



Christian Institute of Arts & Sciences

2007 North 61st Avenue
Pensacola, FL 32506
www.christianinstitute.com

Phone: (850) 457-4058
Fax: (850) 458-5132
nogratrijoy@christianinstitute.com

CAMPUS SCHOOL STUDENT RE-ENROLLMENT FORM School Year 2025-2026

Today's Date _____

STUDENT'S INFORMATION

Student's Full Name _____ Nick Name _____
First Middle Last

Date of Birth ____/____/____ Gender: Male ☐ Female ☐

School District ID# _____ (if student has one)

Student's Cell (____) _____ - _____ Student's Email Address _____@_____._____

Ethnicity: Hispanic/Latino ☐

Race: White/Caucasian ☐ Black/African American ☐ Asian ☐

American Indian/Alaska Native ☐ Native Hawaiian/Pacific Islander ☐

Medication:

Is the student currently taking any prescribed medication? Yes ☐ No ☐

If yes, please specify: _____

Immunization Records:

Does the school office have an updated/current Immunization Certificate 680 or Religious Exemption Certificate 681 on file? Yes ☐ No ☐

Special Education/ESE Records:

Does the student have up-to-date ESE Paperwork from the last school year? Yes ☐ No ☐

Active IEP ☐ Specify date: _____

Active 504 ☐ Specify date: _____

FDLRS/ESE Testing/Evaluation ☐ Specify date: _____

Neuro-psychological evaluation ☐ Specify date: _____ Name of the psychologist: _____

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 Student (SUFS) scholarship? Yes ☐ No ☐

If, yes, which one?

FTC ☐

FES-EO ☐

FES-UA ☐

Award ID _____

PARENT/GUARDIAN'S INFORMATION

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 _____@_____._____

Parent/Guardian's Email Address #2 _____@_____._____

Marital status: (check one) Married ☐ Single ☐ Divorced ☐ Widowed ☐

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: _____ City: _____ State: ____ Zip: _____

List all other children/people who live in the child's primary residence/home:

Parent's Name Printed: _____

Parent's Signature: _____

Date: _____



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2025-2026 PERMISSION SLIP

We/I, _____ and _____, the
parent(s)/guardian(s) of the following student(s):

_____	_____
_____	_____
_____	_____

Do hereby release Christian Institute of Arts and Sciences, Inc. from any and all responsibility and absolve CIAS (including, but not limited to, the Board, administration, teaching staff, office staff, etc.) from any claim of loss, damage, or injury of any nature to person or property resulting from the schooling program, classes, science labs, tutoring lessons, assessment/testing days, field trips, road trips, learning activities, or activity/fun days. We/I also agree that CIAS shall not be liable for any loss or unintentional neglect or careless acts of any school personnel or staff member, as well as other students enrolled in CIAS during the school year, commencing August 1, 2025, and ending July 31, 2026.

Furthermore, we/I authorize **only** the following persons to pick up or drop off our/my child(ren) from the CIAS premises.

****Place a checkmark by emergency contacts that are also listed on the Medical Information Form:***

1. _____	Phone# (_____) _____
2. _____	Phone# (_____) _____
3. _____	Phone# (_____) _____
4. _____	Phone# (_____) _____
5. _____	Phone# (_____) _____
6. _____	Phone# (_____) _____

Signed _____ and _____

Date _____

Received by School Officer _____ Date _____



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SCHOLARSHIP SIGNATURE VERIFICATION FORM School Year 2025-2026

Student's Full Name: _____ Award ID*: _____

Type of Scholarship: First FTC ☐ Middle FES-EO ☐ Last FES-UA ☐ PEP HYBRID ☐ PEP/FTC ☐

Student's Full Name: _____ Award ID*: _____

Type of Scholarship: First FTC ☐ Middle FES-EO ☐ Last FES-UA ☐ PEP HYBRID ☐ PEP/FTC ☐

Student's Full Name: _____ Award ID*: _____

Type of Scholarship: First FTC ☐ Middle FES-EO ☐ Last FES-UA ☐ PEP HYBRID ☐ PEP/FTC ☐

Student's Full Name: _____ Award ID*: _____

Type of Scholarship: First FTC ☐ Middle FES-EO ☐ Last FES-UA ☐ PEP HYBRID ☐ PEP/FTC ☐

Student's Full Name: _____ Award ID*: _____

Type of Scholarship: First FTC ☐ Middle FES-EO ☐ Last FES-UA ☐ PEP HYBRID ☐ PEP/FTC ☐

Parent Name (Print): _____ Date: _____

Parent Name (Signature): _____ Date: _____

***A SUFS Award ID is NOT the Student ID nor the Application ID**

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)*

CHRISTIAN INSTITUTE OF ARTS & SCIENCES



EMERGENCY INFORMATION AND MEDICAL RELEASE

Child's Name: _____ Date of Birth: _____

I/we authorize the two persons listed below to assume care of my child **if I cannot be reached**. If my child becomes ill at school, I understand that every effort will be made to contact me before releasing my child to these emergency contacts (please list two other than parents):

Authorized Person #1: _____ Phone: _____

Address: _____

Relationship to child: _____

Authorized Person #2: _____ Phone: _____

Address: _____

Relationship to child: _____

In the event of a medical emergency, I/we authorize the staff at Christian Institute of Arts and Sciences (CIAS) to have my child **transported to the closest hospital** and receive any treatment deemed necessary by the attending physician while efforts are made to reach me.

