Science _____ Word Building _____ Literature _____ Creative Writing _____
**Please include all homeschool records.*
Do you currently have an outstanding balance at this institution? If so, what is your current balance? _____

PARENT INFORMATION

Father's Name: _____ Social Security No. _____ - _____ - _____
Biological Father? Yes ___ No ___ If "No," biological father's name: _____
Employment: _____ Business Telephone: _____
Highest Education Completed: High School/GED ___ Associate's Degree ___ Bachelor's Degree ___ Other ___
Mother's Name: _____ Social Security No. _____ - _____ - _____
Biological Mother? Yes ___ No ___ If "No," biological mother's name: _____
Employment: _____ Business Telephone: _____
Highest Education Completed: High School/GED ___ Associate's Degree ___ Bachelor's Degree ___ Other ___
Marital Status of Child's Biological Parents: Married ___ Widowed ___ Divorced** ___ Separated** ___

****If divorced, please include a photocopy of most recent Child Custody Order. If separated, both parent/guardian signatures are required.**

RELIGIOUS INFORMATION

Church Attending _____

Address, City, State & Zip _____

Pastor _____ Phone _____

Father: Christian? Yes _____ No _____

Mother: Christian? Yes _____ No _____

Has applicant ever made a profession of faith in Christ? Yes _____ No _____

MEDICAL INFORMATION

Family Physician _____ Phone _____

Does student have any physical defects or allergies? _____ If so, please explain _____

Has student received immunization? DTP/DTaP/DT/Td _____ Polio _____ MMR _____

Varicella _____ Hepatitis B _____

SCHOLASTIC INFORMATION

Has student ever been expelled, dismissed, suspended, or refused admission to another school? _____

If yes, explain: _____

Has student ever had disciplinary difficulty at school? _____

If yes, explain: _____

Does student have a juvenile or arrest record? _____

If yes, explain: _____

Has student ever used tobacco or nonprescription drugs or any kind? _____

If yes, explain: _____

Has student ever failed an academic subject in school? _____

If yes, explain: _____

Please indicate academic level of student's previous work:

Excellent _____ Good _____ Average _____ Poor _____

APPLICATION PROCESS

In order for this application to be processed, Gideon Apostolic Academy (Gideon) must receive the following information. **All incomplete applications will be returned.**

_____ Completed and Signed Application with Application Fee

_____ Payment for the One-Time Diagnostic Fee (if applicable)

_____ Payment for the Annual Registration Fee (for new families enrolling one or more students)

_____ Copy of the Student's Birth Certificate

_____ Copy of Legal Custodial Documents (if applicable)

_____ Recent Picture of the Student

_____ Official Transcript* from Student's Most Recent School

_____ Letter of Recommendation from Student's Pastor**



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MEDICAL TREATMENT FORM

Submit one form for each student with the academy.

Student's Name: _____

Permission to Administer Medication

I give my permission for the school to administer Tylenol, Ibuprofen or Benadryl to my child.

Printed Name of Parent/Guardian

Signature of Parent/Guardian

Date

Permission to Administer Prescribed Medication

I understand that in the case of my child needing the administering of prescription or any other medications needed during school hours that a note is required from parent/guardian giving proper school personnel permission and instructions on the administering of such medication and that all medications must be checked in and remain in the school office.

Printed Name of Parent/Guardian

Signature of Parent/Guardian

Date

Permission to Share Information

I give permission to the school to share information relevant to my child's health condition with appropriate school personnel when needed to meet my child's health and safety needs. I give permission to exchange information with my child's primary care physician for the purpose of referral diagnosis and treatment.

Printed Name of Parent/Guardian

Signature of Parent/Guardian

Date



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PHOTO RELEASE FORM

Submit one form for each student with the academy.

Dear Parents,

Technology plays an important role in our school. Students are exposed to a number of programs that will help them improve in academics. Gideon has a web site, <http://www.gideonacademy.org/>. This site features the faculty and staff, our classrooms and the many programs that are offered to our students and their families. We would like to celebrate student achievement by posting pictures on our website, in newsletters, the school yearbook, school broadcast, etc.

