

GV CHRISTIAN SCHOOL

The Pursuit of God, Knowledge, Compassion & Leadership

Let us introduce ourselves...

GV Christian School operates as a ministry of GV Christian Center. We are a private Christian school with very high academic and spiritual standards. The school is operated as an exempt school under the provision of NRS 394.211 and as such is exempt from the provisions of the Private Elementary and Secondary Education Authorization Act. Each year as we have strived to be the best Christian school in the United States, our students' test scores have continued to rise. Our school tested, on an overall basis, two to four grades above the national norm.

Located in Green Valley, a suburb of Henderson, Nevada; GV Christian School has earned and maintained an excellent reputation for quality Christian education in the community. The mission of our school is to train Christian young people to achieve their fullest potential spiritually, academically and emotionally. All of our faculty members are Christians and have a call on their life, to educate, mentor and train young people. Our faculty has a desire to be of service to both parents and students. The administration is dedicated to providing an academic environment that is safe and challenging for students. Everyone that comes to GV Christian School will be challenged both academically and spiritually and should feel loved and cared for as we strive to maintain our excellent standards.

GV Christian School admits students of any race, color and national origin to all rights, privileges, programs and activities accorded or made available to the students at the school.

Our Motto

"The Pursuit of God, Knowledge, Compassion and Leadership."

Our Goal

It is our passionate goal to be the best Christian school in the United States. This goal is at the heart of every policy we make and every program that we offer. We believe this goal is completely attainable over the next few years as we continually strive to be the best. It is our goal to provide an academic and spiritual environment that would challenge our students to achieve their academic best, as well as to be spiritually and emotionally maturing at an advanced pace.

Our Purpose...

GV Christian School will prepare and provide each student an opportunity to succeed in the four areas listed below:

1. Pursue God: To develop spiritually mature and active Christians who are followers of Christ and are capable of defending and articulating their faith. It is our aim to instill in our students the desire and ability to develop a lifestyle of spiritual growth; and to prepare them to successfully live out a faith that is vibrant, living, and expressive.
2. Pursue Knowledge: To prepare students to enter the college of their choice as confident, academically advanced individuals ready to succeed at all levels of higher education. It is also our goal to educate students with a global worldview that will prepare them to succeed in an international marketplace.
3. Pursue Compassion: To provide an atmosphere where students can experience, express, and exhort others to a life of compassion. Every student will be given opportunities and also challenged to demonstrate compassion in their interaction with friends, family, faculty, and the community.
4. Pursue Leadership: To mentor today and tomorrow's leaders in whichever field of study or career the student chooses to pursue. It is our goal to prepare each student to meet the challenges and successes in life as a healthy follower of Christ, capable of living a life of integrity, excellence, and fortitude. Enabling our students to be world leaders.

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Dear Parents,

In our desire to be the best Christian school in the nation we have high expectations for our students. We believe that all students will rise to the level of expectations set before them. The standards that we have in place are attainable and we believe our GV Christian School students are capable of greatness.

The pursuit of God, knowledge, compassion and leadership are the foundations of what we believe provides excellence in academics. Education is not only in the classroom. This is why we provide an opportunity for students to participate in science camps, field trips, service projects, weekly chapel services, spiritual emphasis week, sports, student council, National Junior Honor Society, National Honor Society and various other forms of leadership. The objective of our instructional program is to enable students to be thoroughly prepared for the college of their choice. We work hard to instill an “. . . and then some” mentality among our students. We teach the philosophy to always go above and beyond what is expected.

Teachers at GV Christian School are faithful, dedicated and loving as they challenge and disciple students to achieve their very best. In doing this we provide interactive lessons to reach all types of learners, short and long term projects to develop time management skills, and use the media to teach life lessons. We are more than just a team of educators, we are a team working with parents to help mold and shape our students into adults that strive to change the world.

We take the responsibility of giving your child a well-rounded education very seriously. We know that choosing your child's school is an important decision and we look forward to working with you.

. . . and then some,



Stephanie Smith
Jr. & Sr. High Principal
GV Christian School



gv christian center
look forward to church

Dear Parents:

I am excited to present to you a school of excellence designed to help you and your family to confront the issues your child will face in their future. GV Christian School was formed to prepare your child for their future in at least three ways. These three steps are based on the Biblical standard, by which Jesus grew as a child when Luke said, "And Jesus grew in **wisdom**, and **stature**, and **favor** with God and men."

