

Christian Institute of Arts & Sciences

2007 North 61st Avenue Pensacola, FL 32506 www.christianinstitute.com Phone: (850) 457-4058 Fax: (850) 458-5132 nogratriov@christianinstitute.com

UMBRELLA/HYBRID SCHOOL STUDENT ENROLLMENT FORM School Year 2025-2026

Today's Date	_			
STUDENT'S INFORMAT	ION			
Student's Full Name First	Middle	Last	NickName	
Date of Birth/	Gender: Mal	le 🖵 Female 🖵		
School District ID#	(if student ha	as one)		
Student's Cell ()	Student's Er	nail Address	<u>a</u>	·
Entering Grade:	Name of last school	·		
School Address:		City:	State:	Zip:
School's Email Address		·		
American Indian/Alaska Native Medication: Is the student currently taking ar			~~~~~~~~~~	~~~~~~~~~
If yes, please specify:	* -			
Immunization Records: Does the school office have an u Certificate 681 on file? Ye	es No No		Ç	•
Special Education/ESE Record		~~~~~~~~~~~~~~~~~~	~~~~~~~~~~~~	~~~~~~~~~
Does the student have up-to-date	ESE Paperwork fro	om the last school year	ar? Yes 🗖 N	No 🗖
Active IEP Specify date:				
Active 504 Specify date:				

FDLRS/ESE Testing/Evaluation \Box Specify d	ate:		
Neuro-psychological evaluation Specify d	late: Name of the psyc	chologist:	
Does the student have any diagnosis that affects their school/academic/social life? (Specify)			
Scholarship Information: Has the student been awarded a Step Up For St			~~~~~
If, yes, which one?			
FES-UA PEP Hybrid P			
PEP *Note: PEP students are not allowe	ed to be enrolled in CIAS as an Um	brella School	
A			
Award ID			
PARENT/GUARDIAN'S INFORMAT		~~~~~~~	~~~~~~~
Mother's Name:	Father's Name:		
Guardian's Name:			
Mother's Cell # ()	Father's Cell # ()		
Guardian's Cell # ()	Home Phone # ()		
Parent/Guardian's Email Address #1	<u></u>		
Parent/Guardian's Email Address #2			
Marital status: (check one) Married Si	ingle Divorced Widow	wed \square	
If divorced/remarried:			
Step-Mother's Name	Step-Father's Name:		
Step-Mother's Cell # ()	Step-Father's Cell # () _		
Primary Residence Address:	City:	State:	Zip:
Secondary Residence Address:			
List all other children/people who live in the cl			·
	-		
Mother's Occupation/Job:	Place of Employme	ent:	

ather's Occupation/Job: Place of Employment:			
Guardian's Occupation/Job: Place of Employment:			
Mother's Life Skills:			
Father's Life Skills: (talents, hobbies, interests, abilities) (talents, hobbies, interests, abilities)			
Guardian's Life Skills:			
(talents, hobbies, interests, abilities) List family hobbies, businesses, etc.			
	ol full-time at the CIAS Campus School? Yes \square No \square		
Are you interested in your child attending classe	es/lab at the CIAS Campus School? Yes \(\begin{align*} \text{No} \\ \emptyset \\ \text{No} \\ \e		
Are you interested in homeschooling your child	under the CIAS Umbrella School? Yes 🗖 No 🗖		
If yes, give the name of the person who will be	primarily responsible for the homeschool program:		
F	Relationship to student:		
	n of adoption and/or altered birth certificate.		
Briefly state your reason for enrolling your child	d in CIAS:		
How did you learn/hear about CIAS?			
Parent's Name Printed:			
Parent's Signature:			
Date:			



