

# APPLICATION PROCESS

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The Summit Christian Academy International Program accepts students working with agencies as well as direct placement students. Since we accept a limited number of international students and admission to SCA is highly competitive, prompt submission of enrollment paperwork is recommended by April 30.

To begin the application process, please complete and return the following forms:

- ☐ Application
- ☐ Signed Foundational Beliefs
- ☐ Signed Acceptance Conditions
- ☐ Signed Technology Use Student Contract
- ☐ Signed Tuition and Fees Schedule
- ☐ Student Questionnaire
- ☐ Official Transcript and English Translation of Academic Transcript
- ☐ Medical Information Form and Record of Immunizations
- ☐ Permissions Form

Additional items to be attached:

- ☐ \$500 Enrollment Fee (please contact the International Program Director if sending by wire transfer)
  - ☐ Copy of Passport
  - ☐ iTEP Slate Plus test results (to take the test, go to [www.itepexam.com/virtual-testing](http://www.itepexam.com/virtual-testing)). Score requirements: 8th grade—3.5, 9th grade—3.8, 10th grade—4.2, 11th grade—4.5-5, and 12th grade—5.
  - ☐ Bank Statement
  - ☐ Parent Letter
- Upon receipt of the above forms and fee, I will send for the Teacher Recommendations and Character Reference.
  - Once all of these materials have been received and reviewed, I will contact you to schedule a video interview with your student.
  - Please note that your application and nonrefundable enrollment fee reserve a place for your student, however, they are not officially enrolled until the process is completed and you have received a letter of acceptance.

I am pleased to answer any questions you may have about SCA and our international program. I look forward to hearing from you and working with you through the enrollment process.

Feel free to contact me at [rdefelice@sca-kc.org](mailto:rdefelice@sca-kc.org).

# SUMMIT CHRISTIAN ACADEMY

## INTERNATIONAL STUDENT APPLICATION – 2024-2025

1500 SW Jefferson

Lee's Summit, MO 64081

Administrative Offices: Phone 816-525-1480 Fax 816-525-5402

*This school is  
authorized under  
Federal law to  
enroll nonimmigrant  
students.*



Division (check those that apply) <input type="checkbox"/> 4-6 <input type="checkbox"/> 7-8 <input type="checkbox"/> 9-12				
Applicant's Name (as shown on passport)			Date of Application	
(SURNAME)		(GIVEN NAME)		
Applicant prefers to be called	Age	Sex	Grade to Enter	
Home Address	City	State	Zip Code	Home Phone #
<b>Please attach a copy of the student's passport.</b>	Applicant's Date of Birth		Month	Day
			Year	
Applicant's City of Birth	Country of Birth	Country of Citizenship	Country Issuing Passport	
Does the student have U. S. citizenship and/or dual citizenship? If so, please provide documentation.				
Name of Parents or Guardians				
<b>Student Has Been Enrolled in the Following U.S. School(s)</b>				
Name of U.S. School Last Attended:			Grade Point Average	
Address of U.S. School Last Attended:				
Why are you considering changing schools?				
Do you have any outstanding balances at your previous school? If yes, please explain.				
Names of any other U.S. schools student has attended:				
Is student applying to other schools?				

# INTERNATIONAL STUDENT APPLICATION (CONTINUED)

Please check which of the following best describes what the applicant hopes to accomplish while attending Summit Christian Academy:			
<input type="checkbox"/> High School Diploma		<input type="checkbox"/> Cultural Experience	
<input type="checkbox"/> Language Acquisition		<input type="checkbox"/> College Preparation	
Is applicant considering attending a U.S. school more than one year? <input type="checkbox"/> Yes <input type="checkbox"/> No			
SCA requires that the student be adequately proficient in English. <b>Please provide a copy of iTEP Slate Plus test results (<a href="http://www.itepexam.com/virtual-testing">www.itepexam.com/virtual-testing</a>).</b>			
SCA requires the recommendation of two of the student's current or former teachers and one character reference. Please include below the names and email addresses of one math teacher, one English or language teacher, and one character reference. Please advise these individuals that they will receive a recommendation form from the International Program Director by email.			
Math teacher's name and email address		English or language teacher's name and email address	
Character reference name and email address			
Has applicant graduated from a high school program? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please give the name of school along with contact information and attach a final transcript to this application.			
Describe the student's current school experience (lives at home and attends local school, attends a boarding school, lives with a family member in another city, or other).			
Has applicant received any other special help or tutoring? If yes, explain.			
Has applicant ever failed a grade?			
Has the applicant ever been suspended, expelled, or disciplined beyond the ordinary? If yes, explain.			
Has the applicant ever had or been recommended to have counseling? If so, for what purpose?			
Has the applicant ever been arrested? If yes, please explain.			
Has the applicant ever been involved with family court? If yes, please explain.			
Names of Brothers and Sisters	Ages	Names of Brothers and Sisters	Ages

## PARENT/GUARDIAN INFORMATION

	Father/Guardian	Mother/Guardian
Full Name		
<b>Full Mailing Address</b> (Important for I-20 document)		
Parent's Phone #		
Parent's Cell Phone #		
Email addresses for school communication purposes		
Check all that apply	<input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed <input type="checkbox"/> Remarried	<input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed <input type="checkbox"/> Remarried
Employer's Name		
Position Title		
What is your religious affiliation?		
How would you describe your relationship with God?		
Are there any special family problems or circumstances that we should know about in order to best serve you and your child?		
What is your reason for selecting this school? Please attach a <b>parent letter</b> describing your child and why you believe s/he would be a good candidate to attend SCA.		
Referred to Summit Christian Academy by:		

## HOST FAMILY INFORMATION (COMPLETE ONLY IF STUDENT'S FAMILY SECURES A HOST)

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If your student will be living with a family member or legal guardian in the United States, please provide the following information.