PREPARATION

To **prepare** the student to attend the college of their choice through advanced academic development. We want to raise the level of confidence and self-esteem of your child so they feel secure and adequate, to apply and compete at any higher institute of education in the nation.

SPIRITUAL DEVELOPMENT

To **develop** your child spiritually by helping them to examine the Christian faith. This examination will include such topics as apologetics, creation vs. evolution, theology, and comparative religious studies. These studies will be designed to help your child face the humanistic agenda they will encounter once in college, graduate school, or in their chosen career, in an attempt to destroy their faith. Invited and approved guest lecturers will help provide the foundation for this goal.

EMOTIONAL DEVELOPMENT

To guide **emotional** development and maturity in the context of family. The basis for this goal will be the Biblical values and principles of healthy family relationships. This development is designed to help equip your child to have healthy families in their future. This development will also be designed to help equip them in learning to deal and lead the challenging people they will face in their future careers, church ministries, and communities. Their goal will include family involvement through activities and encouraging communication among family members.

I do not know of another Jr. and Sr. High School in the nation that is providing this service in their communities. We are not looking for perfect students or families. We are looking for students and families that desire to grow in balanced academic, spiritual, and emotional endeavors to prepare for the future. GV Christian School is committed to working with you and your child to further academic, spiritual and emotional excellence.

Congratulations on expressing your interest in what I believe will be one of the very best investments you will ever make.

In His Service,

Gary Morefield
Lead Pastor

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GV Christian School 6th-8th Tuition and Fees Schedule 2025-2026

<u>Fee</u>	<u>Amount</u>	<u>Due</u>	<u>Description</u>
Registration	\$495.00	At time of registration	The registration fee covers the administrative cost of enrolling students, screening of students, etc., and is a <u>non-refundable</u> and <u>non-transferable</u> fee, unless the student fails the entrance exam.
Entrance Testing Fee	\$25.00	At time of testing	NEW STUDENTS ONLY must take an entrance exam to determine eligibility for entering GVCS. Due at the time of testing payable by check or money order.
Tuition	\$8,868.00	Beginning 06/01/25	<p>\$739.00 due on the 1st of every month for twelve months beginning June 1st and ending May 1st. A \$50.00 late fee will be assessed per student if tuition is not paid by the 5th of each month.</p> <p>Tuition includes technology and the use of our personal networked laptop and software for the school year, all curriculum books, science lab supplies, art program and supplies, school field trips, yearbook, spirit shirt, ACSI student activities, advanced technology, music program, Principal's List, P.E. equipment, Field Day, Honors Night, Iowa/CogAt testing, and in part or all: Hume Lake Outdoor Ed, Mt. Palomar Leadership and Science Camp and Student Council activities (excluding school dances). *Tuition does not include any required credit recovery courses.</p>

Optional Fees Schedule 2025-2026

<u>Fee</u>	<u>Amount</u>	<u>Due</u>	<u>Description</u>
Safe Key	\$5.00 Morning/ \$5.00 Afternoon \$15.00 \$25.00	Weekly for previous weeks usage Early Dismissal Days During School Breaks	Safe Key is available from 6:00am -6:00pm. Payment for this service is due each Wednesday by close of business for the previous week's usage. If there is a Safe Key balance that is 2 weeks behind, the student(s) will not be able to attend school until the balance is paid in full
Sports Fee (For team sport participation only)	Varies	If and when your student makes a team	A fee will be charged <u>per sport, per student</u> . This fee covers league registrations, coaching stipend, referees, gymnasium rentals, liability insurances, team trophies & sports banquets. We offer basketball, cross-country, flag football, cheerleading, soccer and volleyball. Aktivate, sport physicals, and travel are separate costs.

All fee and tuition payments are non-transferable and non-refundable.

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GV Christian School 9th-12th Tuition and Fees Schedule 2025-2026

Fee	Amount	Due	Description
Registration	\$495.00	At time of registration	The registration fee covers the administrative cost of enrolling students, screening of students, etc., and is a <u>non-refundable</u> and <u>non-transferable</u> fee, unless the student fails the entrance exam.
Entrance Testing Fee	\$25.00	At time of testing	NEW STUDENTS ONLY must take an entrance exam to determine eligibility for entering GV Christian School. Due at the time of testing payable by check or money order.
Tuition	\$9,756.00	Beginning 06/01/25	<p>\$813.00 due on the 1st of every month for twelve months beginning June 1st and ending May 1st. A \$50.00 late fee will be assessed per student if tuition is not paid by the 5th of each month.</p> <p>Tuition includes the cost of our personal networked laptop lease and software for the school year, all curriculum books, science lab supplies, art program and supplies, school field trips, yearbook, spirit shirt, advanced technology, music program, Principal's List, P.E. equipment, Field Day, Honors Night, graduation ceremony, and Iowa/CogAt testing, high school trips in part or all (locations vary and additional cost may apply) and Student Council activities (excluding school dances). *Tuition does not include any required credit recovery courses.</p>
"Grad" Package	\$275.00 Seniors Only	At time of registration	This fee covers 25 graduation announcements, 25 name cards, 1 senior sweatshirt, 1 senior t-shirt, 1 cap and gown tassel unit, 1 diploma cover and diploma.