We would like to feature our students working together in the classroom and participating in school activities. Your consent is required for your child to be included in any of the pictures. Your child will not be identified by name except in the yearbook. The material will not be used for any commercial purposes and no payments will be made to the participants.

Please mark an X on the line below.

_____ I give consent for my child to be included in any pictures taken. I know that they will not be used for any commercial purposes and will be used solely for displaying the dimensions of the program.

_____ I do not consent for my child to be included in any pictures except the yearbook. I understand that he/she will continue in the activities and remain out of the camera view during any photograph/ video sessions.

Student's Name: _____

Address: _____

Printed Name of Parent/Guardian

Signature of Parent/Guardian

Date: _____



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FINANCIAL AGREEMENT FORM 2024/2025

Submit one form for each student with the academy.

Student's Last & First Name: _____ Grade: _____

This payment agreement is a part of the contract between the parent(s) of the child listed above and Gideon Apostolic Academy (Gideon). The parent(s) of every child is required to timely complete, sign and return this form to the Gideon Admissions Department as a condition of being allowed to register for and attend classes at Gideon. Under this contract, it is the primary responsibility of the parent(s) to pay all tuition and other fees due to Gideon.

By signing this financial agreement form, you agree to pay all reasonable collection costs, including reasonable attorney fees and collection agency fees, incurred to collect any delinquent accounts. In the event of withdrawal from Gideon, enrollment fees are non refundable and refunds for tuition paid in advance will be made in accordance with policy stated in the Parent/Student Handbook.

Tuition Cost

- Pre-K & Kindergarten.....\$3,000
- 1st - 12th Grade.....\$3,000

Discounts

- **Annual Payment** - Pay the total balance by August 1 (a 10% discount will apply for this option - NO discount will be given after August 15).
- **Tuition discount for families with multiple children:** Full tuition is charged for the first and second child enrolled at the highest grade level. Discounts for three or more children in the same family of 10% are applied on a descending grade level basis.

Please indicate the payment option for paying your tuition:

- Annual Payment: **Full tuition payment due by August 1 - 10% Discount.**
- Ten Equal Payments: Tuition may be paid in ten (10) equal monthly payments. The first payment is due August 1 with the final payment due May 1 of the school year.

Registration Cost Due June 1st

- Pre-K & Kindergarten.....\$250
- 1st - 12th Grade.....\$250

Registration Fee for 2024/2025 will be due in full on June 1st 2024, these fees are non-refundable and increases to \$300 after June 15th.

Please deliver my invoice and/or statements via email:

- E-Mail - Father's Mother's _____ (email address)

Things to remember about your financial commitment to Gideon:

- All payments are to be made as agreed upon. It is your responsibility to make your payment as scheduled. If you do not receive a bill please notify the business office by the 1st of the month so we can reissue your bill.
- Gideon accepts cash, check, money orders or Zelle: gideonwarriors@me.com Name: Christ Centered Church
- **A student will not be able to re-enroll until all of your account is current (prior year balance paid in full), or satisfactory arrangements have been made with the School Board.**

- The school staff does not make financial arrangements or decisions. Any arrangements should be made with the School Administrator with approval by the School Board of Directors.
- Payments are due by the 1st, but if not received by the 10th of each month, or no arrangements have been made, **your account will be charged a \$35 late fee.**
- A \$35 fee will be charged for checks returned for insufficient funds. After two occurrences in a school year, only guaranteed funds (cashier's check, money order, cash, or certified check) will be accepted for payment.

If payments are not received by the due date, please expect the following:

- If payment or payment arrangement is not received by the 10th. A late fee of \$35 will be charged to your account.
- If payment is not received by the 10th, expect to receive an email reminder, text and phone call.