Summit Christian Academy requires that at least one parent of the host family for all international students be a professing Christian who attends a Bible-believing church. SCA will contact the host family and ask them to complete a Host Family Application. We will secure a pastoral reference and conduct a Host Family Interview, as we do with all new families.

Adult members in the Host Family are required to complete a Background Check Authorization form. The school will conduct a thorough background check.

Host Family/Guardian Name	
Full U.S. Address	
Home Phone #	
Cell Phone #	
Email address	

*Subject to the Constitution of the United States and all applicable state and federal laws, Summit Christian Academy does not discriminate against applicants or students on the basis of race, color, and national or ethnic origin in its admissions or in the administration of its education policies, programs, or activities.*

# SUMMIT CHRISTIAN ACADEMY FOUNDATIONAL BELIEFS

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## Statement of Faith

As a community school, it is not our intention to promote the doctrines of any one church or denomination. Instead, we will center on those beliefs that we share in common with each other.

1. We believe the Bible to be the only inspired, infallible, authoritative, inerrant Word of God (II Timothy 3:16; II Peter 1:21).
2. We believe there is only one God, eternally existent in three persons. Father, Son, and Holy Spirit (Genesis 1:1; Matthew 28:19; John 10:30).
3. We believe in the deity of Christ (John 10:33); His virgin birth (Isaiah 7:14; Matthew 1:23; Luke 1:35); His sinless life (Hebrews 4:15; 7:26); His miracles (John 2:11); His vicarious and atoning death (I Corinthians 15:3, Ephesians 1:7, Hebrews 2:9); His resurrection (John 11:25; I Corinthians 15:4); His ascension to the right hand of the Father (Mark 16:19); His personal return in power and glory (Acts 1:11; Revelation 19:11).
4. We believe in the absolute necessity of regeneration by the Holy Spirit for salvation because of the exceeding sinfulness of human nature; and that men are justified on the single ground of faith in the shed blood of Christ and that only by God's grace and through faith alone, we are saved (John 3:16-19; 5:24; Romans 3:23; 5:8-9; Ephesians 2:8-10; Titus 3:5).
5. We believe in the resurrection of both the saved and the lost; they that are saved unto the resurrection of life and they that are lost unto the resurrection of damnation (John 5:28-29).
6. We believe in the spiritual unity of believers in our Lord Jesus Christ (Romans 8:9; I Corinthians 12:12-13; Gal 3:26-28).
7. We believe in the present ministry of the Holy Spirit by whose indwelling the Christian is enabled to live a godly life (Romans 8:13-14; I Corinthians 3:16; 6:19-20; Ephesians 4:30; 5:18).

The Summit Christian Academy Statement of Faith does not exhaust the extent of our beliefs. The Bible itself, as the inspired and infallible Word of God that speaks with final authority concerning truth, morality, and the proper conduct of mankind, is the sole and final source of all that we believe. For purposes of Summit Christian Academy's faith, doctrine, practice, policy, and discipline, the school's Board of Education is the final interpretive authority on the Bible's application.

## Position on Marriage, Sexuality, and Gender Identity

Summit Christian Academy (SCA) believes that the term marriage has only one meaning: the God-ordained union of one man and one woman in a covenant commitment, distinguished by sexual exclusivity, permanence and devotion to their good and to the welfare of any children within the family, as delineated in Scripture (Genesis 2:18-25).

We believe that God intends for sexual intimacy to occur only between a man and a woman who are married to each other (1 Corinthians 6:18, 7:2-5; Hebrews 13:4). We believe that God's command is that there be no sexual intimacy outside of or apart from the man-woman marriage relationship.

Summit Christian Academy (SCA) believes that God wonderfully foreordained and immutably created each person as either wholly male or wholly female in conformity with their biological sex. These two distinct yet complementary genders together reflect the image and nature of God (Genesis 1:26-27).

## Community Compact

Summit Christian Academy (SCA) is comprised of an association of Christian families from various denominations seeking similar educational and spiritual goals. It is not a church nor does it take the place of one; instead it is a unique school where both spiritual and academic aspects are integral.

SCA strives to provide a Christian environment conducive to the development of Christ-like attitudes, habits and character in the pursuit of academic excellence and positive extracurricular activities. In cooperation with the Handbook and School Policies, SCA puts forth this compact to partner with students and parents to work toward this common goal.

For its part, SCA commits to operate by biblical principles including those highlighted in this compact and uphold the mission statement "to inspire students to achieve their God-given potential through excellent academics and Christian training in a compassionate environment." When discipline is warranted, SCA further commits to apply it judiciously and with grace. For the student, attending SCA is a privilege that comes with responsibilities and expectations as conveyed in this compact that are to be taken seriously.

## *Christian life*

In all settings the lives of students should reflect biblical principles.

Students are to dedicate themselves to:

- Speak only with integrity using wholesome and truthful words (Eph. 4:29, Phil. 4:8).
- Demonstrate fruits of the Holy Spirit such as love, joy, peace, patience, kindness, goodness, faithfulness, gentleness, self-control, humility and forgiveness (Gal. 5:19-21; Col. 3:12-14).
- Resolve grievances as directed in Matt. 18:15-17 with counsel from parents or other adults who can help bring resolution.
- Develop in the Christian life seeking God's will and be diligent in studies seeking to achieve one's full potential (Rom. 12:2; II Tim. 3:16).
- Respect and submit to authority (Rom. 13:1-7; Eph. 6:1-3).
- Regularly attend a Bible believing church (Acts 2:42-47; Heb. 10:19-25).