Optional Fees Schedule 2025-2026

Fee	Amount	Due	Description
Safe Key	\$5.00 Morning/ \$5.00 Afternoon \$15.00	Weekly for previous week's usage Early Dismissal Days	Safe Key is available from 6:00am - 6:00pm. Payment for this service is due each Wednesday by close of business for the previous week's usage. No full day Safe Key available. If there is a Safe Key balance that is 2 weeks behind, the student('s) will not be able to attend school until the balance is paid in full
Sports & Uniform Fee (For team sport participation only)	Varies	If and when your student makes a team	A fee will be charged <u>per sport, per student</u> . This fee covers league registrations, coaching stipends, referees, gymnasium rentals, liability insurances, team trophies, tournament entries, & sports banquets. We offer baseball, basketball, cheerleading, cross-country, golf, track and field and volleyball. Register My Athlete, sport physicals, and travel are separate costs.
AP® Exam	\$98.00 (approx.)	09/01/25	This fee will be charged if your child chooses to sign up for the AP® Exam.
PSAT	\$20.00 (approx.)	09/01/25	This fee will be charged if your child chooses to sign up for the PSAT.

All fee and tuition payments are non-transferable and non-refundable.

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Be on the lookout for these upcoming events:

Back to School Night - This is an opportunity before the first day of school for you and your child to get to know the teachers and procedures of each class and the school. Your child will receive their class schedule, locker number and combination on this night. We ask that every student attend in order to ensure a great first day of school.

Family Fun Night - A fun filled night of kickball tournaments, games, face painting and photo ops. Bring your friends and family to join in on the fun!

Trunk-or-Treat - We provide a safe night of trick-or-treating, food, bounce houses, candy, music and costume contests that are offered as an outreach to the community and our school family.

Weekly Chapels - Chapel is every Wednesday in our Back Lot. This is a time where we worship, play games, and hear God's Word. Parents are always welcome to join us for all chapel services (except small group chapel days). Please call the school at 702-685-6090 for chapel times as they can vary due to small groups, joint chapels and guest speakers.

Class Trips (parents are welcome to attend, but there is limited space):

- **Hume Lake** – 6th through 7th grades attend the Outdoor Ed program at Hume Lake Christian Camps in the Sequoia National Park. They spend 5 days attending interactive science classes, chapel services, and many fun outdoor activities.
- **Mt. Palomar** – 8th grade attends a leadership and science camp at Mt. Palomar Christian Camp located in the mountains of southern California. They spend 5 days attending interactive classes, chapel services, and many fun outdoor activities.
- **Washington DC** – 9th grade explores our nation's capital and experience as much as possible within the 5 day excursion. Activities include the Smithsonian, laying a wreath at the Tomb of the Unknown Soldier, National Monuments, Memorials, Capitol tour, Arlington National Cemetery, and more (sites may vary upon availability).
- **Missions Trip** – 10th and 11th graders travel (varies upon year) to assist missionaries working with children and families in Tecate, Mexico. This opportunity gives our students an appreciation for what they have, instills personal growth in all aspects of their life, provides service hours accrued on their transcript, allows them to utilize the Spanish they have learned in school and helps them gain a Biblical world-view.
- **Senior Trip** – 12th grade travels to a location conducive to our seniors (no parents permitted on the senior trip).

Holiday Parties - Sign-ups are available throughout the school year for you to help us celebrate the various holidays including: Thanksgiving, Christmas, St. Patrick's Day, Easter, etc.

Val-O-Grams - Valentines with messages are sold by our National Honor Society to all GV Christian students and families. They are delivered to students on Valentines Day during the school day and are a fundraiser for our high school trips. You don't want to miss this opportunity to brighten your student's day!

Speech Meet - Students are required to participate in this all day event that enhances their public speaking abilities and is the quarter project for English.

