

Christian Institute of Arts & Sciences 2007 North 61st Avenue Phone: (850) 457-4058

Fax: (850) 458-5132 nogratrjoy@christianinstitute.com

STUDENT ENROLLMENT FORM School Year 2023-2024

Today's Date				
STUDENT'S INFORMATIO	N			
Student's Full Name First	Middle	Last	Nick Name	
Date of Birth/	Gender: Male O	Female O		
Social Security Number	Schoo	l District ID#		(if student has one)
Student's Cell ()	Student's Email A	Address		_@
Last Grade Completed:	Name of last school	ol attended:		
School Address:		City:	State:	Zip:
ETHNICITY: Hispanic/Latino O				
RACE: White/Caucasian O	Black/African Ame	erican O A	sian O	
American Indian/Alaska Native \mathbf{O}	Native Hawaiian/I	Pacific Islander)	
Does the student have up-to-date Hactive IEP Ospecify date: Active 504 Ospecify date: FDLRS/ESE Testing/Evaluation Ospecify date: Neuro-psychological evaluation Ospecify date: Does the student have any diagnosis	Specify date:	Name of t	the psychologis	
PARENT/GUARDIAN'S INF	FORMATION			
Mother's Name:				
Guardian's Name:		_		
Marital status: (check one) Marrie	od O Single O	Divorced ()	Widowed)

If divorced: Step-Mother's Name	Step-Father's Name:		
Mother's Cell # (
Step-Mother's Cell # ()			
Guardian's Cell # ()			
Parent/Guardian's Email Address #1			
Parent/Guardian's Email Address #2			
Primary Residence Address:	City:	State:	_Zip:
Secondary Residence Address:	City:	State:	_Zip:
List all other children/people who live in the	e child's primary residence/home:		
Mother's Occupation/Job:	Place of Employment: _		
Father's Occupation/Job:	Place of Employment:		
Guardian's Occupation/Job:	Place of Employment:		
Mother's Life Skills: (talents, hobbies, interests, ability			
Father's Life Skills: (talents, hobbies, interests, ability (talents, hobbies, interests, ability)	les)		
Guardian's Life Skills: (talents, hobbies, interests, abilit	1es)		
(talents, hobbies, interests, abilit List family hobbies, businesses, etc.	ies)		
Are you interested in your child attending so	chool full-time at the CIAS Campus School	l? Yes (O on
Are you interested in your child attending cl	asses/lab at the CIAS Campus School?	Yes O	No O
Are you interested in homeschooling your cl	hild under the CIAS Umbrella School?	Yes O	No O
If yes, give the name of the person who will			
	Relationship to student:		
Is the enrolling student adopted: Yes O If yes, please provide appropriate documents	No O ation of adoption and/or altered birth certif	ïcate.	
Is the enrolling student from a previous mark If yes, please provide appropriate custody do			
Briefly state your reason for enrolling your o	child in CIAS:		
How did you learn/hear about CIAS?			
Parent's Name Printed:			
Parent's Signature:	Date:		



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2023-2024 PERMISSION SLIP

We/I,	and	, the
parent(s)/guardian(s) of the following studer	t(s):	
Do hereby release Christian Institute of Arts CIAS (including, but not limited to, the Boar of loss, damage, or injury of any nature to pescience labs, tutoring lessons, assessment/tesdays. We/I also agree that CIAS shall not be school personnel or staff member, as well as commencing August 1, 2023, and ending Juli	d, administration, teaching staff, of rson or property resulting from the ting days, field trips, road trips, lea liable for any loss or unintentional other students enrolled in CIAS du	fice staff, etc.) from any claim schooling program, classes, rning activities, or activity/fun neglect or careless acts of any
Signed	and	
Date		
S	TUDENT PICKUP	
Furthermore, we authorize ONLY the follow property/premises:	ving people to pick up/take our child	d(ren) from the CIAS school
Signed	and	
Date		
Witness of School Official Signature	1	Position



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SCHOLARSHIP SIGNATURE VERIFICATION FORM School Year 2023-2024

Student's Full Name:				
	First	Middle	Last	
Student's Full Name:				
	First	Middle	Last	
Student's Full Name:				
	First	Middle	Last	
Student's Full Name:				
	First	Middle	Last	
Student's Full Name:				
	First	Middle	Last	
Student's Full Name:				
	First	Middle	Last	
Parent Name (Print):			Date	:
Parent Name (Signatu	re):			Date:



EMERGENCY INFORMATION AND MEDICAL RELEASE

Child's Name:	Date of	f Birth:
I/we authorize the two persons listed be reached. If my child becomes ill at schoreleasing my child to these emergency (Authorized Person #1:	ool, I understand that every effort was contacts (please list two other than p	ill be made to contact me before parents):
Address:		
Relationship to child:		
Authorized Person #2:	F	Phone:
Addres		
Relationship to child:		
In the event of a medical emergency, I/to have my child transported to the clos attending physician while efforts are many	sest hospital and receive any treatme	
Preferred Hospital:	Phone:	
Medical Information:		
Child's Physician:	P	hone:
Child's Dentist:	P	hone:
Known medical problems/conditions/il	lnesses:	
Allergies:		
Child is covered by private medical ins		
Insurance Company:	Certificate Numbe	er/Group Number:
Name of Insured:	Employer:	
I understand that I will be fully respons transportation of my child.		
Parent/Guardian Signature	Phone*	Date
Parent/Guardian Signature	Phone*	Date.