Students are to avoid:

- The use of profanity and language that profanes in sexual content in either the spoken or written word (Eph. 5:7; Col. 3:5-10).
- Dishonesty, prejudice and cheating (Gal. 3:26-29; II Cor. 4:2; Col. 3:8-10).
- Immodesty in dress or behavior (I Tim. 2:8-10; I Cor. 6:18-20).
- Gossip, derogatory speech, harmful teasing and bullying (Eph. 4:29; Prov. 11:13).
- Use of tobacco and illicit drugs, consumption of alcohol and other illegal activities (Rom. 12:1, Rom. 13:1-2; I Cor. 6:19).
- Sexual immorality including sexual relations of any kind outside the bonds of marriage, homosexual orientation or activity, transgender identity or activity, and pornography in any form (Matt. 5:27-28; Rom. 1:21-27; Rom. 12:1; Lev. 18:22; Job 13:1; Gen. 2:18-25; Eph. 5:22-33; Gen. 1:27; Mark 10:6).

#### *Freedom in Christ*

In addition to specific biblical principles is the concept of freedom in Christ that requires believers to make biblically guided choices in matters of behavior, entertainment and relationships (Gal. 5:13-14; 1 Pet. 2:16-17; I Cor. 6:20). Parents are ultimately responsible to guide their student in such matters, and while the school acknowledges varying convictions exist, it has established rules and policies with sensitivity to the needs of the school and the practices of other Christians.

#### *Be of one accord*

In a diverse community of believers complete unanimity is not expected. Even so, each parent and student should support and pray for the school and work with it toward the stated goals and support this compact as a positive statement of biblical aspirations (Phil. 2:2).

#### *Student behavior*

Students should be mindful that as Christians they represent Christ at all times and, as students of SCA their actions reflect on the school. It is not the intention of the school to tell parents how to parent, so school rules will be enforced only at school functions; however, even away from such functions there can be student behavior so egregious that it necessitates a response by the school. The school may take immediate action or work with the parent and student toward reconciliation with the school. Sustained or flagrant disregard for the school or this compact would indicate a lack of unity with the school and if remedial action by all those involved did not restore the accord it would be best for the school and student to part (Phil. 1:27).

#### *Conclusion*

Students are encouraged to enter into this compact willingly with the full intention of learning and growing under its provisions rather than passive compliance. Signing below indicates the student and parent join the school in this compact and will endeavor to abide by its principles (James 5:12).

I/We, \_\_\_\_\_, as the parent of \_\_\_\_\_ have read the above Statement of Faith and understand that my/our child will be taught from a Christian worldview while a student at Summit Christian Academy.

\_\_\_\_\_  
Signature of Parent

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Student

\_\_\_\_\_  
Date

# CORE VALUES OF SUMMIT CHRISTIAN ACADEMY

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Please carefully read and review the following Core Values to which Summit Christian Academy subscribes.

## **Christ-Centered**

Our belief in God and His Word is central to SCA. Through a faculty who practice a personal and active faith, we foster a thoroughly Christian environment where God's Word is the standard for decision making. Placing Christ at the center of all enables us to educate the whole student, spiritually, emotionally, mentally, socially, and physically.

## **Pursuing Grace and Truth**

SCA seeks to model the life Christ demonstrated on earth, a life full of grace and truth, which rejected legalism for the higher priority of focusing on the inner man. We recognize that Christ looks inward at the motivations of the heart and pursues a relationship with us. We exercise spiritual discernment, speaking the truth in love in order to promote the spiritual growth of the individual without compromising the student body as a whole.

## **Inspiring Excellence in Learning**

The SCA faculty inspires students to discover and develop their God-given gifts and talents. We nurture an enthusiasm for learning, providing an atmosphere wherein students may express creativity, discern truth, think critically, and choose wisely. In academics, the arts, and athletics, we uphold a standard of excellence to encourage students to achieve their individual best.

## **Encouraging Spiritual Growth**

We desire that every student know Christ personally and grow in His grace and knowledge, so they may impact their world for Him. We understand the importance of godly staff and faculty who model the Christian walk and mentor students to pursue their personal relationship with the Lord.

## **Cultivating Community**

We recognize that the SCA community extends beyond the walls of our school. Coming from diverse backgrounds, we unify around a simple statement of faith that binds us together. We acknowledge the responsibility of the parent, the role of the church, and the authority of the Holy Spirit in training students.

## **Igniting Leadership**

SCA embodies a culture of servant leadership that is sparked by a sense of individual purpose. With competency, credibility, and compassion, we add value to others and influence the marketplace of ideas.



# ACCEPTANCE CONDITIONS

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**I/We and our child have read the following acceptance conditions. We understand that if our child is accepted as an international student at Summit Christian Academy, the following conditions apply:**

