



EXCELLENCE CHRISTIAN SCHOOL

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Upper Marlboro, Maryland 20772
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www.excellencechristianschool.org
Principal, Roberta Epps



Dear ECS Parents:

We are so excited about what God has done and continues to do at Excellence Christian School. We thank Him for His blessings and guidance as we make plans for another year. At the 1st semester mark of our 8th year, we reflect upon the many milestones that He has bestowed upon ECS (closer relationship with Him, academic success, Middle States Candidacy for Accreditation, contest placements, sports pursuits, etc). We thank God for our awesome staff and for their commitment to seeing your child excel and blossom into all that God desires them to be. As we approach our 9th school year, we are excited to announce that we will be expanding our high school level to include the 11th grade.

As we move forward and continue to offer new and exciting program for our students, we ask that you continue to keep us in your prayers as we seek God's direction and guidance. Enclosed you will find the registration packet for 2010-2011 school year. The registration period is on a first-come, first-served basis. Please note that **ALL** forms must be completed in its entirety, whether or not there has been any change. **ALL** annual fees must accompany the registration packet and be submitted to the School Office in order to reserve a space for your child. Spaces cannot be held.

Please inform your relatives, co-workers and friends to contact us to schedule a tour or to inquire about our Open House dates. Once again, we thank you and look forward to working with you and your child in the 2010-2011 school year. If you have any questions, please do not hesitate to contact me at (301) 868-1873.

Yours in Christ,

Roberta Epps, Interim Principal

Excellence Christian School

Tuition & Fee Schedule

2010-2011 School Year

***Annual Fees (All Fees Non-Refundable)**

Registration Fee (non-refundable)**

Returning Students: \$175.00

New Students: \$225.00

Activity Fee (Field Trips, Technology Fee, Special Activities) (non-refundable)**

All Students: \$300

Instructional Fee (Book rental, Classroom materials) (non-refundable)**

All Students:

K4-K5 - \$200.00

1st-2nd Grades - \$250.00

3rd-4th Grades - \$285.00

5th-8th Grades - \$300.00

9th-11th Grades - \$350.00

***NOTE:** All above fees are due upon re-registration for all returning students. For all new students, the Registration Fee is due upon enrollment and the Activity/Instructional Fees are due upon notification of acceptance.

****IN THE EVENT OF SUSPENSION, DISMISSAL OR VOLUNTARY WITHDRAWAL OF A STUDENT AFTER ENROLLMENT, NO REFUND WILL BE MADE OF REGISTRATION FEES, ACTIVITY FEES, INSTRUCTIONAL FEES, TUITION, AFTER-CARE FEES, ATHLETIC FEES OR ANY OTHER FEES PAID TO EXCELLENCE CHRISTIAN SCHOOL.**

Note: K4 students must turn 4 by October 1 and K5 students must turn 5 by October 1.

Tuition (includes breakfast and lunch)

	<u>Yearly</u>	<u>10-Month</u> (Aug-May)	<u>11-month</u> (July-May)	<u>12-month</u> (June-May)
Returning Students (K5-11 th)	\$7500	\$750.00	\$681.81	\$625.00
New Students (K4-11 th)	\$8000	\$800.00	\$727.27	\$666.66

After-Care

	<u>Yearly</u>	<u>10-Month</u> (Aug-May)	<u>11-month</u> (July-May)	<u>12-month</u> (June-May)
All Students	\$2000	\$200.00	\$181.81	\$166.66

*All monthly tuition payments are processed through FACTS Tuition Management Company. An annual processing fee is required.

Pre-payment Discount: Parents paying tuition in full by August 1 receive a \$100 discount per child.

Multiple Family Discount: Families with 2 or more children receive the following:
-First child pays the full tuition amount; 2nd child – 10% discount; 3rd child – 15% discount; 4th child or more– 20% discount

Hours of Operation:

Breakfast Hours: 7:00 a.m. – 7:50 a.m. Students may begin arriving at 7:00 a.m.

School Hours: 8:00 a.m. – 3:15 p.m.

After Care Hours: 3:30 p.m. – 6:00 p.m.

“Soaring For Excellence Through Grace and Knowledge”

Excellence Christian School Parent Contractual Agreement

This agreement is made between (parent name) _____,
parent of (student name) _____ and Excellence Christian School
(ECS) for the 2010-2011 school year. I/we request that the above named student be enrolled at
Excellence Christian School for the 2010-2011 school year.

