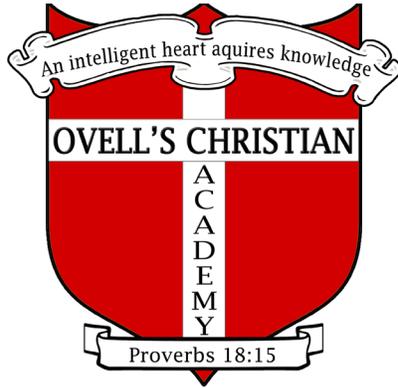


OVELL'S CHRISTIAN ACADEMY

STATEMENT OF COOPERATION AND HONOR CODE

2022-2023



Parents: Please read the following statements carefully and sign below to indicate your agreement.

Ovell's Christian Academy believes that a positive and constructive working relationship between the school and a student's parents or guardians and the student is essential to the accomplishment of the school's mission.

- I hereby affirm that I have read the Parent/Student Handbook and discussed its policies with my student.
- I certify that I consent to and will submit to all governing policies of the school, including all applicable policies in the Parent/Student Handbook.
- I understand that the standards of the school do not tolerate profanity, obscenity in word or action, dishonor to the Word of God, disrespect to the personnel of the school, or continued disobedience to the established policies of the school.
- I understand that the services of the school are engaged by mutual consent, and that either the school or I reserve the right to terminate any or all services at any time.
- I understand that this Handbook does not contractually bind Ovell's Christian Academy and is subject to change without notice by decision of Ovell's Christian Academy's governing body.
- Admission to the school is a privilege, not a right, and admission for one school year does not guarantee automatic admission for future school years.

Parent/Guardian's Name (Print): _____

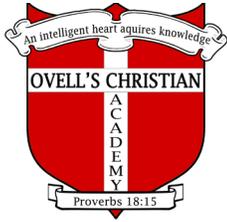
Parent/Guardian's Signature: _____

Date: ____/____/____

Parent/Guardian's Name (Print): _____

Parent/Guardian's Signature: _____

Date: ____/____/____



OVELL'S CHRISTIAN ACADEMY

ADMISSIONS AGREEMENT 2022-2023



Ovell's Christian Academy believes that a positive and constructive working relationship between the school and a student's parents or guardians and the student is essential to the accomplishment of the school's mission. The following is a list of terms and conditions of Admission to our school.

TUITION TERMS AND AGREEMENTS

- The registration fee is non-refundable.
- The parents or guardians are responsible for the total amount of tuition.
- Parents or guardians are responsible for making punctual tuition payments.
- If an account becomes 2 months overdue, the student will be suspended from all Ovell's Christian Academy classes and activities until the account becomes current.
- In order for report cards and transcript to be issued, or for students to be withdrawn, there can be NO OUTSTANDING BALANCE.
- If a student is withdrawn early the tuition is due for the remainder of the semester.
- For scholarship recipients, parent's agree to sign their student(s) checks within 72 hours of notice.
- Failure to endorse a scholarship check could result in expulsion or suspension of a student.

PARENT/GUARDIAN AND STUDENT CONDUCT POLICY

- All parents/guardians and students will comply with the rules and regulations set forth in the Ovell's Christian Academy Handbook.
- This Handbook does not contractually bind Ovell's Christian Academy and is subject to change without notice by decision of Ovell's Christian Academy's governing body.
- Students and parents/guardians will be respectful of the teachers and administration.
- Ovell's Christian Academy reserves the right to dismiss any student whose parent/guardian fail to cooperate with the administration.
- Ovell's Christian Academy does not tolerate profanity, obscenity in word or action, dishonor to the Word of God, disrespect to the personnel of the school, continued disobedience to the established policies of the school, and failure to meet academic standards.
- Students that continue to violate the conduct policies or fail to meet academic expectations of Ovell's Christian Academy may be dismissed at the discretion of the administration.
- services of the school are engaged by mutual consent, and that either the school or I reserve the right to terminate any or all services at any time.
- Admission to the school is a privilege, not a right, and admission for one school year does not guarantee automatic admission for future school years.

ATTENDANCE POLICY

- Attendance to scheduled classes is mandatory.
- Parents or guardians must contact the school office if the student is going to be absent for any reason.
- The student (3-8) or parent (K-2) will be responsible for contacting his/her teacher in order to obtain the homework assignments for the days missed.
- Late work during the grading period is penalized.