Please note the following:

- **The fees noted above do not include additional fees** (Stanford Testing, LCA Dual Enrollment, etc.) that are invoiced and due upon receipt.
- In the event of financial hardship, notify the Administrator or School Board designated individual immediately to work out a payment plan. **Failure to do so will result in late fees**
- Please inform the Gideon administrator in writing at the address above or via e-mail at gideonapostolic7@gmail.com if there are any changes to the billing name, address or payment option. It is your responsibility to keep contact and emergency contact information current with the school administrator at all times.

For the school year 2024/2025, and each proceeding school year my child attends Gideon Academy, I agree to pay all tuition and fees according to the option selected above.

Father/Guardian

Mother/Guardian

Signature: _____

Signature: _____

Print Name: _____

Print Name: _____

Soc. Sec. #: _____

Soc. Sec. #: _____

E-Mail: _____

E-Mail: _____

Date: _____

Date: _____

Emergency Contact #1

Emergency Contact #2

Name : _____

Name: _____

Address: _____

Address: _____

Cell. #: _____

Cell. #: _____

E-Mail: _____

E-Mail: _____

***For your convenience, a form letter is enclosed that you may complete and forward to the school the student most recently attended, requesting that an official transcript be forwarded to Gideon Apostolic Academy. If the student is currently in a homeschool, please submit a copy of the student's record.**

****If the student is not currently active in a church, please include a letter stating the reason why you are seeking enrollment in Gideon Apostolic Academy.**

GENERAL INFORMATION

How did you hear about this school? _____

Reason for selecting this school: _____

Application must be filled out completely before it can be processed. **The Application, Registration, Testing Fees and must accompany application and are non refundable,** unless the student not is accepted into Gideon. If the student is not accepted into Gideon all fees will be refunded with the exception of the application fee. An interview with the parents and the students will be required before final acceptance.

REQUIRED SIGNATURES

Signature of Father/Guardian: _____ Date: _____

Signature of Mother/Guardian: _____ Date: _____

If desired, please list names of any other relatives or non-family members, and their relationship to the student, with whom the student's Academic Advisor, may discuss the student's academic information (tutors, grandparents, non-custodial parent, etc.).

Name: _____ Relationship _____

Name: _____ Relationship _____

Name: _____ Relationship _____

Name: _____ Relationship _____

Send the completed application, payment of application fee, payment of annual administration fee, and all required enrollment documents to:

Gideon Apostolic Academy
Attn: Enrollment Office
1316 Shafter Rd.
Bakersfield, CA 93313



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_____/_____/_____
Date

Attention: Records Department

School Name

School Mailing Address

City, State, & Zip

Transcript Request

To Whom It May Concern:

The following student is applying for acceptance in Gideon Academy:

Student Name

_____/_____/_____
Date of Birth

_____-_____-_____
Social Security Number

This is to request an official copy of the above-named student's academic transcript including attendance, standardized test scores, and evaluation of grading system. Please forward all requested items to the following address:

**Administration
Gideon Academy
1316 Shafter Rd.
Bakersfield, CA 93313**

The release of these records is authorized by:

Print Name _____ Date _____/_____/_____
Parent/Guardian or Student (if over 18 years of age)

Signature _____
Parent/Guardian or Student (if over 18 years of age)



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This is an order form for your embroidery and PE uniform items. Please fill out and pay at the time of ordering. Return the order form to the admin office or email. Pay for items at the office.

PE T-shirts Short sleeve: \$15.00

(XXL \$14.00, XXXL \$17.00)

PE T-shirts Long Sleeve: \$25.00

(XXL \$27.00, XXXL \$29.00)

Hoodie Sweat Shirt pull-over: \$45.00

Hoodie Sweat Shirt zipper: \$45.00

Crewneck Sweat Shirt: \$35.00

Student Name	Qty	Item (example, PE t-shirt SS or LS, Winter Jacket, Hoodie-zipper, etc)	Size (Y-sm, Y-m, Y-L, Adult S, Adult M, Adult L, Adult XL, Adult XXL)	Total \$\$
Grand total				\$

Please order the above items.

Parent Name

Parent Sign

Date