

# DAYSRING ACADEMY CHURCH SCHOOL ENROLLMENT FORM

## I. TO BE COMPLETED BY PARENT OR GUARDIAN:

Student Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Grade: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

County: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

\_\_\_\_\_  
**Parent/Legal Guardian Signature**

\_\_\_\_\_  
**Date**

## II. TO BE COMPLETED BY PARENT:

### CONSENT for NOTIFICATION OF STUDENT WITHDRAWAL

I hereby give prior consent to the administrator of DaySpring Academy to notify the Public school superintendent should the above-named student cease attendance at DaySpring.

\_\_\_\_\_  
**Parent/Legal Guardian's Signature**

\_\_\_\_\_  
**Date**

## III. TO BE COMPLETED BY ADMINISTRATOR:

Church School of Enrollment:

Address:

Email:

**DaySpring Academy/High School**

**1302 Madison Park Dr, Madison, AL 35758**

**dayspringacademy1996@gmail.com**

\_\_\_\_\_  
**Administrator's Signature**

\_\_\_\_\_  
**Date**

# DAYSPRING ACADEMY FAMILY INFORMATION FORM

Date: \_\_\_\_\_ County: \_\_\_\_\_

School District: \_\_\_\_\_ city/county system \_\_\_\_\_

Guardian/Parent Name: \_\_\_\_\_

Address: \_\_\_\_\_ City/zip: \_\_\_\_\_

Cell: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Referred by: \_\_\_\_\_

**If the enrolling parent does not have sole custody or rights to make all educational choices, please have other parent/legal guardian sign indicating they are in agreement with the enrollment of their child.**

2<sup>nd</sup> parent signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Student Information**

Name	Age/Birthdate	Grade
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

\_\_\_\_\_ Total Enclosed ( ) PayPal: **DaySpringAcademy1996@gmail.com**  
( ) MO ( ) ACH ( ) check-allow up to 2 weeks to process  
( ) \$110 Enrollment Fee  
( ) 3.5% Service Fee when using PayPal

**Read and Initial ALL:**

\_\_\_\_\_ **I have read the handbook COMPLETELY.**

\_\_\_\_\_ I have included a SASE (Self Addressed Stamped Envelope)

\_\_\_\_\_ I have included all forms needed:

- ( ) CSEF- Church School Enrollment Form
- ( ) RSR- Request for School Records
- ( ) FIF- Family Information Form
- ( ) PAF- Policy Agreement Form

\_\_\_\_\_ I understand it is my responsibility and I am **REQUIRED** to join the DSA Discord group.

\_\_\_\_\_  
Parents Signature

\_\_\_\_\_  
Date

# DAYSPRING ACADEMY POLICY AGREEMENT FORM

PLEASE READ THOROUGHLY (2 pages)

Initial each line:

- \_\_\_\_\_ We/I have downloaded and read/understand the enrollment handbook.
- \_\_\_\_\_ We/I have read the guidelines and policies of DSA and understand/agree with them.
- \_\_\_\_\_ We/I understand the **enrollment fee is \$110** due upon enrolling with DSA
- \_\_\_\_\_ We/I understand there is no refund if we leave the school at any time
- \_\_\_\_\_ We/I understand that transcripts are not supplied without the payment of any applicable fees and submission of forms.
- \_\_\_\_\_ We/I understand that the enrollment fee does not cover children who are in another school but are not enrolling in DaySpring at this time.
- \_\_\_\_\_ I understand that an additional fee of \$28 will be due should we decide to enroll them later.
- \_\_\_\_\_ We/I read/understand DSA policy on **student records and transcripts.**
- \_\_\_\_\_ We/I will keep DSA informed of new phone numbers or address change.
- \_\_\_\_\_ We/I understand that if a child moves in with another parent/family member, friend, enrollment does not transfer, and a new enrollment is required
- \_\_\_\_\_ **We/ I do not hold DSA, the administrator, staff members or volunteers liable for the education of my child, including purchasing of curriculum, grading or testing.**
- \_\_\_\_\_ We/I understand **DSA is not state accredited.**
- \_\_\_\_\_ We/I understand **DSA fully places all responsibility of the education of my child on me, the parent.**
- \_\_\_\_\_ We/I know how to obtain a School Exclusion Form for a driver's license.
- \_\_\_\_\_ We/I understand we are required to have access to the discord group to check on announcements and are responsible for knowing the information.
- \_\_\_\_\_ **We/I understand how to deal with truant officers and PS personnel who ask about our enrollment or other education decisions.(see handbook)**
- \_\_\_\_\_ We/I understand our family is enrolled in a church school and not homeschooling per the laws of Alabama.
- \_\_\_\_\_ We/I understand we MUST re-enroll every year (June-August) using the re-enrollment form online only!
- \_\_\_\_\_ We/I understand we must buy books, plan curriculum and a daily program and keep records of grades/work completed.