STEMapalooza - This is an opportunity for students to be creative and use the scientific concepts that they have gained thus far. Depending on grade level students are given the opportunity to participate in a Catapult Launch, Invention Convention, Project Humpty Dumpty, Project Green, Pinewood Derby, and Rocket Launch (projects are subject to change). These various activities are presented to our younger students and are a quarter project grade for all students in grades 6th through 12th grades.

Art Festival - Art students shine while displaying selected pieces of art from their portfolios. Don't miss this amazing gallery!

Homecoming - A BIG event for GV Christian School! Show your school spirit all week while competing in class competitions and come to the game to support your school. GO GUARDIANS!

Homecoming Dance - A semi-formal event for students in high school hosted by our Student Council.

Winter Formal - A semi-formal dance for our students in grades 6th-8th hosted by our Student Council.

Father/Daughter Dance - A semi-formal event for all daughters and their father figures.

Prom - A semi-formal dance for our students in high school hosted by our Student Council.

End of the Year Honors Night and Lip Sync Battle - This is a time where we honor the student from each grade who stood out above the rest, to see the school year through your child's eyes and to cheer for your child's class lip sync performance.

Graduation - Come show your support to our graduating class being honored for their accomplishments!

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6th Grade Supply List

Please make sure to keep your child provided with these items throughout the school year; they are essential for their learning experience.

- 3 – Package of No. 2 pencils (wood or mechanical)
- 2 – Red Pens
- 2 – Highlighters
- 1 - Scissors
- 1 - Package Color Pencils
- 1 - Backpack (no characters or wheels please – must fit in locker)
- 1 – Pencil/Supply Bag
- 1 - Large Eraser
- 2 - Pkg Notebook Paper (college ruled)
- 2 - Loose Leaf Paper
- 2 - Folders with pockets on either side
- 1 – 2 ½” - 3” 3-Ring Binder
- 8 - Dividers for Binder (with labels and double sided pockets)
- 1 - Transparent Ruler - must have inches and centimeters (clear preferred)
- 2 - Reams of Copy Paper (for printing during the year to be kept in locker.)
- 1 - Plastic Protractor (with small center hole in base)
- 1 - Earbuds or headphones
- 2 - Glue Sticks
- 1 - Clorox Wipes

Art

- Art shirt or apron with name.
- Clorox wipes
- 52” x 70” flannel backed tablecloth

****NO SPIRAL NOTEBOOKS****

7th-12th Grade Supply List

Please make sure to keep your child provided with these items throughout the school year; they are essential for their learning experience.

- 1 – Binder to organize classes (Subject Dividers for Binder)
- 1 - Geometry Set (9th)
- 1 - TI-84 Calculator (9th-12th)
- 1 - Package Graphing Paper
- 2 - Packages College Ruled Notebook Paper
- 3 - Composition Notebooks (Spanish, Math and Science)
- 1 - Graph Paper Composition Notebook (Physics)
- 1 - Box of 24 Colored Pencils or Crayons (Twistable preferred)
- 1 - Package Pencils (if mechanical, extra lead)
- 1 - Black or Blue Pen
- 1 - Red Pen
- 1 – Earbuds or headphones
- Computer Hard Cover Case to protect Laptop (Macbook Air 13”)
- 1 -USB or USB-C Flash Drive
- 2 - Reams of Copy Paper (for printing during the year to be kept in locker.)
- Safety Goggles for Science
- Scissors
- Glue Stick

Art Students

- Art shirt or apron with name.
- 5 ½ x 8 ½ Spiral Bound Sketchbook no lines or purchase for \$5 at the school
- Clorox wipes
- 52” x 70” flannel backed tablecloth

Worship Collective Students

- 1 Inch Binder with alphabet dividers.
- 1/4 Inch Guitar Cable (Guitar Players Only)
- Earbud headphones

****NO SPIRAL NOTEBOOKS****



Required Summer Reading

Dear Parents and Students,

All good college preparatory programs have students working on something over the summer to keep their minds active. The required summer reading for each grade level is listed below (books can be purchased or checked out from the local library). All students are required to have read the designated novels by the first day of school and be ready for discussions, quizzes and tests over the assigned novel. A reading comprehension test on each of the required readings is administered during the first week of school. Students are expected to read carefully and with understanding and reread if necessary.

As always if you have any questions please don't hesitate to email Mrs. Smith, Jr. & Sr. High Principal at ssmith@gvchristian.com.

We hope that you all have a fantastic summer!