DRESS CODE POLICY

- Parents and students agree to consistently follow the dress code rules and guidelines as indicated in the Parent Handbook.
- Failure to habitually comply to dress code guidelines will result in disciplinary actions.

CAMPUS ARRIVAL/DEPARTURE POLICY

- Parents or guardians will drop students off at school on time.
- When tardy, parents are required to sign their student(s) in.
- Parents or guardians will pick up students on time.

ATTORNEY’S FEES

- Whenever any sums due hereunder are collected by law, or by and through any attorney at law, the prevailing party shall be entitled to recover reasonable attorney’s fees, plus costs and expenses of collection.
- In addition, if Ovell's Christian Academy pursues an action at law or in equity, including an action for declaratory relief, Ovell's Christian Academy will be entitled to recover reasonable attorney’s fees in addition to any other relief to which it may be entitled.
- The court may set the attorney’s fees in the same action or in a separate action brought for that purpose.

MEDIA RELEASE

- Parents/guardians and students hereby grant Ovell's Christian Academy the right to photograph, videotape, or otherwise digitally collect student’s likeness, voice, and sounds (as “Works”) during the student’s presence at Ovell's Christian Academy and Ovell's Christian Academy sponsored events and assign and grant all rights in these Works to Ovell's Christian Academy.
- This gives Ovell's Christian Academy the right to use or sublicense the Works and student names, likenesses and biographies, in Ovell's Christian Academy’s discretion, in all media, for the promotion of Ovell's Christian Academy and its mission and program.
- Ovell's Christian Academy events are semi-public events that may be attended by members of the press, business corporations, and media (“commercial guests”) not under the control of Ovell's Christian Academy who might photograph or videotape the event.
- Ovell's Christian Academy asks all commercial guests to comply with the Ovell's Christian Academy policy of not printing a minor’s name with his/her picture, and Ovell's Christian Academy asks them not to use images of the participants or attendees for the commercial purposes without obtaining specific written permission from the person or a minor’s parent or guardian.

This agreement will be governed by and construed in accordance with the laws of the State of Florida. I have read the Admissions Agreement and agree to abide by the above-stated terms and conditions.

Parent/Guardian’s Name (Print): _____
 Parent/Guardian’s Signature: _____
 Date: ____/____/____

Parent/Guardian’s Name (Print): _____
 Parent/Guardian’s Signature: _____
 Date: ____/____/____

OVELL'S CHRISTIAN ACADEMY

Statement of Understanding and Release of Liability in Regard to Covid-19



COVID-19 has been declared a worldwide pandemic by the World Health Organization. In order to resume regular school operations, Ovell's Christian Academy have put in place reasonable preventative measures and standards of behavior to reduce the spread of COVID-19 at School and School activities ("school"). Even with implementation of safety protocols, the School cannot guarantee that you or your child(ren) will not become infected with COVID-19; attendance at School and/or participation in the School activity could increase your risk and/or your child(ren)'s risk of contracting COVID-19.

ASSUMPTION OF RISK: The *Ovell's Christian Academy* cannot prevent you or your child/children from becoming exposed to, contracting, or spreading COVID-19 while attending School and related activities. It is not possible to prevent against the presence of the disease. Therefore, if you choose for your children to attend School, your child and/or other family members may be exposed to and/or at increased risk of contracting or spreading COVID-19.

I/we have read and understood the above warning concerning COVID-19. I/we hereby choose to accept the risk of contracting COVID-19 for myself/ourselves, my/our child/children, and/or other family members in order for my/our child, _____ (Name of Minor Child) to attend school and related activities. By signing this agreement, I/we acknowledge the contagious nature of COVID-19 and that my/our child(ren) and I/we may be exposed to or infected by COVID-19 by attending and/or being present at school, and/or by participating in school activities, and that such exposure or infection may result in personal injury, illness, permanent disability, and death.

WAIVER OF LAWSUIT/LIABILITY: I hereby forever release and waive my right to bring suit against *Ovell's Christian Academy* and its owners, officers, directors, managers, officials, trustees, agents, employees, authorized volunteers, or other representatives in connection with exposure, infection, and/or spread of COVID-19. I understand that this waiver means I give up my right to bring any claims including for personal injuries, death, disease or property losses, or any other loss, including but not limited to claims of negligence and give up any claim I may have to seek damages, whether known or unknown, foreseen or unforeseen.

CHOICE OF LAW: I understand and agree that the law of the State of Florida will apply to this contract.