\_\_\_\_\_  
Parent(s)Signature

\_\_\_\_\_  
Parent(s) Signature

\_\_\_\_\_  
Date

**\*\*If both parents do not sign, please provide proof of sole custody and/or legal right to make educational decisions.**

# DAYSPRING ACADEMY POLICY AGREEMENT FORM

## Policy Agreement Form cont...

### The Following are reasons for dismissal:

- \_\_\_\_\_ Failure to pay fees or a bounced check not cleared up in timely manner
- \_\_\_\_\_ Failure to inform me of a new address or phone number.
- \_\_\_\_\_ Conduct that puts DSA in jeopardy or legal trouble
- \_\_\_\_\_ Child/parent involved in illegal activities
- \_\_\_\_\_ Child moving to another residence without informing DSA
- \_\_\_\_\_ **Parent not having full legal custody OR spouse not agreeing to Home education**
- \_\_\_\_\_ Disregard for DSA policies.
- \_\_\_\_\_ **Parents not being honest about problems going on that may have a bearing on legal issues/custody issues/truancy issues**
- \_\_\_\_\_ Not reading and adhering to ALL policies and guidelines
- \_\_\_\_\_ Not having the update copy of the Enrollment handbook.
- \_\_\_\_\_ Not keeping a copy of the CSEF in a file
- \_\_\_\_\_ Not checking discord group for pertinent information

### HIGH SCHOOL

#### Only initial if you have a highschooler

- \_\_\_\_\_ **We/I understand that for a graduating student I am required to turn in the Senior Package/Fees by November 30<sup>th</sup>.**
- \_\_\_\_\_ We/I understand the process to unenroll our child for the GED as per the handbook
- \_\_\_\_\_ We/I have read the information on the 3 offered diplomas and know what is required for each one.
- \_\_\_\_\_ We know a student must have ACT testing to apply to colleges and will apply for Testing through the ACT testing website.
- \_\_\_\_\_ We/I know certain subjects must be completed for the Academic and College Prep Diplomas and take full responsibility in having my child complete them.

\_\_\_\_\_  
Parent(s)Signature

\_\_\_\_\_  
Parent(s) Print Name Legibly

\_\_\_\_\_  
Date

**\*\*If both parents do not sign, please provide proof of sole custody and/or legal right to make educational decisions.**

# DAYSPRING ACADEMY REQUEST FOR SCHOOL RECORDS

Name of School Attended:

---

School Address:

---

City: \_\_\_\_\_ Zip: \_\_\_\_\_ County: \_\_\_\_\_

Please send all school records for the following student(s) currently enrolled in DaySpring Academy. We need all cumulative records, testing, immunization cards, and any other pertinent information so that we can assess student ability and grade placement. Please include any other information that will verify subject content and proof of educational goals being met for grades given.

**FULL NAME**

**Grade**

_____	_____
_____	_____
_____	_____
_____	_____

\_\_\_\_\_  
Administrator Signature

\_\_\_\_\_  
Date

Please send records to:

**DaySpring Academy**  
**1302 Madison Park Dr, Madison, AL 35758**  
**Email: Dayspringacademy1996@gmail.com**

We do hereby authorize DaySpring Academy to receive all school records on the students listed above. We hold both schools blameless for any problems that may arise from the transaction of this request.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date