



New Covenant Academy
 310 Extension Street
 Mansfield, Pennsylvania 16933
 tel. 570.662.2996; fax 570.662.0272
 info@ncalions.org

Office Use Only Date: Check# Amount:

**Re-Enrollment Application
 2020-2021**

_____ **Yes**, I intend to re-enroll my child(ren) in NCA for the 2020-2021 school year.

Please remit re-enrollment fee \$50/student (max. \$200/family) by March 17th **or** \$75/student (max. \$250/family) after March 17th.

_____ **No**, I do not intend to re-enroll my child(ren) in NCA for the 2020-2021 school year.

Name: _____ Phone _____

Student's Full Name	Grade Entering	Date-of-Birth
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**** If you will be enrolling a NEW student at NCA, please complete a Pre-K-5th Grade or 6-12th Grade Registration Application. ****

If you plan to utilize our Extended Care program, please indicate below which days:

Monday Tuesday Wednesday Thursday Friday

Tuition:

Please indicate your payment preferences:

- One-time Payment
- 10 Monthly Payments
- 12 Monthly Payments

Please indicate how you will be making payments:

- Automatic withdrawal from bank account on the 1st (ACH contract required)
- Credit Card/Debit Card (a 4% fee will be added to cover the cost of the transaction)
- Check/Money Order

Financial Agreement: As parent(s) or guardian(s), I/we agree to pay the annual published tuition required by NCA for my child/children's education. I/we further understand that I/we are purchasing the education services of NCA, and that the tangible product of the services are the student's report cards and the individual educational permanent transcripts for each child. I/we understand that if I/we the parent(s)/guardian(s) fail to pay our tuition account in full, NCA is in no way obligated to release any records, report cards or individual permanent educational transcripts to any other institution for all of the courses not paid for under the obligations of this agreement. We also understand that if we withdraw for any other reason other than a physical move more than 50 miles away, we will be responsible for the FULL semester of tuition, in accordance with NCA policy. Course records will only become part of the child's/children's permanent record if and when all financial obligations to NCA are satisfied. Upon full payment, individual transcripts will be made current within ten (10) days of payment.

 Father's Signature Date

 Mother's Signature Date

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Pastor's Reference Form
For Application to New Covenant Academy

Parent's Name _____

Applicant's Name _____

The above named family and student have applied for entrance to New Covenant Academy. We would appreciate your confidential comments on the applicant's maturity, stability, temperament, and Christian character.

Please keep in mind that the mission of New Covenant Academy is to teach and train Christian students for maturity in the Lord. We have not been established to convert students to Christianity or to act as a reform school for the backslidden or spiritually rebellious student. Also, every child attending NCA will affect their classmates and others. We do recognize that some younger elementary students are still under the covering of their parents and may not have made a personal decision for Christ at the time of application.

Since it is impossible for us to determine the spiritual motivation and character of a family or student in a short interview, we must rely heavily upon your recommendation. Please complete this evaluation for the family and the student named and return to us as soon as possible. We cannot process this student's application until your evaluation is received.

If you have not known this family or student long enough to make a fair evaluation, please pass this form on to a Christian leader who knows them well.

Thank you for your help, and may God bless you richly.

RETURN TO: NEW COVENANT ACADEMY
310 Extension Street
Mansfield, PA 16933

1. Do you believe the applicant and family to be committed Christians? Yes___ No___

2. How long have you been acquainted? _____

3. In what ways is the applicant and the applicant's family involved in local ministry?

7. To the best of your knowledge, does he/she use drugs, alcohol, or tobacco in any form? Yes___ No___

8. Would you recommend him/her, without reservation, for admittance to NCA? Yes___ No___

Additional comments regarding family:

Please check the following:	Excellent	Good	Fair	Poor
1. Spiritual depth and maturity				
2. Dedication to Christ				
3. Christian standards				
4. Ability to get along with others				
5. Follows instructions				
6. Cooperation				
7. Teachability				
8. General attitude				
9. Disposition				
10. General appearance				
11. Faithfulness to church				
12. Faithfulness to youth activities				

In your opinion, would the applicant be a(n) *excellent* *good* *fair* *poor* addition to NCA?
 Please explain:

Please add any information that would better enable us to evaluate this student:

Please contact me about this applicant.

Church and Biographical Information

Name _____ How long have you been pastor of this church?

Church Name _____ Phone (____) _____

Address _____
street city state zip code

Website _____ Email _____

Signature _____

Date _____