I HAVE CAREFULLY READ AND FULLY UNDERSTAND ALL PROVISIONS OF THIS RELEASE, AND FREELY AND KNOWINGLY ASSUME THE RISK AND WAIVE MY RIGHTS CONCERNING LIABILITY AS DESCRIBED ABOVE.

I am the parent or legal guardian of the minor named above. I have the legal right to consent to and, by signing below, I hereby do consent to the terms and conditions of this Release.

PARENT/GUARDIAN'S NAME (PRINT): _____
PARENT/GUARDIAN'S SIGNATURE: _____
DATE: ____/____/____

PARENT/GUARDIAN'S NAME (PRINT): _____
PARENT/GUARDIAN'S SIGNATURE: _____
DATE: ____/____/____

OVELL'S CHRISTIAN ACADEMY BLANKET FIELD TRIP PERMISSION FORM

TO WHOM IT MAY CONCERN:

_____ has my permission to participate in all field
(Name of Child)
trips to be taken by Ovell's Christian Academy during the 2022-2023 school year. As
parent/guardian I acknowledge the following:

1. School officials are authorized to obtain emergency medical treatment for this student as necessary.
2. During this field trip, that Ovell's Christian Academy will not be liable for injury to this student as result of the negligence, errors, and omissions of others (i.e., charter bus owners and drivers, or amusement park owners or workers), their agents, heirs, employees or assigns either through their action or inaction.
3. If your child takes personal belongings on this field trip, he or she will be responsible for them. Ovell's Christian Academy accepts no responsibility for personal items, such as watches, purses, money, cameras, and wallets, etc. If a student stores personal items in a locker at an amusement park, that entity may be responsible for any loss or damage.

Signature of Parent/Guardian

Date

NOTES:

1. THIS BLANKET FORM MAY BE USED FOR TRIPS OF A SIMILAR NATURE, WHICH ARE REPEATED DURING THE SCHOOL YEAR.
2. FOR ALL OUT-OF-COUNTY TRIPS, A NOTARIZED MEDICAL TREATMENT AUTHORIZATION FORM MUST ALSO BE AVAILABLE. THE MEDICAL FORM MUST BE COMPLETED PRIOR TO THE STUDENT'S FIRST OUT-OF-COUNTY TRIP AND SHOULD BE RETAINED FOR USE DURING THE REMAINDER OF THE SCHOOL YEAR.

OVELL'S CHRISTIAN ACADEMY MEDICAL TREATMENT AUTHORIZATION FORM

TO WHOM IT MAY CONCERN:

I the undersigned parent/guardian of _____ hereby authorize any necessary medical treatment for this student while participating in field trips conducted under the sponsorship of Ovell's Christian Academy during the 2022-2023 school year and guarantee payment of all charges incurred as a result of this medical treatment.

INFORMATION:

ALLERGIES TO FOOD, MEDICATION, ETC. (If none, so state.) _____

SPECIAL MEDICAL CONDITIONS (If none, so state.) _____

FAMILY PHYSICIAN _____

OFFICE ADDRESS _____ PHONE NO _____

PARENT/GUARDIAN NAME _____ (PRINT)

PARENT/GUARDIAN HOME ADDRESS _____

CITY _____ STATE _____ ZIP _____

HOME PHONE _____ WORK PHONE _____

Insurance Company _____ Policy No. or Group No. _____

PARENT/GUARDIAN SIGNATURE _____ DATE _____

STATE OF FLORIDA, COUNTY OF _____ I hereby certify that the foregoing was executed before me this _____ day of _____, by _____, who is personally known to me or who has produced _____ _____ as identification and who did (did not) take an oath. _____ Notary Public, State of Florida
--

THIS FORM IS TO BE USED FOR ALL OUT OF COUNTY FIELD TRIPS EXCEPT ATHLETIC ACTIVITIES. THE FORM SHOULD BE COMPLETED PRIOR TO THE STUDENT'S FIRST OUT OF COUNTY TRIP AND RETAINED ON FILE FOR THE REMAINDER OF THE SCHOOL YEAR.

837.06 False official statements - Whoever knowingly makes a false statement in writing with the intent to mislead a public servant in the performance of his or her official duty shall be guilty of a misdemeanor of the second degree, punishable as provided in s.775.082 or s.775.083.