Preferred Hospital: _____ Phone: _____

Medical Information:

Child's Physician: _____ Phone: _____

Child's Dentist: _____ Phone: _____

Known medical problems/conditions/illnesses: _____

Allergies: _____

Child is covered by private medical insurance program: ____ Yes ____ No

Insurance Company: _____ Certificate Number/Group Number: _____

Name of Insured: _____ Employer: _____

I understand that I will be fully responsible for all expenses resulting from the emergency treatment and /or transportation of my child.

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.

CHRISTIAN INSTITUTE OF ARTS & SCIENCES



MEDICATION CONSENT FORM

Child's Name: _____ Date of Birth: _____

Check All the Over-the-Counter (OTC) Medication/Items That You Will Allow to be Dispensed to Your Child at School as Needed:

- ☐ Tylenol/Acetaminophen
- ☐ Motrin/Ibuprofen
- ☐ Allergy/Benadryl/Diphenhydramine
- ☐ Allergy/Claritin w/Loratadine
- ☐ Headache Relief/Acetaminophen w/Aspirin & Caffeine
- ☐ Tums/Anti-acid
- ☐ Pepto Bismol (Tummy)
- ☐ Bug Bites/Itches/Allergy Cream or Spray
- ☐ Halls Cough drops
- ☐ Midol (for periods/acetaminophen/caffeine/pyrilamine maleate)
- ☐ Bactine Max Spray (pain relieving/benzal konium/lidocaine)

Prescription Medication That Your Child Needs to Take at School (must be provided by parent/guardian in original prescription container and turned in to the school office directly):

Dose/Amount to be Given (not to exceed label directions): _____

Dates to be Given: Start Date _____ Finish Date _____

Special Instructions (i.e. to be taken with food, etc.): _____

Prescription Medication That Your Child Takes at Home:

I understand that I will be fully responsible for providing all of my child's over-the-counter medications and prescription medications to the CIAS office. I hereby authorize CIAS staff to dispense the above-listed medications to my child as needed/required/requested.

Parent/Guardian Signature

Cell Phone #

Date

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



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PARENT AGREEMENT For CIAS Campus School Students

I/We, (NAME/S), the parent(s) or guardian(s) of the following student(s),

(NAME/S),
highly value my child's education and experience as a student at Christian Institute of Arts and Sciences, Inc.. Therefore, I promise to uphold the policies 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 understand 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, spiritual, 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 CIAS administration.
17. I will attend any Intervention Meetings my child's teacher and/or CIAS Administration deem necessary to discuss chronic misbehavior issues.
18. I will acknowledge CIAS administration's expertise and suggestions for academic planning according to my child's academic needs, learning disabilities/diagnoses, learning style/intelligences, etc.
19. My child will attend summer school as needed and/or recommended by CIAS teachers and/or administration.
20. I will inform the school administration immediately if my child breaks the law, runs away, or is apprehended/arrested by law enforcement authorities.

For high school students:

21. My student will follow the state of Florida's and CIAS' course requirements to receive high school credits.
22. I will provide documented records of electives and extracurricular activities; i.e. physical fitness, community service, and performing fine arts (theatre, drama, music lessons, choir, etc.) for my child to receive credit.

We (I) further agree that if we (I) wish to withdraw my student(s) from CIAS, we (I) agree to:

- 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.

We (I) understand that failure to comply with these agreements/policies is cause for suspension or dismissal of student(s). School records will then be stamped incomplete.

We (I) release the Christian Institute of Arts & Sciences, Inc. from any and all responsibility and absolve them from any claim of loss, damage, or injury 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 or unintentional neglect or careless acts of any school personnel or other students enrolled in CIAS.

Signed _____ Date _____

Form must be signed by a parent/guardian

Received by School Officer _____ Date _____

CHRISTIAN INSTITUTE OF ARTS & SCIENCES



CAMPUS 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.
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 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 not be dishonest; 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 _____ 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!

CHRISTIAN INSTITUTE OF ARTS & SCIENCES



CAMPUS 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!).
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 _____ 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!

CHRISTIAN INSTITUTE OF ARTS & SCIENCES



CAMPUS 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.
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 for 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 with the intention of making fun of or hurting 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: _____
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!

CHRISTIAN INSTITUTE OF ARTS & SCIENCES



CAMPUS 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).
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.
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 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 with the intention of making fun of or hurting 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.
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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!