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2025-2026 PERMISSION SLIP

We/I,	and	, the
We/I,	cudent(s):	
Do hereby release Christian Institute of CIAS (including, but not limited to, the of loss, damage, or injury of any nature science labs, tutoring lessons, assessme days. We/I also agree that CIAS shall n school personnel or staff member, as w commencing August 1, 2025, and ending	Arts and Sciences, Inc. from any ar Board, administration, teaching sta to person or property resulting from nt/testing days, field trips, road trips of be liable for any loss or unintential as other students enrolled in CIA	ff, office staff, etc.) from any claim in the schooling program, classes, is, learning activities, or activity/fun onal neglect or careless acts of any
Furthermore, we/I authorize <u>only</u> the follow *Place a checkmark by emergency contact		• • • •
1	Phone# ()
2	Phone# ()
3	Phone# ()
4)
5)
6)
Signed	and	
Date		
Received by School Officer	Date	



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SCHOLARSHIP SIGNATURE VERIFICATION FORM School Year 2025-2026

Student's Full Name: _					
	First	Mid	ldle	Last	
Type of Scholarship:	FTC 🗖	FES-EO 🗖	FES-UA 🗖	PEP HYBRID 🖵	PEP/FTC □
Student's Full Name: _					
	First	Mid	ldle	Last	
Type of Scholarship:	FTC 🗖	FES-EO 🗖	FES-UA 🗖	PEP HYBRID 🖵	PEP/FTC
Student's Full Name: _					
	First	Mid	ldle	Last	
Type of Scholarship:	FTC \Box	FES-EO 🗖	FES-UA 🗖	PEP HYBRID 🖵	PEP/FTC
Student's Full Name:					
	First	Mid	ldle	Last	
Type of Scholarship:	FTC 🗖	FES-EO 🗖	FES-UA 🗖	PEP HYBRID 🖵	PEP/FTC
Student's Full Name: _					
	First	Mid	ldle	Last	
Type of Scholarship:	FTC 🗖	FES-EO □	FES-UA 🗖	PEP HYBRID 🗖	PEP/FTC 🗖
Parent Name (Print): _				Date:	
Parent Name (Signature	e):			Date:	

Names of SUFS scholarships:

- Florida Tax Credit Scholarship (FTC)
- Family Empowerment Scholarship for Educational Options (FES-EO)
- Family Empowerment Scholarship for Unusual Abilities (FES-UA)
- Personalized Education Program (PEP) Hybrid
- Personalized Education Program (PEP) through the Florida Tax Credit Scholarship (does not apply to private school students)
- New Worlds Scholarship (does not apply to private school students)
- Transportation Stipend (does not apply to private school students)



EMERGENCY INFORMATION AND MEDICAL RELEASE

Child's Name:	Date of Birth:		
I/we authorize the two persons listed belo becomes ill at school, I understand that ev these emergency contacts (please list two	very effort will be made to contact me	3	
Authorized Person #1:	Pho	ne:	
Address:			
Relationship to child:			
Authorized Person #2:	Phon	e:	
Address:			
Relationship to child:			
In the event of a medical emergency, I/we to have my child transported to the clos attending physician while efforts are mad	e authorize the staff at Christian Instituest hospital and receive any treatmen	ute of Arts and Sciences (CIAS)	
Preferred Hospital:	Phone:		
Medical Information:			
Child's Physician:	Phone	e:	
Child's Dentist:	Phone:		
Known medical problems/conditions/illne	esses:		
Allergies:			
Child is covered by private medical insur-	ance program: Yes No		
Insurance Company:	Certificate Number/Gr	oup Number:	
Name of Insured:	Employer:		
I understand that I will be fully responsib transportation of my child.	le for all expenses resulting from the	emergency treatment and /or	
Parent/Guardian Signature	Phone*	Date	
Parent/Guardian Signature	Phone*	Date	

^{*}Please list phone number(s) where you can be reached in the event of an emergency.