The following agreement sets forth the guidelines that will be administered at ECS.

I. School Mission

To assist parents with their child's pursuit of academic excellence while cultivating a biblical perspective that will intrinsically motivate them to make positive contributions to society.

II. Hours of Operation

Breakfast Hours: 7:00 am until 7:50 am
School Hours: 8:00 am until 3:15 pm
After Care Hours: 3:30 pm until 6:00 pm

III. Dress Code

All students are required to wear the appropriate school uniform (Dress or P.E.) everyday, as described on the Uniform Requirements Sheet, except on the designated days as announced. If students fail to wear the required uniforms, parents will be contacted to bring in their child's uniform or pick him/her up from school.

IV. Inclement Weather/Holiday Policy

In the event of inclement weather, delayed openings or early dismissal, please see the Parent-Student Handbook for further details. In the event ECS closes early, after-care will not be offered. ECS will be closed for most Federal Government holidays.

V. Tardiness/Absences

Students arriving after 8:15 will be marked tardy. Parents should contact the school office no later than 8:30 am if the student will be absent. In the case of an absence, the parent must write a dated note to the teacher with an explanation for the absence and the note must be sent on the day the student returns to school. Excused absences will be permitted for student illness, doctor's appointment or death in the immediate family. Excessive unexcused absences may result in dismissal from school.

VI. School Conferences

ECS will hold three parent-teacher conferences throughout the school year, one at the end of each quarter. However, if parents would like to request additional conferences, parents must contact the school office. All conferences outside of the scheduled parent-teacher conferences are by appointment only.

VII. Book Policy

Parents are responsible for ensuring student books are kept in good condition. In the event a book is lost or damaged, parents will need to purchase an additional book from the school.

VIII. Homework

Students are required to complete and return homework assignments on time. Failure to complete homework will affect the student's daily grade and repeated delinquent assignments could result in suspension of the student.

IX. Discipline

To promote a positive school climate for students and staff at ECS, we have a uniform, school-wide assertive discipline program. The purpose of the program is to teach children to make appropriate choices, accept responsibility for their behavior, and understand their behavior has consequences for themselves and others. Our overall goal is to promote Christian character in the daily lives of our students.

The ECS staff believes that appropriate behavior is promoted through positive reinforcement. Negative reinforcement is a temporary solution to most problems. Only positive reinforcement will bring about a permanent change in student behavior. Therefore, we have established rules for the school, and these will be taught to all students.

Students will be expected to:

- Be respectful of the rights, safety, and property of others.
- Be courteous and cooperative with all students and adults.
- Be safe in all school areas.
- Be on time and ready to learn.
- Be responsible with your words and actions.

Please refer to the ECS School-Wide Discipline Plan for specific infractions and corresponding disciplinary actions

X. Student Information Disclosure

Upon enrollment, parents are required to disclose any background information regarding the student's medical history, school records, etc. that would prevent ECS from being able to appropriately meet the needs of its students. If at any time ECS becomes aware of such information and the parent has failed to disclose this information upon enrollment, this may result in dismissal of the student.

XI. Illness

If a student is experiencing feverish symptoms, upset stomach, severe coughing, constant sneezing or runny nose, the student should not report to school. Medication will not be administered by the school, unless a Medical Administration Authorization Form is on file for the student.

XII. Medical Forms/School Records

All students are required to have a physical examination every year and up-to-date immunization records on file.

XIII. Financial Policies

All payments (except pre-payments) are processed through FACTS, an automated direct debit service. An annual processing fee is required. There will be a \$25.00 for all returned payments. If a tuition account becomes delinquent and is not paid within 5 business days of the due date, the student will not be able to attend class until the account is up to date. School records will not be released for any student with an unpaid tuition balance. Students who attend one or more school days in a month will owe the full month tuition.

I/we plan to use the following payment plan – Please check one:

_____ Pre-payment: Full payment of all tuition and fees at the time of enrollment. A special prepayment discount of \$100 per child will be given if full tuition is paid by August 2, 2010.

_____ Monthly Payment Plan: (Please check: _____10-month; _____11-month; _____12-month)
All monthly payments are processed through FACTS Tuition Management Company. An annual processing fee is required. All monthly payments end May 2011.