6th Grade: ***Island of the Blue Dolphin*** by Scott O'Dell

7th Grade: ***The Magician's Nephew*** by C.S. Lewis

8th Grade: ***The Outsiders*** by S.E. Hinton

9th Grade: ***Of Mice and Men*** by John Steinbeck

10th Grade: ***Animal Farm*** by George Orwell

11th Grade: ***1984*** by George Orwell

12th Grade: *Choose one of the following:*

- ***The Awakening*** by Kate Chopin
- ***Ceremony*** by Leslie Marmon Silko
- ***Passing*** by Nella Larsen

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WELCOME TO GV CHRISTIAN SCHOOL



Get your official uniforms at:
gvcsguardiangear.com

Orders can be shipped to your home address or sent to the Elementary front desk for pick-up.

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Holiday Calendar

2025-2026

Updated: 3/13/25

2025

August 8 (F)	Back to School Night
August 11 (M)	Classes Begin
September 1 (M)	Labor Day - NO SCHOOL - NO SAFE KEY AVAILABLE
October 16 (TH)	Parent/Teacher Conferences - 11:15am Dismissal - SAFE KEY AVAILABLE
October 17 (F)	Parent/Teacher Conferences - NO SCHOOL - SAFE KEY AVAILABLE (6am-6pm)
October 10 (F)	End of First Grading Period
October 31 (F)	Nevada Day Observed - NO SCHOOL - NO SAFE KEY AVAILABLE
November 10-11 (M, T)	Veterans Day Observed - NO SCHOOL - NO SAFE KEY AVAILABLE
November 24-26 (M-W)	Thanksgiving Break - NO SCHOOL - SAFE KEY AVAILABLE (6am-6pm)
November 27-28 (Th-F)	Thanksgiving Observed - NO SAFE KEY AVAILABLE
December 19 (F)	End of Second Grading Period
December 22 (M)	Christmas Break Begins - SAFE KEY AVAILABLE (6am-6pm)
December 24-25 (W, TH)	Christmas Observed - NO SAFE KEY AVAILABLE

2026

January 1 (TH)	New Year's Day Observed - NO SAFE KEY AVAILABLE
January 5 (M)	Classes Resume
January 19 (M)	MLK Jr. Day - NO SCHOOL - NO SAFE KEY AVAILABLE
February 16 (M)	President's Day - NO SCHOOL - NO SAFE KEY AVAILABLE
March 6 (F)	End of Third Grading Period
March 16-20 (M-F)	Spring Break NO SCHOOL - SAFE KEY AVAILABLE (6am-6pm)
March 23 (M)	Classes Resume
April 2 (TH)	No School - Teacher Inservice - SAFE KEY AVAILABLE (6am-6pm)
April 3 & 6 (F, M)	Easter Break - NO SCHOOL - NO SAFE KEY AVAILABLE
April 7 (T)	Classes Resume
May 22 (F)	End of Fourth Grading Period
	Last Day of School - 11am Dismissal
	NO SAFE KEY AVAILABLE (CAMPUS CLOSED after 11am)
	High School Graduation - 4:00pm
May 25 (M)	Memorial Day - NO SCHOOL - NO SAFE KEY AVAILABLE
May 26 (T)	Summer Camp Begins

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Registration Packet GV Christian Jr. & Sr. High School

We are delighted that you have chosen to apply to enroll your child at GV Christian School. Our Jr. & Sr. High offers a seven-year program covering the 6th through 12th grades. The matriculation process for GV Christian School has been expanded to better match up prospective students with the goals and mission of our advanced program. If you have any questions during the enrollment process, please feel free to call the registrar's office at (702) 454-4056.

The following items are included:

- _____ Purpose of GV Christian School
- _____ A Word from the Pastor and the Principal
- _____ Tuition and Fees Schedule
- _____ Upcoming Events
- _____ Supply List
- _____ Holiday Calendar
- _____ GVCS High School Timeline for Graduation
- _____ Required Summer Reading
- _____ Registration Form
- _____ Emergency Contact & Custody Information Form
- _____ Financial Agreement Form
- _____ School Last Attended/Special Information Form
- _____ Request for Academic and Behavior Records (new students)
- _____ Student Academic Accommodations Form
- _____ Publicity Permit
- _____ Standard of Conduct Agreement/Student Covenant
- _____ Field Trip Release Form
- _____ Independent Student Release Form
- _____ Student Driver Agreement
- _____ Student/Parent Handbook Acknowledgement
- _____ Technology Agreement located at <http://www.gvchristianschool.com/index.php/6-12/resources>
- _____ Health Statement/Athletic Physical Form
- _____ Student Statement of Faith
- _____ Teacher's Recommendation
- _____ School Director/Principal Recommendation
- _____ Volunteer FBI Background Check Information,