1. I understand that SCA is a Christian school and that my child will be taught the precepts of the Christian faith.
2. I understand that SCA requires Bible each semester and attendance at weekly chapel services.
3. I understand that my child is required to attend church services with his/her host family; obey all house rules; take part in family activities; help with chores; and demonstrate respect, care, and understanding to the host family at all times.
4. I agree to support the administration and faculty in the enforcement of SCA policies clearly outlined in the Student Handbook.
5. I give permission for my child to take part in all routine school activities, including sports and school-sponsored trips. I absolve SCA from all financial/personal liability to me or my student because of any injury at school or during any school activity.
6. I understand that my child must meet the graduation requirements to receive a diploma. We must prove that all transfer credits meet SCA's standards (he/she may have to repeat a class and lose previous credit) and must pass all required classes.
7. I understand that my child must take a "full course load" (at least 8 units per semester) in order to remain in status with his/her student Visa.
8. I understand that any course outside of SCA classes taken during the school year must have approval of the International Program Director and Academic Dean.
9. I understand that my child must maintain a C average in each class. Failure to do so may require hiring a private tutor at the student's expense. If improvement is not made, the student will be put on academic probation with possible dismissal if the student does not show progress.
10. I understand that my student is required to take a language proficiency test and meet the following score requirements: 8th grade—3.5, 9th grade—3.8, 10th grade—4.2, 11th grade—4.5-5, and 12th grade—5.
11. I understand that my first-year student is required to attend the Orientation Weekend two weeks before school starts.
12. I understand that placement in any regular or honors class will be determined by meeting prerequisite requirements and by recommendations from the College and Career Advisor and the classroom teacher.
13. I understand that my child is considered a minor, regardless of age, and must abide by the attendance, behavior, driving, guardianship, housing, Department of Homeland Security, State of Missouri, and all other rules set forth by SCA. I understand that my child will be dismissed from SCA if these requirements are falsified or challenged.
14. I understand that my child will be dismissed if he/she participates in any illegal activities including drinking or purchasing alcoholic beverages and/or tobacco products; buying, selling, possessing, or using illegal drugs; committing or taking part in an act of violence against another person or property; shoplifting or theft; sexual immorality including sexual relations of any kind outside of marriage; homosexual orientation or activity; or accessing or downloading pornography in any form.
15. I understand that any false information or failure to disclose academic, medical, behavioral, or emotional problems during the application/admission process may result in dismissal from SCA with no recourse and no refunds.
16. I understand it is my responsibility to see that my child receives all required immunizations prior to departing for the U.S. If upon arrival, it is determined that the student is not compliant with required immunizations or booster shots, the student must receive them at his/her expense.
17. I understand that upon acceptance, SCA will issue and mail a Form I-20, which is necessary for the acquisition of a student F-1 Visa. SCA will not be held responsible for the denial of a Visa by any United States government agency (Embassy or Consulate).

## ACCEPTANCE CONDITIONS (PAGE 2)

18. I understand that my child's progress at school and in the host home, their adaptation, effort, behavior, attitude, and attendance will be evaluated after first semester and the end of the school year. SCA is not obligated to allow him/her to continue.
  19. I agree to pay for all bills related to insurance/medical treatment. I understand that medical insurance is included in the total cost of Tuition and Fees and covers students who participate in the SCA interscholastic athletic program.
  20. I agree to provide and pay for my student's round trip domestic and international transportation including any additional fees associated with additional luggage or overweight.
  21. I agree that I shall defend, indemnify, and hold harmless SCA and its representatives from any and all liability and costs for injury to persons and/or property directly or indirectly arising out of my child's actions while at SCA.
  22. I understand that cell phones, Chromebooks, or any other electronic devices are a privilege, not a right. The student should only have one cell phone and one Chromebook. I further understand that their use will be monitored. If it is determined that this privilege is interfering with academic and language progress, cultural adaptation, and/or face-to-face social connections, consequences may include temporary confiscation and/or limited use of the device up to dismissal. I also understand that the student is responsible for all cell phone related costs and fees.
  23. I understand that for my student to successfully bond with their host family, adapt to the culture, and be successful in reaching his/her goal of language acquisition, there must be limited contact with family and friends. We ask that contact be limited to once a week.
  24. While serious dating relationships are not permitted, socializing in groups is encouraged.
  25. I understand that visits from the natural parents, family, and/or friends can be disruptive to the adjustment process, especially during the first year. I understand that SCA advises visits take place at the end of the school year. I further understand that the International Program Director (IPD) must preapprove visits during the school year.
  26. I understand that leaving the United States during the school year is not permitted. I further understand that travel within the United States will only be permitted with permission and written authorization of the natural parents, host parents, and the IPD.
  27. I agree to provide my student with a Chromebook for classroom use and understand that registration of the device with the school technology department is required. I also understand that my student must follow the rules for responsible technology usage.
  28. I agree that SCA will not be responsible for the theft or loss of the student's personal belongings for the duration of his/her stay in the U.S.
  29. I agree to provide my student with sufficient spending money to cover all personal expenses for the duration of his/her SCA enrollment. I understand that the natural parent is responsible for student lunches charged.
  30. I agree that in the case of the necessary relocation of my student to another host family, the student must cooperate completely with the SCA IPD. The IPD will provide relocation only if it is deemed necessary by the IPD.
  31. Athletic eligibility or participation in extracurricular activities is not guaranteed.
  32. I understand that my student is prohibited from getting tattoos and body piercings for the duration of his/her stay in the U.S.
  33. I understand that my student may not operate any motorized vehicle and may not obtain a driver's license while residing with a host family. If my student is residing with a family member, permission to drive must be obtained from the IPD.
  34. I understand that this Agreement shall legally bind me upon acceptance and reenrollment by SCA, and it shall be interpreted and enforced in Missouri and under Missouri law.
- ☐ I/We have read, understand, and agree with the above Acceptance Conditions.
- ☐ I give permission for my child's photo to be used in brochures, flyers, newspaper ads, etc.

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Parent or Guardian Signature

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Date

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Student Signature

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Date

**TECHNOLOGY USE STUDENT CONTRACT FOR INTERNATIONAL STUDENTS**

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SCA is pleased to offer students access to technology resources that operate in a safe, filtered Internet environment. To gain access to the Internet, all students must obtain permission as verified by signatures on this form. All personal and school-owned devices will be subject to the terms of this contract while on campus.

**The following regulations govern network and device use at SCA:****For All Students****Google Accounts**

- While at school, students should only use their school-issued Google account (@realschoolspirit.org).
- All students have unlimited storage for files in their Google account. Students should only save documents to this account.
- Your school-issued Google account will be immediately suspended when you are no longer enrolled at SCA. For those students who graduate from SCA, one year after graduation, your account will be deactivated.
- Students should not email teachers or other students with personal email accounts.
- Your password should always be private information that only you and your parents know.