It is understood that in the event of absence, suspension, dismissal or voluntary withdrawal of a student after enrollment, no refund will be made of tuition, book fees, activity fees, extended care fees or other fees paid to Excellence Christian School. I/we, the signer(s) of this contract, assume responsibility for the payment of all charges and agree to the rules and regulations of Excellence Christian School.

Excellence Christian School reserves the right to deny continued enrollment to a student whose yearly grades, conduct, attendance or payment practices do not satisfy school requirements.

I understand that should my marital status change, it is my responsibility to have a corrected Enrollment Contract signed, updated and delivered to Excellence Christian School.

This agreement is binding upon the parties hereto named and their respective heirs, personal representatives, successors and assigns. The parties hereto named agree that proper venue for any litigation concerning this contract shall be in Prince George's County, Maryland. Should legal action, for any reason, be taken against Excellence Christian School or any employee or agent thereof, on your child's behalf and the school or its agent not be found at fault, the parent/guardian will be responsible for paying any attorney fees, court fees, damages, or other costs that Excellence Christian School or its agent should incur to defend itself against such action.

By signing below, I agree to the terms and conditions set forth in the above contractual agreement.

(Parent's Printed Name)

(Parent's Signature)

(Date)

(Date)

EXCELLENCE CHRISTIAN SCHOOL

EMERGENCY/PICK-UP AUTHORIZATION FORM

List person(s) who can be contacted to pick up your child in an emergency/authorized to pick up your child from school. Please inform these individuals that they will be asked to show ID. **DO NOT LIST ANY ONE UNDER THE AGE OF 18. THE SCHOOL WILL NOT RELEASE STUDENTS TO MINORS.** In the event that the person picking up your child is late, you will be responsible for the late fee.

The person(s) below have my permission to pick-up _____.
CHILD'S NAME

PARENT SIGNATURE

DATE

***PHONE NUMBERS ARE REQUIRED!**

1.	_____	_____	_____
	Name	Relationship to Child	Address
	_____	_____	_____
	Phone (H)	Phone (W)	Phone (C)
2.	_____	_____	_____
	Name	Relationship to Child	Address
	_____	_____	_____
	Phone (H)	Phone (W)	Phone (C)
3.	_____	_____	_____
	Name	Relationship to Child	Address
	_____	_____	_____
	Phone (H)	Phone (W)	Phone (C)
4.	_____	_____	_____
	Name	Relationship to Child	Address
	_____	_____	_____
	Phone (H)	Phone (W)	Phone (C)
5.	_____	_____	_____
	Name	Relationship to Child	Address
	_____	_____	_____
	Phone (H)	Phone (W)	Phone (C)

Please list any additional persons on the back of this form or attach an additional sheet.

Excellence Christian School

School Trip/Recreational & Sport Activity Release

I give permission for my child, whose name is listed below, to take part in all activities including recreational activities, bus trips, and sports activities on the premises of Excellence Christian School and sponsored trips away from the school premises. In addition, I understand that Excellence Christian School will take all necessary precautions to ensure the safety of my child, so in consideration of the opportunity for my child to participate, and fully recognizing that such an undertaking involves an element of risk, I assume all risks and hazards incidental to such participation, and do hereby release, absolve, indemnify, and agree to hold harmless Cornerstone Peaceful Bible Baptist Church of Upper Marlboro, MD, its Pastors, Excellence Christian School employees, officers, chaperones, leaders, organizers and sponsors. Neither Excellence Christian School, nor any of said parties above shall be held financially responsible for any injury, illness, or death incurred as a direct or indirect result of this activity.

Child's Name: _____

I have read this release, understand all its terms, and execute it voluntarily and with full knowledge of its significance. In the event of an emergency, if I cannot be contacted, I hereby authorize that emergency treatment may be administered.

PARENT/GUARDIAN
SIGNATURE _____

DATE: _____

EXCELLENCE CHRISTIAN SCHOOL

Please complete separate enrollment forms for each child.