STUDENT REGISTRATION FORM

Last Name (Legal) _____ First Name (Legal) _____
 Middle Name _____ Birthdate ____/____/____
 Birth Weight (Lbs. and Oz.) _____ Birthplace _____
 Address _____
 City _____ State _____ Zip _____

Gender	Federal Ethnic Category	Federal Race Category (Check all applicable)	Student Lives With
<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Non-Hispanic/Non-Latino <input type="checkbox"/> Hispanic/Latino	<input type="checkbox"/> White <input type="checkbox"/> Asian <input type="checkbox"/> Native Hawaiian <input type="checkbox"/> Pacific Islander <input type="checkbox"/> Black or African American <input type="checkbox"/> American Indian/Alaska Native	<input type="checkbox"/> Both Parents <input type="checkbox"/> Mother Only <input type="checkbox"/> Father Only <input type="checkbox"/> Legal Guardian <input type="checkbox"/> Other

LAST SCHOOLS ATTENDED (For Kindergarten registration, please list Pre-K)

Type of School	Name of School	Years Attended
<input type="checkbox"/> Public <input type="checkbox"/> Home Education <input type="checkbox"/> Private	_____	_____
	City/State _____	Grade _____

ADDITIONAL STUDENT INFORMATION

Does the student have a current 504?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Has student ever been arrested, resulting in a charge?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Has student ever received a McKay Scholarship?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Has student ever had Juvenile Justice action against him/her?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Identified Special Education?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Is student on Community Control?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Has student ever been expelled from a previous School? If yes, date: ____/____/____ School (Name/County/State) _____				<input type="checkbox"/> Yes	<input type="checkbox"/> No

This is to certify that all the information on this registration form is true to the best of my knowledge and belief. I understand that inadequate information may result in delayed entry.

 Parent/Guardian Signature

 Date

 Relationship to Student

 Parent/Guardian Signature

 Date

 Relationship to Student

PARENT/GUARDIAN INFORMATION

Student Name (Last, First, Middle Initial) _____

PARENT/GUARDIAN INFORMATION (Please list parent/guardian in order of priority)

Last Name (Legal) _____ First Name (Legal) _____

Middle Name _____ Birthdate _____

Address _____ City _____ St _____ Zip _____

Home Phone _____ Work Phone _____ Cell Phone _____

Relationship to Student: Parent Guardian Other _____

Email Address _____ Pickup Student Yes No

Legal Documentation (example: custody, restraining order, etc.)

PARENT/GUARDIAN INFORMATION

Last Name (Legal) _____ First Name (Legal) _____

Middle Name _____ Birthdate _____

Address _____ City _____ St _____ Zip _____

Home Phone _____ Work Phone _____ Cell Phone _____

Relationship to Student: Parent Guardian Other _____

Email Address _____ Pickup Student Yes No

Legal Documentation (example: custody, restraining order, etc.)

Emergency Student Information Form

School Year 2022-2023

STUDENT INFORMATION

Last Name (Legal)	Generation (ie. Jr, II)	First Name (Legal)	Middle Name (Legal)
Preferred Name	Legal Documentation (example: custody, restraining order, etc.) <i>Please Provide supporting documentation</i>		
Primary E-Mail	Gender	Birth Date	Primary Phone
	<input type="checkbox"/> Male <input type="checkbox"/> Female		
Address		City, State	Zip Code
Mailing Address		City, State	Zip Code

MEDICAL/PHYSICAN INFORMATION

Doctor's Name	Dentist's Name	Preferred Hospital
Doctor's Phone Number	Dentist's Phone Number	Currently Under Physican's Care
Insurance	Insurance Phone Number	Policy # / Group #
Medicine Currently Taking		
Medical History		
Allergies		

PARENT/GUARDIAN INFORMATION (Please list parent/guardian in order of contact priority.)

Last Name	First Name	Relationship	Pick-Up
			<input type="checkbox"/> Yes <input type="checkbox"/> No
Address		City, State	Zip Code
Home Phone	Cell Phone	Employer	Work Phone

Last Name	First Name	Relationship	Pick-Up
			<input type="checkbox"/> Yes <input type="checkbox"/> No
Address		City, State	Zip Code
Home Phone	Cell Phone	Employer	Work Phone

OVELL'S CHRISTIAN ACADEMY

STUDENT EMERGENCY CARE PLAN

2022-2023

*Please note that this form will be given to each teacher, faculty, and staff member to keep in their emergency folder for the safety of each one of our students. *This authorization is valid for this school year only.

Student's Name _____ DOB ____/____/____
 Allergies: _____
 Other Important Health Info: _____

If This Happens...	Do This...

POSSIBLE EMERGENCY SITUATIONS:
 If any of the above conditions are observed:
 1. An adult is to stay with the student.
 2. Administration will be immediately notified with the following info: student's name, location of student, the problem.