In order to secure a place for your child **all** forms must be fully completed and signed, as well as the following received:

- Student's Statement of Faith
- Registration fees must be paid
- Copy of student's most recent report card and SAT scores (new students)
- Copy of updated shot record (new students)
- Copy of birth certificate (new students)
- Health Statement (new students)
- Copy of any legal documentation necessary for guardianship/custody, if applicable
- School Director's Recommendation
- Teacher's Recommendation

You will be notified if your child is accepted or denied entry into GV Christian Jr. & Sr. High School.
We look forward to working with you in your child's education.

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GV Christian School 6th-12th Registration Form

Student Information (Please Print)

Last Name First Name Middle Name

Gender Date of Birth Ethnicity Previous School

Church Denomination Allergies

Students T-Shirt Size, adult sizes only (Please circle one) Small Medium Large X Large XX Large

Application is for the **2025-2026** school year for the grade indicated below:

6th Grade _____	Safe Key	AM	PM
7th Grade _____	Monday	---	---
8th Grade _____	Tuesday	---	---
9th Grade _____	Wednesday	---	---
10th Grade _____	Thursday	---	---
11th Grade _____	Friday	---	---
12th Grade _____			

Parent/Guardian Information

Parent 1

(Please Print)

Parent 2

Name: _____

Name: _____

Relationship: _____

Relationship: _____

Address: _____

Address: _____

City: _____ ST _____ Zip _____

City: _____ St _____ Zip _____

Church: _____

Church: _____

Home Phone #: _____

Home Phone #: _____

Cellular Phone #: _____

Cellular Phone #: _____

E Mail Address: _____

E Mail Address: _____

Work Phone: _____ Ext. _____

Work Phone: _____ Ext. _____

Employer: _____

Employer: _____

Occupation/Title: _____

Occupation/Title: _____

License Plate Number: _____

License Plate Number: _____

OFFICE USE ONLY

Payment Type: _____

Acceptance Pending: _____

Charge Test Fee: _____

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Emergency & Authorized Escorts

Name: _____ Relationship: _____ Phone #: _____

License Plate Number: _____

Name: _____ Relationship: _____ Phone #: _____

License Plate Number: _____

Name: _____ Relationship: _____ Phone #: _____

License Plate Number: _____

Name: _____ Relationship: _____ Phone #: _____

License Plate Number: _____

In the event of an accident or illness to the child, I hereby authorize the operator of this child care facility to secure any necessary medical aid and/or treatment from:

Doctor: _____
Name Address Phone

Hospital/Clinic: _____
Name Address Phone

In the event I cannot be contacted immediately for notification or shall fail or refuse to remove the child affected with a communicable disease or other valid reason after notification of illness and request for removal of the child – I understand that the appropriate authorities may remove my child from the premises of the child care facility. Furthermore, I agree to be directly responsible for all costs and expenses connected with the examination, diagnosis, treatment and removal of my child.

Date: _____ Signature of Parent/Guardian: _____

Custody Information

Parents are: Married Mother deceased Mother remarried Separated
 Divorced Father deceased Father remarried Other

Who has legal physical custody of this child? _____

***What are the legal perimeters for the non-custodial parent to see or pick up the child?

***** (A copy of the legal paperwork provided by the court must be given to the school.) *****

If parents are divorced or separated, to whom should school correspondence be sent? _____

Who is financially responsible for this child? _____

What days of the week are spent with Dad? _____

What days of the week are spent with Mom? _____

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6th-12th Financial Agreement 2025-2026

Student Name

Grade

Annual Tuition

\$ _____

Annual tuition fees do not include days when school is not in session (i.e. Teacher In-Service days, Thanksgiving Break, Christmas Break, Easter Break, etc.). Safe Key may be provided for an additional fee. See yearly calendar and handbook for details. There is no vacation credit for school tuition accounts.

All registration fees and tuition are **non-refundable, non-transferable** and are due by their respective due dates (or at the time of registration if registering after the due dates). **Registration Fee:** \$495 is due at the time of registration. **“Grad” Package Fee:** \$275 is due at the time of registration for all seniors.