MEDICATION CONSENT FORM

Child's Name:	Date of	Date of Birth:		
Check All the Over-the-Counter (C Child at School as Needed:	OTC) Medication/Items That You W	Vill Allow to be Dispensed to Your		
☐ Tylenol/Acetaminophen				
☐ Motrin/Ibuprofen				
☐ Allergy/Benadryl/Diphenhydra	mine			
☐ Allergy/Claritin w/Loratadine				
☐ Headache Relief/Acetaminophe	en w/Aspirin & Caffeine			
☐ Tums/Antacid	···· ··· ··· ··· ··· ··· ··· ··· ··· ·			
☐ Pepto Bismol (tummy)				
☐ Bug Bites/Itches/Allergy Crean	ı or Spray			
☐ Halls Cough drops				
☐ Midol (for periods/acetaminoph	nen/caffeine/pyrilamine maleate)			
☐ Bactine Max Spray (pain reliev				
	ceed label directions):			
Dates to be Given: Start Date	Finish Date			
Special Instructions (i.e. to be taken v	with food, etc.):			
Prescription Medication That Your	· Child Takes at Home:			
· 1	nsible for providing all of my child's office. I hereby authorize CIAS staff quired/requested.			
Parent/Guardian Signature	Cell Phone #	Date		

This information is confidential and may not be shared or released without the parent's written permission.



Received by School Officer ___

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PARENT/TEACHER'S AGREEMENT

For CIAS Umbrella/Hybrid School Students

We (I)	, the parent(s) or guardian(s) of the following student(s),
	······
	value my child's education and experience as a student at Christian Institute of Arts and Sciences, Inc Therefore, I promise to uphold the
	s of CIAS, namely:
1.	I have read the CIAS School Handbook & the CIAS Campus School Handbook.
2.	I have read the "CIAS Student Conduct Code" pertaining to my child's grade level and am aware of the expected behavior; I understan that if my child fails to follow the CIAS Student Conduct Code, there will be disciplinary consequences.
3.	I will support the CIAS education model, an individualized homeschool model.
4.	I will respect the school's safe and quiet environment, focusing on faith and family.
5.	I appreciate CIAS' Christian worldview and support the school's whole-person approach to education, addressing their physical, spiritua academic, and psychological needs.
6.	I will have all Enrollment/Re-enrollment and medical records (Birth Certificate, School Entry Health Exam, Immunization certificate, etc up to date and turned in to the school office within one week (5 days) of the beginning day of each school year.
7.	I will provide the school with pertinent and up-to-date information concerning my child, i.e. adoption papers, custodial papers, etc.
8.	I will ensure that my child attends the required 180 days of school per year and/or completes the specified curriculum.
9.	I will cooperate with attendance policies and ensure that my child completes the required number of hours per grade level per day.
10.	I will provide needed school supplies and materials for my child.
11.	I will supply any needed records of each student's daily attendance and schoolwork grades.
12.	I will supervise my child to complete any/all homework assigned by CIAS teachers, tutors, or administration.
13.	I will make all payments to the school on time, as it is invoiced by email and in agreement with the school administration.
14.	My child will complete diagnostic and placement assessments as needed
15.	My child will receive annual achievement testing from the CIAS administration or a school-approved testing agent yearly.
16.	I will meet with the CIAS administration as needed and participate in academic planning sessions that are scheduled by the CIA
17	administration.
17.	I will attend any Intervention Meetings my child's teacher and/or CIAS Administration deem necessary to discuss chronic misbehavior
18.	issues. I will acknowledge CIAS administration's expertise and suggestions for academic planning according to my child's academic need learning disabilities dis
10	learning disabilities/diagnosis, learning style/intelligences, etc. My child will attend summer school as needed and/or recommended by CIAS teachers and/or administration.
19. 20.	I will inform the school administration immediately if my child breaks the law, runs away, or is apprehended/arrested by law enforcement
20.	authorities.
For hi	th school students:
21. N	y student will follow the state of Florida's and CIAS' course requirements to receive high school credits.
	will provide documented records of electives and extracurricular activities; i.e. physical fitness, community service, and performing fine are
(t	neatre, drama, music lessons, choir, etc.) for my child to receive credit.
W ₂ (I)	further agree that if we (I) wish to withdraw my student(s) from CIAS, we (I) agree to:
we (1)	A. Immediately contact the school and inform the administrator of intent to withdraw.
	B. Turn in or mail all remaining forms and information on our student(s) to the school office within ten days.
	C. Fulfill all policies and requirements regarding dismissal or withdrawal from the school.
	e. I amm an ponetto ana requiremento regarante anomatori minima ano occident
	understand that failure to comply with these agreements/policies is cause for suspension or dismissal of student(s). School records will the
be star	nped incomplete.
W ₂ (I)	release the Christian Institute of Arts & Sciences Inc. from any and all recognitibity and absolve them from any alaim of loss demands
injury	release the Christian Institute of Arts & Sciences, Inc. from any and all responsibility and absolve them from any claim of loss, damage, of any nature to person or property resulting from the schooling program. We (I) also agree that the school shall not be liable for any loss of attional neglect or careless acts of any school personnel or other students enrolled in CIAS.
C;	Data
Signe	A Date *Form must be signed by a parent/guardian*

