



Wynfield Christian Academy

Renee K. Walker, CEO
143 Williamson Drive
Macon, Georgia 31210
978-563-9663

Documentation Only Online Enrollment Application (For New Students)

Dear Parent/Guardian,

Thank you for your interest in Wynfield Christian Academy (WCA). We look forward to getting to know you and your student. Below is a checklist of admissions information required by WCA. Instructions for digital submission and non-digital submission are on page four of this application. If you have any questions at any point during the admissions process, please contact us.

Sincerely,

Renée K. Walker, CEO
and Tracy Rhoades,
Principal

Packet Checklist: Place an X in each blank certifying requirements have been met before mailing.

- _____ 1 Printed copy of application (not needed if emailed with digital signature)
- _____ 2. Release the School Records:
The form is located on homepage under **WCA School Information and Homeschool Resources**; click on the Request for School Records link. If homeschooled the previous year, provide a list of courses finished in the last completed grade. Include curriculum name, publisher and the final grade attained by your student. (Ex. Abeka English Grade B; Apologia Chemistry Grade B).
- _____ 3. Copy of student test scores attached.
- 4. Copy of parent/mentor's transcript, degree or diploma. Please inform if already on file.
- _____ 5. Mandatory Technology fee - \$35.00 non-refundable per family per year
- _____ 6. Registration Fee - \$100.00 non-refundable

- 7. Tuition payment is due by the tenth of each month, August through May, regardless of your individual school calendar. Include \$5.00 late fee for any payment made after the 10th of the month. Tuition will be adjusted if enrollment is after August 31st, to insure full tuition is received prior to May 10th of the school year.

_____ High School Students 9-12th - \$300 per year or \$30 per month due by July 1st.
After July 1st, - \$350.00 per year or \$35.00 per month.
_____ Elementary students K-8th - \$100.00 or \$10.00 per month.

Payment to be made: _____
_____ by check

Type your answers in spaces provided.

Student's Information

Full Legal Name _____
Last First Middle Name

Address: _____
City State Zip Code

Home Phone: _____ S.S # Mandatory

Age: _____ Date of Birth _____ County of Residence _____

Most Recent School Placement _____ Last Grade Completed _____

School System _____

Address _____

Parents Information

Father's

Name: _____ Email: _____
Last First M.I.

Address: _____
City State Zip Code

Home Phone: _____ Work _____ Cell: _____

Educational Level: _____ Occupation: _____

Employer: _____

Mother's _____ Email: _____
Name Last First M.I.

City State Zip Code
Home Phone: _____ Work _____ Cell: _____

Educational Level _____ Occupation: _____

Employer : _____

Please read the following statements. All statements must be answered "yes" for a student to be enrolled.

Yes
_____ 1. The student will be mentored by either a parent with a high school diploma or by a non-parent with a Bachelor's degree.

2. Please indicate who will be the student's Mentor:
_____ Parent
Tara Pvel Other (If someone other than parent, mentor must complete the following identifying information and the mentor's signature is required).

Mentor Name: Pvel Tara Email: tarapvel@gmail.com
Last First M.I.

Address: 1602 Elberta Rd
Warner Robins GA 31093
City State Zip Code

Home Phone: 478 342 2270 Work 478 342 2270 Cell: 478 342 2270

Degree: Master's in Education *Mentor Signature: Tara Pvel*

yes 3. I understand that the mentor will maintain weekly grades.

yes 4. The mentor/parent agrees to document 24 clock hours of informational seminars on WCA Online or another approved activity by WCA.

yes 5. The mentor and student will complete and submit all requirements, within a 30 day timeframe of all tests completed, and meet deadlines as stated in the **Yearly Requirements, Academics Policies and Deadline section** within the School Information Room on the WCA website.

yes 6. The student will take a course final per course in the presence of a center staff member.

yes 7. The student will have a secluded, quiet area of study. Describe area of study.

Classroom with own desk and small class size

8. List the student and family goals for your homeschool program. _____
To improve educational outcomes for the student

yes 9. The student will have access to research encyclopedia or CD-ROM capability.

yes 10. I understand that a graduate of WCA must have one set of national standardized test scores per school year on file and one SAT/ACT score before high school graduation.

yes 11. The student must have opportunities to engage in frequent group enrichment and socialization activities. In which homeschool association or co-op are you actively involved?

yes 12. I understand that a student must complete a minimum of 120 clock hours of course activity per course, and maintain a school year of 180 days with each day being a minimum of 4.5 hours.

13. Which learning style most applies to the student?

_____ Auditory ex. Lectures, audiotapes, etc.

_____ Visual- ex. Videos, and texts, etc.

_____ Kinesthetic/Tactile-ex. Hands on, experiments, manipulatives, etc.

Instructions for Digital/Non-Digital Submission

Complete this application online and pay online. Use the Adobe Reader's "Fill & Sign Tools" button to "Work with Certificates" and "sign with certificates" by following Adobe Reader's instructions. Then save a copy of this form to your computer and email a copy to short@wynfieldca.org with WCA Enrollment in the Subject Line. Any supporting documents such as testing, report cards, mentor documentation, and check payments should be sent by postal mail to **Susann Short, 105 Lentz Dr, Macon, GA 31220.**

If unable to email the required documentation or sign the application using Adobe Reader's Sign with Certificate tool, or pay online, then use the postal service to send a typed and printed copy of the application with your original signature, along with supporting documents, to **Susann Short, 105 Lentz Dr, Macon, GA 31220. Mail Payment to Susann Short, 105 Lentz Dr, Macon, GA 31220.**

Student's Name _____ Student's Grade _____

Disclaimer and Signature

Ga. Law requires grades to be sent to the state within a specific timeframe. **(Graduating students of WCA must meet deadlines in order to prevent problems receiving an accredited diploma and/or the Hope Scholarship.)** Monetary penalties or loss of college scholarships due to submission of late records may incur if deadlines are not met.

By signing below:

- I certify I am the parent of the student named on this application.
- I certify that I have read and am in agreement and compliance with all the information concerning WCA Home Study Program.
- I understand and agree that if proper documentation is not submitted, WCA cannot grant credit for the program.
- I understand that satisfactory enrollment in the WCA program for one year is required before prior credit can be verified by WCA.
- I understand full tuition will be required regardless of whether my student completes the grade level and/or withdraws early from the program.
- I understand annual standardized testing and graduation fees are non-refundable, and will be billed separately.
- I have read and understood and agree to abide by all policies, requirements, and fees of Wynfield Christian Academy.

I understand this contract will be valid and legally binding through calendar years and/or grade levels as long as the student is enrolled in the WCA program. The required, written withdrawal form must be completed and submitted to staff to end the enrollment period. I understand my digital e-signature, any photocopy or facsimile of this authorization has the same effect as the original. I also understand this authorization shall remain in effect from the date of contract and for all years student is enrolled with WCA.

Parent Signature _____ *Date* _____