**Device Use**

- All devices should be used as educational tools/resources and never to harm other people, play games at school, or manipulate their work.
- The use of any technology for the purpose of cheating is prohibited.
- All copyright and trademark rights need to be followed.
- Notify your instructor or administrator immediately if you encounter inappropriate or offensive language, images, or messages.
- Students are not allowed to use mobile device cameras or recording apps at any time, unless permission has been granted by the supervising teacher, administrator, or technology team.
- Personalized screensavers, wallpapers, and protective covers are permitted on personally owned devices. Inappropriate or provocative images including, but not limited to, pornographic images, guns, weapons, inappropriate or threatening language, drugs, alcohol, or gang-related images are not permitted and are subject to disciplinary action.
- Students should only touch, use, or move their own device. If it is necessary to touch, use, or move another student's device, you need to have their permission prior to doing anything or disciplinary action may occur.
- Reckless usage and handling of any technology device or computer equipment may result in the student being held financially responsible for damage to equipment as well as disciplinary action.
- It is the student's responsibility to report any individual who is treating any equipment roughly, accessing areas on the SCA network or the Internet that are inappropriate, or trying to intentionally destroy any programs or properties.

**For Secondary International Students**

- Secondary students have the ability to print work at SCA at the cost of \$.10 per page to be charged to their family FACTS account.
- Students are allowed one cell phone and a Chromebook which will be registered with IT the department. The school will configure the Chromebook for classroom use and settings should not be changed by the student.
- Students should not use alternate Internet sources (i.e., 3G, 4G LTE, personal hotspot, etc.), install VPN apps, or use VPN login tools that bypass the school's network.
- Any app or other personal software application that is found to be malicious to the network or violates these technology guidelines will need to be removed or uninstalled.
- Using iMessage, FaceTime, WeChat, Kakao, WhatsApp, Social Media, and texting on your devices during school hours is not permitted.
- SCA recommends your device never leave your sight unless secured in your locker but at the least in your backpack or bag.

- SCA recommends that you never loan your device to another student.
- Junior high students will daily check out and check in a school-issued Chromebook. No personal devices are to be used at school.

### **For School-Owned Chromebooks (Junior High)**

- Seventh graders with no lunch detentions may take their assigned Chromebook home during the spring semester.
- Students should not Powerwash or reset their Chromebook.
- Students should only sign into their Chromebook using their school-issued Google account (@realschoolspirit.org).
- Students are expected to accept the responsibility of caring for their Chromebook just as they would any textbook or other school-issued item.
- All Chromebooks need to be kept in the same condition as when they were checked out (i.e., no personal stickers or labels, no software, apps, games, downloaded or installed).
- SCA will maintain Chromebooks unless there is damage due to accident, abuse, or misuse.
- Seventh grade students will pick up their Chromebook each morning and return it at the end of each school day from the Learning Commons cabinet.
- Junior High students are expected to return their Chromebook to the Learning Commons cabinet by 4 p.m. each day. Consequences for not returning their Chromebook are as follows:
  - First time - students will receive a warning
  - Second time - lunch detention in the office
  - Third time - meeting with the principal, lunch detention in the office
  - Fourth time - other possible consequences

### **Administrative Expectations**

Students should understand that the use of the network and devices while at school is a privilege. Students are responsible for displaying behavior that reflects godly digital citizenship. General school rules for behavior and communication apply, especially as communications on the network are often public in nature. The user is responsible for personal actions in accessing and using the school's network, SCA technology resources, and/or personal devices while on campus.

### **Consequences for Poor Choices**

Teachers, administrators, and the technology team may revoke personal use of any equipment at any time if a student is found to be in violation of any part of this agreement. Possible discipline may include and is not limited to:

- The device may be taken to the office. If so, the student or parent will be allowed to pick up the device at the end of the school day. (In some cases, only a parent may pick up the device.)
- The student may be suspended from their device for a period of time.
- The student may receive an after school detention.
- Student participation in a conference with the teacher, administrator, and parent/guardian.

The administration will have final authority over the student's privilege to use SCA technology resources or personally owned devices on campus and may exercise additional actions, depending on the severity of the infraction(s). Repeated offenses may incur a more severe penalty.

All questions concerning this contract should be directed to the administration.

As a parent or guardian of an SCA student, I have read the SCA Student Technology Contract. I will go over it with my student. I understand that this agreement will be kept on file at the school and that my child will be required to follow all tenets of this document.

# SCA Technology Use Student Contract

## Acknowledgement Page

As a parent or guardian of a student at SCA, I have read the Technology Use Student Contract. I will go over it with my student. I understand that this agreement will be kept on file at the school and that my child will be required to follow all tenets of this document.

Please sign one document per child.

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Parent/Guardian Name (printed)

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Parent/Guardian Signature

---

Date

As a user of the SCA campus technology network, I agree to comply with the above stated rules and to use the network in a constructive manner.

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Student Name & Grade (printed)

---

Student Signature

---

Date

# INTERNATIONAL STUDENT TUITION AND FEE SCHEDULE



2024-25 TUITION AND FEES	AMOUNT	DUE DATE
TOTAL for Junior High (grade 8)	\$29,800*	Due upon acceptance (no later than July 1)
TOTAL for High School (grades 9-12)	\$31,740*	Due upon acceptance (no later than July 1)

*\*Includes enrollment fee, curriculum fee, medical insurance, and homestay fee. Sending organizations may have additional fees.*

There is a 10% discount on tuition only for a second student in the family who is applying to attend the same year.

I understand that tuition and fees are payable in full in accordance with the above-reference due dates in order for my student to attend classes. I further understand that there is NO REFUND of tuition and/or fees should my student withdraw, transfer, be dismissed, or fail to attend.

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date

## **BANK STATEMENT**

A bank statement verifying a sufficient balance to pay for tuition and fees must accompany this application.

## **MEDICAL INSURANCE**

The SCA International Student medical coverage is through LowerMark and is a 12-month plan.