Date __



UMBRELLA/HYBRID STUDENT CONDUCT CODE GRADES K-2

All students who attend the CIAS Campus School should live like Jesus wants them to live and represent Him to others. Even though we live in this world, we are not to participate in behavior that does not please the Lord because He loves us, and we love Him and want to obey Him in all things. This obedience affects our beliefs, appearance, conversation, entertainment, music, and pastimes.

Schoolwork:

- 1. I will complete the schoolwork that is assigned to me by my teacher.
- 2. I will complete the homework that I am assigned to do by my teacher.

Student Conduct:

- 3. I will follow the "CIAS Student Conduct Code" and make good choices for my behavior.
- I will be kind to others.
- 5. I will respect and obey my teacher and all school staff.
- 6. I will follow the clothing rules of the CIAS Dress Code
- 7. I will obey the school rules
- 8. I will not encourage my fellow classmates to break school rules
- 9. I will be quiet during school hours and use my inside voice when permitted to talk.
- 10. I will be respectful of my classmates' personal spaces.
- 11. I will not leave my assigned seat and wander around without permission.
- 12. I will not say bad words or use bad language; I will not misuse the Lord's name (ex: Oh, my God!).
- 13. I will not pester my classmates.
- 14. I will not tease, make fun of, or belittle my classmates.
- 15. I will not tease a person about how God made them.
- 16. I will not be mean to my classmates.
- 17. I will not say hurtful words about anyone.
- 18. I will not gossip about teachers or other students, talking about them behind their backs.
- 19. I will not write and pass unkind or mean notes, nor ask other classmates to pass notes.
- 20. I will not touch my classmates inappropriately or rough house (ex: hitting, slapping)
- 21. I will not fight with other students.
- 22. I will not hit, touch, or harm another person with the intent of hurting them.
- 23. I will not show anyone my private parts.
- 24. I will be truthful and honest; I will not lie. I will not cheat on tests.
- 25. I will not steal snacks or drinks.
- 26. Male students: I will not get my ears pierced or wear earrings to school during the school year.
- 27. Male Students: I will get my hair cut if it gets too long and breaks the Student Grooming Code

School Property:

- 28. I will not touch anything on the teachers' desks or open drawers in the desk without the teacher's permission.
- 29. I will not damage school property (tables, chairs, shelves, etc.)
- 30. I will not throw objects across the room or at the ceiling.
- 31. I will not write on desks, walls, reading or reference books, posters, etc.

I have read and understand the above CIAS Student Conduct Code and solemnly promise, with the Lord's help, to abide by the life guidelines stated. I also acknowledge that failure to keep the above Student Conduct Code will result in disciplinary measures and can/will terminate my enrollment at CIAS.

Signed		Printed	Date:
	Student's Name		
Signed	Parent's Name	Printed	Date:
Signed	Teacher's Name	Printed	Date:



UMBRELLA/HYBRID STUDENT CONDUCT CODE GRADES 3-5

All students who attend the CIAS Campus School should live like Jesus wants them to live and represent Him to others. Even though we live in this world, we are not to participate in behavior that does not please the Lord because He loves us, and we love Him and want to obey Him in all things. This obedience affects our beliefs, appearance, conversation, entertainment, music, and pastimes.