Monthly tuition payments are due on the 1st of each month, June through May, and are considered late after the 5th of each month. Any tuition account not paid in full by the 5th day of the month will be assessed a \$50 late fee per each unpaid tuition. If tuition is not paid in full, or if payment arrangements are not made by the 10th of the month, your child will not be able to attend class until the balance is paid. If class is not in session, your position will be released to a student on our waiting list beginning on the 11th of the month. Tuition will not be refunded for any reason.

Credit recovery may be required for new students in order to align with the Advanced Honors track for graduation. These credits must be recovered at an accredited institution either in summer school or in an online course at the parent’s expense. Any credit recovery courses should be determined during the entrance exam and interview, however it is reliant upon the academic records received from previous schools.

High school students who do not pass courses with a 70% or higher and middle school students who do not pass courses with a 60% or higher are required to retake the course at an accredited institution either in summer school or in an online course at the parent’s expense. If a student is placed on academic probation (below 70%) and continues not to meet the GPA requirement, they may not be eligible to continue their enrollment at GV Christian School.

The before and after school care program, Safe Key, is a charge of \$5 for morning Safe Key and \$5 for afternoon Safe Key per day, per child. This charge will be added to your account each day that your child is in Safe Key. Payments for this service are due each Wednesday by close of business for the previous week’s usage. A \$25 late fee per child will be charged for any Safe Key balance that has not been paid in full by Wednesday. If there is a balance that is 2 weeks past due, the student(s) will not be able to attend school until the balance is paid in full. If your child is still in Safe Key after 6:00 PM, a fee of \$1.00 per minute, per child, will be charged. The fee will be charged directly to your account. If a child is not picked up by 6:30 PM, unfortunately we are required to call Child Haven.

Additional fees such as Clubs, Sports Fees, Sports Uniform Fees, High School Class Trips, and our Lunch Bag program fees are due on or before their assigned due dates. This is not an all-inclusive list of additional services/fees. Please access your account weekly to stay current with your charges. If there is a balance that is 2 weeks behind, the student(s) will not be able to attend school until the balance is paid in full or payment arrangements have been made.

Returned payments will be assessed a \$30 returned payment fee. After two returned payments have been received, all future payments for the next 12 months will have to be paid by money order or cashier’s check. Online payment access will be revoked. We do not, under any circumstances, accept cash. This policy is strictly enforced.

My account must be current with no outstanding balance in order to register for re-enrollment, for report cards to be released, and for my child to participate in year-end activities.

If I withdraw my child, my balance must be paid in full in order to have my child’s records released. If I voluntarily withdraw my child for any reason, at any time, any monies paid toward tuition, registration are non-refundable and non-transferable.

In the event that an unpaid account goes to a collection agency, I understand that I will be responsible for all fees incurred, such as, but not limited to attorney’s fees, court costs, mailings, and any fees the collection agency charges.

I understand that this agreement is not an all-inclusive list of the policies and are subject to change. I understand that it is my responsibility to read and adhere to the policies outlined in the GV Christian School Parent/Student Handbook.

Parent 1 / Legal Guardian Name (Print)

SS #

Parent 2 / Legal Guardian Name (Print)

SS #

Parent 1 / Legal Guardian Signature

Date

Parent 2 / Legal Guardian Signature

Date

GV CHRISTIAN SCHOOL

The Pursuit of God, Knowledge, Compassion & Leadership

School Last Attended

School Name: _____ Phone #: _____

Address: _____ Fax #: _____

City: _____ State: _____ Zip: _____

Child's Name: _____ Grade: _____

Has this child repeated any grade? _____ If so, what grade? _____

Has this child attended this school previously? _____ If so, when? _____

Has this child ever been suspended? No____ Yes____ Has this child ever been expelled? No____ Yes____

Does this child have a learning disability or limitation that might require special professional assistance? _____

If yes, please describe _____

Reason for selecting this school: _____

How did you hear about GV Christian School? _____

Should you leave our school and you have a balance owing on your account, we will not forward your records.

SPECIAL INFORMATION

Does the child take prescription medicine regularly? Yes _____ No _____

If so, please list medication, frequency, and condition requiring it. _____

Has the child been hospitalized within the past year? Yes ____ No _____

If so, please give dates and reasons. _____

Has the child ever been treated for any nervous, mental, or emotional disorder? Yes _____ No _____

If so, give the name of the doctor or facility providing care and dates of care. _____

Do you attend church regularly? _____ If so, give name of church: _____

GV CHRISTIAN SCHOOL

The Pursuit of God, Knowledge, Compassion & Leadership

Request for Academic and Behavior Records

TO: _____

The student listed below has enrolled in our school. Please send copies of the academic records, including immunization and birth certificate, report cards, test scores, behavioral notices and special education records. Please include grades, credits and grade level at the time of withdrawal.