## **HOMESTAY FEE**

A 10-month, monthly stipend is paid to the Host Family for any portion of the month the student is present in their home.

## **ADDITIONAL FEES**

Depending on participation, additional fees may include, but are not limited to, the following:

Athletic Fees (vary per sport)	\$100-\$350	Classes for College Credit	\$295
Sports Pictures (optional)	\$25	(approximate for 3 college credits)	
Yearbook (optional)	\$35	Dual Credit Curriculum Fee	\$50
Choir Apparel	\$70	(for each dual credit class)	
Ensemble Apparel	\$40-\$100	Lunch	\$3.85
Senior Mission Trip	\$400-\$700	(drinks are an additional 50¢-75¢)	

## **CHROMEBOOK**

Each student is required to purchase a Chromebook before school starts.

# STUDENT QUESTIONNAIRE

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Student's Name: \_\_\_\_\_ Date: \_\_\_\_\_

Student's Age: \_\_\_\_\_ Country of Origin: \_\_\_\_\_

Student's Email: \_\_\_\_\_

WeChat/Kakao/WhatsApp/Skype Username: \_\_\_\_\_

## **U.S. EXPERIENCE**

Why do you want to live and study in the United States? Please check all that apply:

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Grow personally               | <input type="checkbox"/> Become more independent          | <input type="checkbox"/> Academics        |
| <input type="checkbox"/> Spiritual growth              | <input type="checkbox"/> Explore a new culture            | <input type="checkbox"/> For fun          |
| <input type="checkbox"/> Increase language proficiency | <input type="checkbox"/> Participate in school activities | <input type="checkbox"/> Form friendships |
| <input type="checkbox"/> Prepare for college           | <input type="checkbox"/> Experience American life         |   |
| <input type="checkbox"/> Discover new places           | <input type="checkbox"/> Other _____                      |   |

How do you hope to benefit from your experience in the United States?

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What would you say is your primary reason for studying abroad?

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Have you ever traveled to the United States or other countries? If so, please explain:

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## **FAMILY**

How would you describe your family? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Describe your relationship with the following family members:

Father \_\_\_\_\_

\_\_\_\_\_

Mother \_\_\_\_\_

\_\_\_\_\_

Brother(s) \_\_\_\_\_

\_\_\_\_\_

Sister(s) \_\_\_\_\_

\_\_\_\_\_

How would your family describe you? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Describe how you handle disagreements with your parents.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Describe your daily routine with your family and include what you do on weekends. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



## PERSONALITY

Check the traits that best describe your personality.

- |  |                                      |   |  |
|--|--------------------------------------|---|--|
| <input type="checkbox"/> Active        | <input type="checkbox"/> Friendly    | <input type="checkbox"/> Patient        | <input type="checkbox"/> Serious       |
| <input type="checkbox"/> Adaptable     | <input type="checkbox"/> Independent | <input type="checkbox"/> Pessimistic    | <input type="checkbox"/> Shy           |
| <input type="checkbox"/> Bright        | <input type="checkbox"/> Introverted | <input type="checkbox"/> Polite         | <input type="checkbox"/> Sincere       |
| <input type="checkbox"/> Calm          | <input type="checkbox"/> Kind        | <input type="checkbox"/> Rebel          | <input type="checkbox"/> Smiling       |
| <input type="checkbox"/> Cheerful      | <input type="checkbox"/> Lazy        | <input type="checkbox"/> Reliable       | <input type="checkbox"/> Studious      |
| <input type="checkbox"/> Critical      | <input type="checkbox"/> Mature      | <input type="checkbox"/> Respectful     | <input type="checkbox"/> Talkative     |
| <input type="checkbox"/> Communicative | <input type="checkbox"/> Motivated   | <input type="checkbox"/> Responsible    | <input type="checkbox"/> Well-mannered |
| <input type="checkbox"/> Considerate   | <input type="checkbox"/> Open-minded | <input type="checkbox"/> Selfish        | <input type="checkbox"/> _____         |
| <input type="checkbox"/> Emotional     | <input type="checkbox"/> Optimistic  | <input type="checkbox"/> Sense of humor | <input type="checkbox"/> _____         |
| <input type="checkbox"/> Extroverted   | <input type="checkbox"/> Organized   | <input type="checkbox"/> Sensitive      | <input type="checkbox"/> _____         |

Describe two strengths and two weaknesses:

Strengths \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Weaknesses \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What is your favorite thing to do? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Have you ever used narcotics/drugs? ☐ No ☐ Yes, \_\_\_\_\_

Do you smoke cigarettes, cigars, or a pipe? ☐ No ☐ Yes, \_\_\_\_\_

Do you drink alcoholic beverages? ☐ No ☐ Yes, \_\_\_\_\_

## **ACADEMICS**

What is your current grade level in school?

☐ 7<sup>th</sup>

☐ 8<sup>th</sup>

☐ 9<sup>th</sup> Freshman

☐ 10<sup>th</sup> Sophomore

☐ 11<sup>th</sup> Junior

☐ 12<sup>th</sup> Senior

How many hours a day do you attend school? \_\_\_\_\_

Do you attend a boarding school or stay at school during the week? \_\_\_\_\_

How many hours per day do you spend completing homework and studying? \_\_\_\_\_

What achievements have you accomplished in the last three years (include any special awards; i.e., music, academic, sports, etc.)

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What subjects are the most challenging for you? Do you feel a need for special tutoring in these subjects?

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Have you had a school year that was especially difficult? If so, please explain. \_\_\_\_\_

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In what school activities do you participate? \_\_\_\_\_

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How would you contribute to SCA? \_\_\_\_\_

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## **CULTURE**

In the following areas, what are your major concerns regarding your stay in the U.S.?