Schoolwork:

- 1. I will complete the schoolwork that is assigned to me by my teacher.
- 2. I will complete the homework that I am assigned to do by my teacher.

Student Conduct:

- 3. I will follow the "CIAS Student Conduct Code" and make good choices for my behavior.
- 4. I will be kind to others
- 5. I will respect and obey my teacher and all school staff.
- 6. I will follow the clothing rules of the CIAS Dress Code
- 7. I will obey the school rules
- 8. I will not encourage my fellow classmates to break school rules
- 9. I will be quiet during school hours and use my inside voice when permitted to talk.
- 10. I will be respectful of my classmates' personal spaces.
- 11. I will not wander around without permission.
- 12. I will not say bad words or use bad language; I will not misuse the Lord's name (ex: Oh, my God!).
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- 22. I will not hit, touch, or harm another person with the intent of hurting them.
- 23. I will not show anyone my private parts.
- 24. I will be truthful and honest; I will not lie. I will not cheat on tests.
- 25. I will not steal snacks or drinks.
- 26. Male students: I will not get my ears pierced or wear earrings to school during the school year.
- 27. Male Students: I will get my hair cut if it gets too long and breaks the Student Grooming Code

School Property:

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- 31. I will not write on desks, walls, reading or reference books, posters, etc.

I have read and understand the above CIAS Student Conduct Code and solemnly promise, with the Lord's help, to abide by the life guidelines stated. I also acknowledge that failure to keep the above Student Conduct Code will result in disciplinary measures and can/will terminate my enrollment at CIAS.

Signed		Printed	Date:
	Student's Name		
Signed		Printed	Date:
	Parent's Name		
Signed		Printed	Date:
_	Teacher's Name		

Please read, sign, and return to the CIAS office within 5 days of enrollment in the Campus School. Thank you!



UMBRELLA/HYBRID STUDENT CONDUCT CODE GRADES 6-8

All students who attend the CIAS Campus School should live like Jesus wants them to live and represent Him to others. Even though we live in this world, we are not to participate in behavior that does not please the Lord because He loves us, and we love Him and want to obey Him in all things. This obedience affects our beliefs, appearance, conversation, entertainment, and pastimes.

Schoolwork:

- 1. I will complete the schoolwork that is assigned to me by my teacher in my Lesson Plan Book (LPB).
- 2. I will complete the homework that I am assigned to do by my teacher.

Student Conduct & Behavior:

- 3. I will value my enrollment in CIAS as a privilege and will work hard to the best of my abilities to be a successful CIAS student.
- 4. I will follow this "CIAS Student Conduct Code" that I have read and signed and will make good and wise choices for my behavior.
- 5. I will cooperate with the CIAS education model, an individualized homeschool model, and understand that I may be doing different schoolwork from my classmates
- 6. I will respect the school's safe and quiet environment, focusing on faith and family.
- 7. I appreciate my school's Christian worldview and will attend Tuesday Outdoor Chapel and participate in daily BibleTime! and Bible Memory in my homeroom classroom.
- 8. I respect CIAS' whole-person approach to my education, addressing my physical, spiritual, academic, and mental health needs.
- 9. I will cooperate with behavior modification and redirection by teachers and staff.
- 10. I will respect and obey my teacher and be respectful of all other school staff (administration, office, teachers).
- 11. I will work hard to be kind to and respectful of my classmates.
- 12. I will obey the school rules.
- 13. I will obey the CIAS Dress Code.
- 14. I will not be a rebel; this would include refraining from insolence, disrespect, passive disobedience, outright disobedience, and disregard to school rules or instructions of school teachers and/or administration.
- 15. I will not encourage or facilitate other CIAS students to be disobedient to parents, school rules, or the Student Conduct Code.
- 16. I will be quiet during school hours and use my inside voice when in conversation with my teachers.
- 17. I will not disturb others and wander around without permission during school time.
- 18. I will not use bad language or misuse the Lord's name. I will not cuss or swear at school.
- 19. I will not tease to make fun of or hurt another person; I will not tease a person about unchangeable features.
- 20. I will not be mean or say unkind comments about anyone.
- 21. I will not gossip about teachers or other students, stirring up trouble among other CIAS students.
- 22. I will not indulge in inappropriate touching or roughhousing, however innocent my intentions.
- 23. I will not fight with other students; I will not hit another person intending to hurt them.
- 24. I will not be dishonest; I will not lie, cheat on tests, or steal from anyone.
- 25. I will not steal snacks or drinks from the school.
- 26. I will not write and pass unkind, inappropriate, or suggestive notes, nor ask other students to pass notes.
- 27. I will not behave suggestively or show anyone my private parts.
- 28. I will not engage in public displays of affection (PDA) with my boyfriend/girlfriend while on campus.
- 29. I will not engage in sexual activity, immorality, or sexual experimentation on or off campus.
- 30. I will not look at pornography in any form (cell phone, internet, magazines, movies, etc.) while on campus.
- 31. I will not listen to ungodly and inappropriate music or watch indecent movies while on campus.
- 32. I will not participate in séances, dabble in witchcraft or the occult, nor indulge in either satanic or Goth lifestyle.
- 33. I will not vape, smoke cigarettes or pot, nor use alcohol, tobacco, or drugs on or off campus.
- 34. I will not break the law, get arrested, get reported to the police/CPS, or run away.
- 35. I will not get new body piercings or tattoos during the school year.
- 36. Male students: I will not wear earrings during the school year.
- 37. Male Students: I will get my hair cut if it gets too long and breaks the Student Grooming Code

School Property:

- 38. I will not disturb anything on the teachers' desks or open drawers in the desk without the teacher's permission.
- 39. I will not damage school property (tables, chairs, shelves, etc.)
- 40. I will not throw objects across the room or at the ceiling.
- 41. I will not write on desks, walls, reading or reference books, posters, etc.

I have read and understand the above CIAS Student Conduct Code and solemnly promise, with the Lord's help, to abide by the life guidelines stated. I also acknowledge that failure to keep the above Student Conduct Code will result in disciplinary measures and can/will terminate my enrollment at CIAS.

Signed		Printed	Date:
	Student's Name		
Signed		Printed	Date:
0	Parent's Name		
Signed		Printed	Date:
	Teacher's Name		



UMBRELLA/HYBRID STUDENT CONDUCT CODE GRADES 9-12

All students who attend the CIAS Campus School should live like Jesus wants them to live and represent Him to others. Even though we live in this world, we are not to participate in behavior that does not please the Lord because He loves us, and we love Him and want to obey Him in all things. This obedience affects our beliefs, appearance, conversation, entertainment, music, and pastimes. "Friendship with the world is enmity against God" (James 4:4). "What does it profit a man if he gain the whole world and lose his own soul?" (Luke 9:25).

Schoolwork:

- 1. I will complete the schoolwork that is assigned to me by my teacher in my Lesson Plan Book (LPB).
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Student Conduct & Behavior:

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- 6. I will respect the school's safe and quiet environment, focusing on faith and family.
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- 11. I will work hard to be kind to and respectful of my classmates.
- 12. I will obey the school rules.
- 13. I will obey the CIAS Dress Code.
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- 41. I will not write on desks, walls, reading or reference books, posters, etc.

I have read and understand the above CIAS Student Conduct Code and solemnly promise, with the Lord's help, to abide by the life guidelines stated. I also acknowledge that failure to keep the above Student Conduct Code will result in disciplinary measures and can/will terminate my enrollment at CIAS.

Signed		Printed	Date:
	Student's Name		
Signed		Printed	Date:
	Parent's Name		
Signed		Printed	Date:
0	Teacher's Name		