_____ (Initial If Applicable) Please administer topical ointment during first-aid care such as alcohol, witch hazel, hydrogen peroxide, or antibacterial ointment.

Emergency Information:

Student's Home Address: _____

Mother's Name _____	Home Phone _____
Work Phone _____	Cell Phone _____
Father's Name _____	Home Phone _____
Work Phone _____	Cell Phone _____
Alt. Contact Name _____	Home Phone _____
Work Phone _____	Cell Phone _____

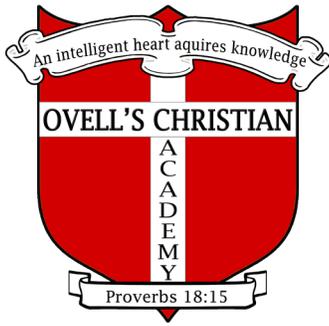
Preferred Hospital: _____	Phone: _____
Local Hospital Emergency Room: _____	Phone: _____
Primary Physician: _____	Phone: _____
Specialists: _____	Phone: _____

AUTHORIZATION:

Yes No I give permission for the physician and school district personnel to exchange pertinent information pertaining to this child's condition/progress.

Parent/Guardian (Print) _____	Date _____
Parent/Guardian (Signature) _____	Date _____
Administrator (Signature) _____	Date _____

837.06 False official statements – Whoever knowingly makes a false statement in writing with the intent to mislead a public servant in the performance of his or her official duty shall be guilty of a misdemeanor of the second degree, punishable as provided in s.775.082 or s.775.083.



OVELL'S CHRISTIAN ACADEMY

ELECTRONIC COMMUNICATION

SYSTEMS POLICY

Ovell's Christian Academy provides a variety of electronic communications systems for educational purposes. **The electronic communications system is defined as the school's network (including the wireless network), servers, computer workstations, mobile technologies, peripherals, applications, databases, online resources, Internet access, email, and any other technology designated for use by students, including all new technologies as they become available.** This also includes any access to the OCA electronics system while on or near school property, in school vehicles and at school sponsored activities, and includes the appropriate use of school technology resources via off-campus remote access. Please note that the Internet is a network of many types of communication and information networks, including Digital resources, and is part of the school's electronic communications systems. Digital applications offer a variety of communication, collaboration, and educational creativity opportunities.

In accordance with the Children's Internet Protection Act, Ovell's Christian Academy educates staff and students regarding appropriate online behavior to ensure Internet safety, including use of email and online resources, and has deployed filtering technology and protection measures to restrict access to inappropriate content such as those that are illegal, obscene or harmful to minors. While every effort is made to provide the most secure and optimal learning environment, it is not possible to absolutely prevent access (accidental or otherwise) to inappropriate content. If you come across any inappropriate content or communication notify a teacher or parent immediately. **It is each student's responsibility to follow the guidelines for appropriate and acceptable use.**

APPROPRIATE USE

- Students must only open, view, modify, and delete their own computer files.
- Internet use in the classroom must be directly related to school assignments and projects
- Students will be assigned individual email and network accounts and must use only those accounts and passwords that they have been granted permission by the school to use. All account activity should be for educational purposes only.
- Students must immediately report threatening messages or discomfoting Internet files/sites to a teacher.
- Students must at all times use the school's electronic communications system, including email, wireless network access, and digital tools/resources to communicate only in ways that are kind and respectful.
- Students are responsible at all times for their use of the school's electronic communications system and must assume personal responsibility to behave ethically and responsibly, even when technology provides them freedom to do otherwise.

Inappropriate Use

- Wireless Hotspots not provided by OCA are prohibited on the OCA network.
- Using the school's electronic communications system for illegal purposes including, but not limited to, cyberbullying, gambling, pornography, and computer hacking.
- Disabling or attempting to disable or bypass any system monitoring or filtering or security measures, including deleting browser history to conceal internet patterns.
- Sharing user names and passwords with others; and/or borrowing someone else's username, password, or account access.
- Purposefully opening, viewing, using or deleting files belonging to another system user without permission.
- Electronically posting personally identifying information about one's self or others (i.e. addresses, phone numbers, and pictures).
- Downloading or plagiarizing copyrighted information without permission from the copyright holder.
- Intentionally introducing a virus or other malicious programs onto the school's system.
- Electronically posting messages or accessing materials that are abusive, obscene, sexually oriented, threatening, harassing, damaging to another's reputation, or illegal.
- Gaining unauthorized access to restricted information or network resources.