The Host Family \_\_\_\_\_  
\_\_\_\_\_

Community \_\_\_\_\_  
\_\_\_\_\_

High School \_\_\_\_\_  
\_\_\_\_\_

What do you expect from a host family? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

A host family will open their home to you and invite you to be part of their family. Building trust with your host family requires a lot of communication, honesty, and respect for the House Rules. What will you do to build a relationship with this family?

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You may come from a family that does not have a lot of rules. How will you handle new rules that you are not accustomed to and may not like?

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How do you help in your home? What chores do you have?

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In American homes, typically everyone has chores. This very practical training helps children learn to contribute to the family and be prepared for life after they leave the home. Your host parents will have chores for you that you may have never done. Why do you think it is important for you to have some responsibilities?

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How do you think you will handle doing some chores you are not used to?

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Do you have any dietary restrictions?

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How do you feel about pets in the home?

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How do you feel about sharing a bedroom?

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What electronic devices do you use? How many hours per day do you spend on electronics?

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Do your parents have any rules for technology use and safety? If so, what are they?

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In order to fully adapt to the school, host family, and culture and to be successful in language acquisition, you will need to limit your contact with family and friends to once a week. Why do you think you are prepared to do this?

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Describe two similarities and two differences between your country and the United States.

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As an ambassador of your country, what would you like to share about your culture with SCA students and families?

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After visiting the SCA website and learning about our Statement of Faith and Core Values, why do you think you would enjoy our Christian education environment?

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To be completed by school official or the overseas representative. Please type or print in black ink.

Student Name \_\_\_\_\_ Country \_\_\_\_\_

Name of Person Completing Form \_\_\_\_\_ Title \_\_\_\_\_

Name of School \_\_\_\_\_

Recommended U.S. grade-level placement (grade level placement cannot be guaranteed). ☐ 9 ☐ 10 ☐ 11 ☐ 12

Please list in English your country's grading scale next to the corresponding U.S. grades listed.

U.S. Grading Scale		Country Equivalent	Comments or Explanations
Excellent	A (90-94)		
Above average	B (80-89)		
Average	C (70-79)		
Below average	D (60-69)		
Failing	F (1-59)		

Please type or print in English the courses taken and the U.S. grade equivalent for past three years, starting with the current year. If final grades are not yet available for the current year, list most recent evaluation.

School Year \_\_\_\_\_ U.S. Grade Level \_\_\_\_\_

[illegible]

School Year \_\_\_\_\_ U.S. Grade Level \_\_\_\_\_

[illegible]

School Year \_\_\_\_\_ U.S. Grade Level \_\_\_\_\_

[illegible][illegible]

# MEDICAL INFORMATION



As part of the Summit Christian Academy application process for international students, a physical examination by a licensed doctor, who is not a family member, is required within one year of coming to the United States. Please have your student's physician provide the following information:

## PLEASE PRINT

Student's Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_

## PHYSICIAN'S VERIFICATION

1. Are you the above-named applicant's regular doctor? ☐ Yes ☐ No
2. How long have you known/treated the applicant? \_\_\_\_\_ years

## PHYSICAL EXAMINATION

Gender: ☐ Male ☐ Female Hair Color: \_\_\_\_\_ Eye Color: \_\_\_\_\_  
Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Blood Pressure: \_\_\_\_\_ Pulse: \_\_\_\_\_  
Visual Acuity: Right \_\_\_\_\_ Left \_\_\_\_\_ Hearing: Right \_\_\_\_\_ Left \_\_\_\_\_

## MEDICAL HISTORY

Please check any of the following disorders, infections, conditions applicant has experienced:

- |  |   |  |  |
|--|---|--|--|
| <input type="checkbox"/> Digestive               | <input type="checkbox"/> Muscular               | <input type="checkbox"/> Tuberculosis        | <input type="checkbox"/> Diabetes                  |
| <input type="checkbox"/> ADD/ADHD                | <input type="checkbox"/> Cancer                 | <input type="checkbox"/> Frequent Headaches  | <input type="checkbox"/> Gastrointestinal Concerns |
| <input type="checkbox"/> Anxiety                 | <input type="checkbox"/> Pertussis              | <input type="checkbox"/> Frequent Nosebleeds | <input type="checkbox"/> Seizures                  |
| <input type="checkbox"/> Panic Attacks           | <input type="checkbox"/> Wears Glasses/Contacts | <input type="checkbox"/> Hearing Problems    | <input type="checkbox"/> Skin Disorders            |
| <input type="checkbox"/> Asthma                  | <input type="checkbox"/> Chicken Pox            | <input type="checkbox"/> Cardiac             | <input type="checkbox"/> Pneumonia                 |
| <input type="checkbox"/> Diphtheria              | <input type="checkbox"/> Congenital             | <input type="checkbox"/> Mumps               | <input type="checkbox"/> Surgeries                 |
| <input type="checkbox"/> Appendicitis            | <input type="checkbox"/> Measles                | <input type="checkbox"/> Kidney/Bladder      | <input type="checkbox"/> Hepatitis                 |
| <input type="checkbox"/> Blood/bleeding disorder | <input type="checkbox"/> Convulsion             | <input type="checkbox"/> Hospitalizations    | <input type="checkbox"/> Vision problems           |
| <input type="checkbox"/> Rubella                 | <input type="checkbox"/> Neurological           | <input type="checkbox"/> Eating Disorder     | <input type="checkbox"/> Emotional Problems        |

Please provide further explanation regarding any of the above conditions that have affected the student. Include dates, cause of surgeries, lasting effects, medications, treatments still required, etc.

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Does the applicant currently have any allergies? ☐ Yes ☐ No If yes, please explain

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Does the applicant currently take any medication? ☐ Yes ☐ No

If yes, list medications, dosage, how often administered, and reason for taking.