1. STUDENT DATA

Student Name: Last _____ First _____ M.I. _____ Sex: _____

Birth Date: _____ Birth Place: _____

Student's Social Security Number: _____

Home Phone: _____

Home Street Address: _____
City _____ State _____ Zip Code _____

Expected Grade Level: _____ Expected Start Date: _____

Name(s) of sibling(s): _____ Age: _____

Name(s) of sibling(s): _____ Age: _____

2. FAMILY DATA:

Father/Guardian Name: _____ Mother/Guardian Name: _____

Father's Home Address (if different from student) _____
Mother's Home Address (if different from student) _____

Name and Address of Employer: _____
Name and Address of Employer: _____

Daytime Email Address: _____
Daytime Email Address: _____

Work Telephone: () _____
Work Telephone: () _____

Cellular Phone: () _____
Cellular Phone: () _____

Student lives with (check all that apply):
 Father Mother Guardian Stepmother Stepfather Other Specify: _____

3. EMERGENCY INFORMATION :

Does the school have your permission to transport your child to a nearby hospital for emergency purposes?

Yes or No If yes, please provide signature _____ date _____

EXCELLENCE CHRISTIAN SCHOOL
Extended Care Program Agreement For ECS Students

I agree to enroll my child, _____ in the Extended Care Program at Excellence Christian School (ECS).

I understand that upon enrollment into the ECS Extended Care Program, my child shall be enrolled for the entire 2010-2011 ECS school year, although ECS may accept payment on a monthly basis. The ECS Extended Care Program will begin August 2010 and will end June 2011 (specific dates TBD). In the event ECS closes early due to inclement weather, etc. the After Care Program will not be offered. In the event that a parent requests withdrawal of a student from the ECS Extended Care Program, a two-week written notice must be submitted to the Principal or Administrator. In the event of withdrawal, the parent(s) will still be responsible for the extended care fee for the remainder of the month. In the event ECS is closed for holidays, winter breaks, spring breaks, or if a student attends the ECS Extended Care Program one or more school days in a month, is absent for any length of time, or the student is picked up anytime before the extended care program ends, the parent(s) will still be responsible for the full month extended care fee.

****PLEASE READ THE FOLLOWING: The parent(s) will be responsible for paying all late fees for any student remaining after 6:00 p.m. In the event a student is picked up past 6:00 p.m. more than three (3) times during the school year, the parent will be assessed a late charge of \$25 per occurrence after the third time. Excessive late pick-ups or non-payment of late pick-up fees may be grounds for disenrollment from the ECS Extended Care Program.**

I further agree to hold the school and its agents harmless for any liability to my child(ren) or any guardian or parent thereof because of any claims on behalf of my child(ren) against the school, Cornerstone Peaceful Bible Baptist Church or any agent thereof because of any injury or alleged injury to myself or other guardians.

AFTER-CARE PAYMENTS: All monthly payments **must be made through the FACTS Automatic Payment Program.** After-Care payments must be included with the tuition payments if tuition will be paid monthly. All payments must be designated for direct debit on either the 5th or 20th of each month, according to the selected plan. Parents also have the option to pay the After-Care Fee in full by August 2, 2010. Please refer to the Parent/Student Handbook for additional tuition information. There will be a \$25.00 fee for all returned payments. After the second returned payment, fees must be paid by cash or money order. If fees are not paid within 5 days of the due date, the student will not be allowed to participate in the extended care program until the account is up to date.

Extended Care Fees

After Care Fee: \$2000 for the entire school year (Monthly payments also available)

Late Fee: \$5.00 for every 15 minutes late

(Late fees begin accruing at 6:01 pm according to the school clock. All late fees must be paid upon pick-up or the next school day.)

By signing below, I agree to the terms and conditions set forth above.

(Parent's Printed Name)

(Parent's Signature)

(Date)

OFFICE USE ONLY
Date Added _____/_____/_____
Grade _____
Room No. _____

**ECS EXTENDED CARE
ENROLLMENT FORM**

Date _____/_____/_____
School Year _____

Student's Name _____
Last
First
Middle

Address _____ Phone: _____
Street
City
State
Zip

Father's Name _____ Work Phone _____ Cell Phone: _____

Mother's Name _____ Work Phone _____ Cell Phone: _____

Guardian's Name _____ Work Phone _____ Cell Phone: _____

EMERGENCY INFORMATION

Adult to contact if Parent(s) cannot be reached

Child's Physician

(1) Name _____
 Relationship _____
 Phone _____

Name _____
 Phone _____
 Address _____

(2) Name _____
 Relationship _____
 Phone _____

Please sign below if we have permission to transport your child to a nearby hospital for emergency purposes

Parent/Guardian Signature _____ Date: _____