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



MEDICATION CONSENT FORM

Child's Name: Date of Birth:	
Check All the Over-the-Counter (OTC) Medication/Items That You Will All Child at School as Needed:	ow to be Dispensed to Your
Tylenol/Acetaminophen Motrin/Ibuprofen Allergy/Benadryl/Diphen	hydramine \Box
Allergy/Claritin w/Laratadine 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/pyrilam	nine maleate)
Bactine Max Spray (pain relieving/benzal konium/lidocaine)	
Prescription Medication That Your Child Needs to Take at School (must be container & provided by parent):	in original prescription
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.):	
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 prescription medications to the CIAS office. I hereby authorize CIAS staff to dispendications 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.

Child's Name:		

FOR OFFICE USE ONLY: To be completed by CIAS Staff at the time medication is given

Date Administered (mm/dd/yy):	Time	Medication(s):	Dosage Administered:	Complaint/ Ailment:	Staff Initial:



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PARENT AGREEMENTFor CIAS Campus School Students

We (I),	and/or	,
	the parent(s) or guardian(s) of the following student(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 behavior expected of my child; I understand that if my child fails to follow the CIAS Student Conduct Codes, 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 fill out, sign, and return all paperwork (Enrollment or Re-enrollment) to the school office by the end of the first week of each school year.
- 7. I will have all immunization records up to date and turned in to the school office within 30 days of the beginning day of each school year.
- 8. I will provide the school with pertinent and up-to-date information concerning my child, i.e. adoption papers, custodial papers, etc.
- 9. I will make sure that my child attends the required 180 days of school per year and/or completes the specified curriculum.
- 10. I will cooperate with attendance policies and make sure that my child completes the required number of hours pertaining to grade level per day.
- 11. I will provide needed school supplies and materials for my child.
- 12. I will supply any needed records of daily attendance and schoolwork grades of each student.
- 13. I will supervise my child to complete any/all homework assigned by CIAS teachers, tutors, or administration.
- 14. I will make all payments to the school on time, as it is invoiced by email and in agreement with school administration.
- 15. My child will complete diagnostic and placement assessments as needed
- 16. My child will receive annual achievement testing from CIAS administration or a school-approved testing agent every year.
- 17. I will meet with CIAS administration as needed and participate in academic planning sessions scheduled by CIAS administration.
- 18. I will attend any Intervention Meetings that my child's teacher and/o CIAS Administration deems necessary to discuss chronic misbehavior issues.
- 19. 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.
- 20. My child will attend summer school as needed and/or recommended by CIAS teachers and/or administration.
- 21. I will inform school administration immediately in the event that my child breaks the law, runs away, or is apprehended/arrested by law enforcement authorities.

For high school students:

- 22. My student will follow the state of Florida's and CIAS' course requirements to receive high school credits.
- 23. 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.) in order 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 the school regulations and policies are cause for teacher certification removal and 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	_ and/or
Form must be signed by both custodial parents/guardians	
on this day of,Scl	nool officer validating signature



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

School Property:

- 29. I will not touch anything on the teachers' desks or open drawers in the desk without the teacher's permission.
- 30. I will not damage school property (tables, chairs, shelves, etc.)
- 31. I will not throw objects across the room or at the ceiling.
- 32. 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	
	Student's Name		
Signed		Printed	
<i>C</i>	Parent's Name		
Signed		Printed	
	Teacher's Name		
On this day.			

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



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 make good choices for my behavior.
- 8. I will obey the school rules
- 9. I will not encourage my fellow classmates to break school rules
- 10. I will be quiet during school hours and use my inside voice when permitted to talk.
- 11. I will be respectful of my classmates' personal spaces.
- 12. I will not wander around without permission.
- 13. I will not say bad words or use bad language; I will not misuse the Lord's name (ex: Oh, my God!).
- 14. I will not pester my classmates.
- 15. I will not tease to make fun of or belittle my classmates.
- 16. I will not tease a person about how God made them.
- 17. I will not be mean to my classmates.
- 18. I will not say hurtful words about anyone.
- 19. I will not gossip about teachers or other students, talking about them behind their backs.
- 20. I will not write and pass unkind or mean notes, nor ask other classmates to pass notes.
- 21. I will not touch my classmates inappropriately or rough house (ex: hitting, slapping)
- 22. I will not fight with other students.
- 23. I will not hit, touch, or harm another person with the intent of hurting them.
- 24. I will not show anyone my private parts.
- 25. I will not be dishonest; I will not lie. I will not cheat on tests.
- 26. I will not steal snacks or drinks.
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- 28. 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 throw objects across the room or at the ceiling.
- 32. 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
	Student's Name	
Signed		Printed
	Parent's Name	
Signed		Printed
	Teacher's Name	
On this day		

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



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.
- 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; I will not 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; I will not 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 rough housing, however innocent my intentions.
- 23. I will not fight with other students; I will not hit another person with the intent of hurting 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 in engage in pubic 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



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.
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- 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).
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- 12. I will obey the school rules.
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- 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.
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- 34. I will not break the law, get arrested, get reported to the police/CPS, or run away.
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Signed	Printed	Date:
Student's Name		
Signed	Printed	Date:
Parent's Name		
Signed	Printed	Date:

Teacher's Name