CYBERBULLYING

Cyberbullying is defined as the use of any Internet-connected device for the purpose of bullying, harassing, or intimidating another student. This includes, but may not be limited to:

- Sending abusive text messages to cell phones, computers, or Internet-connected game consoles.
- Posting abusive comments on someone's blog or social networking site (e.g., Instagram or Facebook).
- Creating a social networking site or web page that masquerades as the victim's personal site and using it to embarrass him or her.
- Making it appear that the victim is posting malicious comments about friends to isolate him or her from friends.
- Posting the victim's personally identifiable information on a site to put them at greater risk of contact by predators or strangers.
- Sending abusive comments while playing interactive games.
- Recording and distributing media with the intent to manipulate or embarrass others.

CHILDREN'S ONLINE PRIVACY PROTECTION ACT (COPPA)

Students 13 or younger. For students under the age of 13 the Children's Online Privacy Protection Act requires additional parental permission for education software tools that collect personal information about the child. Parents wishing to deny access to these educational tools must do so in writing to the campus principal.

CHILDREN'S INTERNET PROTECTION ACT (CIPA)

All students will receive training in compliance with the CIPA. Training will address:

- Safety and security of minors when using electronic mail, chat rooms, and other forms of direct electronic communications
- Unauthorized access, including so-called "hacking," and other unlawful activities by minors online;
- Unauthorized disclosure, use and dissemination of personal information regarding minors;
- Measures designed to restrict minors' access to materials harmful to minors; and
- Educating minors about appropriate online behavior, including interacting with other individuals on social networking websites and in chat rooms and cyberbullying awareness and response.

CONSEQUENCES OF INAPPROPRIATE USE

- Appropriate disciplinary or legal action in accordance with the Student Handbook and applicable laws including monetary damages.
- Suspension of access to the school's electronic communications system.
- Revocation of the school's electronic communications system account(s); and/or
- Termination of System User Account: The school may deny, revoke, or suspend specific user's access to the school's system with or without cause or notice for lack of use, violation of policy or regulations regarding acceptable network use, or as a result of disciplinary actions against the user.
- Possible criminal action.

DISCLAIMER

The school's system is provided on an "as is, as available" basis. The school does not make any warranties, whether expressed or implied, including, without limitation, those of fitness for a particular purpose with respect to any services provided by the system and any information or software contained therein. The school uses a variety of vendor-supplied hardware and software. Therefore, the school does not warrant that the functions or services performed by, or that the information or software contained on the system will meet the user's requirements. Neither does the school warrant that the system will be uninterrupted or error-free, nor that defects will be corrected.

Opinions, advice, services, and all other information expressed by system users, information providers, service providers, or other third-party individuals in the system are those of the providers and not necessarily the school.

The school will cooperate fully with local, state, or federal officials in any investigation concerning or relating to misuse of the school's computer systems and networks.

TERM

This policy is binding for the duration of the student's enrollment at Ovell's Christian Academy.

OVELL'S CHRISTIAN ACADEMY

STUDENT ACCEPTABLE USE POLICY AGREEMENT

2022-2023

Student's Name: _____

Grade Level _____

I understand that my computer use is not private and that the School will monitor activity on the computer system. I have read the School's electronic communications system policy and administrative regulations and agree to abide by their provisions. I understand that violation of these provisions may result in suspension or revocation of system access.

Student Signature _____

Date _____

PARENT AGREEMENT:

I have read the School's Guidelines for Acceptable Use of Ovell's Christian Academy Technology Resources, and this agreement form. In consideration for the privilege of my child using the School's electronic communications system, and in consideration for having access to the public networks, I hereby release the School, its operators, and any institutions with which they are affiliated from any and all claims and damages of any nature arising from my child's use of, or inability to use, the system, including, without limitation, the type of damage identified in the School's policy, and administrative regulations.

Parent or Guardian Name – (Please Print)

Date

Parent or Guardian Signature

Home Address, City, State, Zip

Home Phone Number

Email Address

Ovell's Christian Academy Parent Questionnaire

What are your child's special abilities?	_____
Does your child have any learning disorders?	_____
What are your goals for your child this year?	_____
What are your concerns for your child this year?	_____
What would an ideal teacher do for your child?	_____
Does your child have any social or behavioral issues?	_____
What would best help your child learn?	_____
Is there anything you want me to know about your child?	_____
Do you have any questions or concerns?	_____