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Has the applicant been advised to have surgery, which has NOT been done? ☐ Yes ☐ No

If yes, please provide explanation. \_\_\_\_\_  
\_\_\_\_\_

Are there any restrictions to the student's participation in physical education and/or sports? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Does the applicant have medical conditions, physical limitations and/or mental health conditions of which the school should be aware? (Failure to provide health information releases the school from all liability.\*) \_\_\_\_\_

\_\_\_\_\_  
*\*If your child has a special needs health issue, we may request a meeting with our Health Clerk to verify that we can adequately meet those needs.*

In your professional opinion, what is the general condition of the student's health?

☐ Excellent

☐ Good

☐ Fair

☐ Poor

I, the undersigned, have reviewed the **medical history** of the applicant, given a thorough **physical examination**, and certify that **immunizations** and all medical information has been noted and/or included on/with this form and that nothing relevant has been omitted.

Physician's Signature & Stamp: \_\_\_\_\_

Physician's Name (Printed): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Country: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Date: \_\_\_\_\_



## PARENTAL PERMISSIONS

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I give permission for the school to administer the following to my child(ren) for minor aches and pains (please check all that apply):

- |   |                                    |
|---|------------------------------------|
| <input type="checkbox"/> Tylenol  | <input type="checkbox"/> Ibuprofen |
| <input type="checkbox"/> Benadryl for allergy symptoms or allergic reaction                             |                                    |
| <input type="checkbox"/> Tums (for relief of gastric distress without elevated temperature or vomiting) |                                    |

I give permission for the school to administer the following topical ointments to my child(ren) as needed (please check all that apply):

- |   |  |
|---|--|
| <input type="checkbox"/> Benadryl Cream | <input type="checkbox"/> Antibiotic Ointment |
| <input type="checkbox"/> Caladryl       | <input type="checkbox"/> Hydrocortisone      |

### Authorization for Emergency Medical Treatment

I understand that the information given above will be shared with appropriate school staff to provide for the health and safety of my child. I authorize school personnel to obtain emergency medical care for my student in the event the host parent cannot be reached. I understand the cost of medical attention and ambulances are my responsibility. SCA is equipped with prefilled epinephrine auto syringes that can be administered in the event of severe allergic reactions that cause anaphylaxis.

### Immunization Record

All students must provide documentation of an up-to-date complete official immunization record (from former school, health department, or doctor's office) including month, day, and year of each immunization as part of the enrollment process. The documentation must include the student's full name and date of birth.

For children beginning kindergarten, required immunizations should be administered according to the current Advisory Committee on Immunization Practices schedule, including all spacing. <https://www.cdc.gov/vaccines/schedules/index.html>

To remain in school, students "in progress" must have an Immunization in Progress form (Imm.P.14) on file, which indicates the appointment date for needed immunizations and must receive immunizations as soon as they become due. <https://www.cdc.gov/vaccines/schedules/index.html>

Religious and medical exemptions are allowed. The appropriate exemption card must be on file. You can acquire this form through your family doctor or the Health Department.

Unimmunized children are subject to exclusion from school when outbreaks of vaccine-preventable diseases occur.

**I affirm that all the information provided is true and correct to the best of my knowledge.**

Parent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent's Name (Printed): \_\_\_\_\_

# RECORD OF IMMUNIZATIONS



All students must present documentation of up-to-date immunization status including month, day, and year of each immunization before attending Missouri Schools. Please complete this form AND attach a copy of the applicant's immunization record.

Student's Family Name (Exactly as shown on your passport)

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Given Names (Exactly as shown on your passport)

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Birth Date: Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

## MANDATORY IMMUNIZATIONS (must include the month/day/year)

VACCINE	1 <sup>ST</sup> Dose	2 <sup>nd</sup> Dose	3 <sup>rd</sup> Dose	4 <sup>th</sup> Dose	5 <sup>th</sup> Dose
DTaP/DTP/DT					
Tdap (8 <sup>th</sup> Grade & Up)					
TB					
IPV (Polio)					
MMR					
Hepatitis B					
COVID-19 <i>type of vaccine</i> _____					
*Varicella					

\*A parent/guardian or MD or DO may sign and submit a written statement documenting the month, day, and year of previous varicella (chickenpox) disease.

## OTHER IMMUNIZATIONS/VACCINATIONS (must include the month/day/year)

VACCINE	1 <sup>ST</sup> Dose	2 <sup>nd</sup> Dose	3 <sup>rd</sup> Dose	4 <sup>th</sup> Dose	5 <sup>th</sup> Dose

# PERMISSIONS FORM

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Signature of parents is required on the permissions below even if the student is over 18 years of age.

## MEDICAL TREATMENT CONSENT FORM

TO ANY HOSPITAL AND/OR PHYSICIAN ON THE STAFF THEREOF:

Name of Minor: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ who is in the physical custody of

Name of Caretaker (Host Family): \_\_\_\_\_

Summit Christian Academy and you are hereby authorized to furnish medical care, treatment, and/or hospitalization including the use of local or general anesthetic, sedation, or analgesia to above named minor, at the request of the above caretaker acting on behalf of said minor, without further written or other authorization from the undersigned parent(s) or legal guardian(s) of said minor child.

\_\_\_\_\_  
Signature of Parent(s)

\_\_\_\_\_  
Date

## CONSENT TO RESIDE WITH HOST FAMILY

As the legal parents of \_\_\_\_\_ with a date of birth of \_\_\_\_\_

we, \_\_\_\_\_ and \_\_\_\_\_

consent to above said child to attend Summit Christian Academy as a non-immigrant student. We hereby declare that he/she has our permission to live with a host family approved by Summit Christian Academy. We hereby affirm that we have delegated to the host family the responsibility to act on our behalf in all matters concerning our child and the school.

\_\_\_\_\_  
Signature of Parent(s)

\_\_\_\_\_  
Date