Please email your records to our director of admissions at cjohnson@gvchristian.com or mail your records to the address below:

GV Christian School Registrar's Office
711 Valle Verde Court
Henderson, NV 89014

<u>Last Name</u>	<u>First Name</u>	<u>MI</u>	<u>Date of Birth</u>	<u>Grade</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Comments _____

Parent Signature

Date

GV CHRISTIAN SCHOOL

The Pursuit of God, Knowledge, Compassion & Leadership

Student Academic Accommodations Form

Student Name _____

Grade _____

Parent Name _____

Does your child currently have an accommodation plan? ____Yes ____No

If yes, does your child have a (please mark one): ____504 ____IEP

Has your child been officially diagnosed with anything that we should be aware of? ____Yes ____No

If yes, please describe:

GV Christian School does its best to accommodate all student needs, but does not have special education resources. Parents work together with administration to come up with an accommodation plan that best suits the student's needs while maintaining reasonable expectations of teachers.

Please initial each line below:

_____ Parents who suspect their child may have an undiagnosed learning difficulty are expected to contact administration immediately

_____ Parents must provide official documentation of a diagnosis in order for an accommodation plan to be implemented

_____ Parents must schedule a meeting with administration as soon as possible to initiate an accommodation plan if one is not already in place

_____ Parents are expected to meet with administration at the start of each school year to update accommodation plans for each new school year

Parent Signature _____

Date _____

GV CHRISTIAN SCHOOL

The Pursuit of God, Knowledge, Compassion & Leadership

Standard of Conduct Agreement

Parent Agreement: It is understood that my child's enrollment at GV Christian School is a privilege and not a right; and that if at any time his/her conduct, academic progress, or cooperation with the school's authorities are not in compliance with the school's beliefs or requirements, the school reserves the right to terminate, at its discretion, my child's enrollment. I understand that choices I make or choices made by the student under my care may result in correction, restitution, or at last resort expulsion. All students identify with, dress in accordance with, and use the facilities associated with their biological gender. I will endeavor to encourage my student to live by the GV Christian School Parent/Student Handbook (the most updated copy is found on the parent Renweb account) and the Student Covenant, and seek the proper forgiveness, correction, and restitution when my choices or my child's choices break school policy.

I give permission for my child to take part in all school activities including sports programs and school-sponsored trips away from the school premises. I absolve the school from all liability in the event my child is injured at school or during any school activity.

I agree with the school's effort to train my child in the Bible and will encourage my child in this and in all other phases of instruction.

I pledge to be an active participant and support GV Christian School in its efforts to correct my child in accordance with the standards and expectations outlined in the Parent/Student Handbook. I understand that my child can be expelled if I do not adhere to the Parent/Student Handbook or if I do not support GV Christian School staff, teachers or administration.

If my child is voluntarily withdrawn or is requested to withdraw by the school, it is understood and accepted that no refund of registration fee nor tuition will be made.

I understand that GV Christian School is exempt from the provisions of the Private Elementary and Secondary Education Authorization Act.

Student Agreement: It is understood that my enrollment at GV Christian School is a privilege and not a right; and that if at any time my conduct, academic progress, or cooperation with the school's authorities are not in compliance with the school's requirements, the school reserves the right to terminate, at its discretion, my enrollment. I understand that choices I make may result in correction, restitution, or at last resort expulsion. I will endeavor to live by the GV Christian School Parent/Student Handbook (the most updated copy is found on the parent Renweb account) and the Student Covenant, and seek the proper forgiveness, correction, and restitution when my choices break school policy. I understand that my teachers, school staff, my parents, the school and church administration, and I must work as a team to help me succeed in my "Pursuit of God, Knowledge, Compassion, and Leadership".

I agree:

- To maintain a consistent Christian character of courtesy, kindness, morality, purity, honesty, and submission to authority.
- To refrain from action that might offend or appear to be ungodly. For example: swearing or abusive language, defiance of authority, lying, smoking, alcoholic beverages, promiscuity, drugs, and fighting.
- That students who are found to be out of harmony with school standards throughout their enrollment whether at home, school, or elsewhere, may be asked to withdraw from GV Christian School.

I understand that any student who is guilty of the following may be asked to withdraw or be expelled from GV Christian School:

- Willful disobedience
- Open defiance of authority
- The use of profanity or obscene language
- Stealing or cheating
- Abuse of property (parents will be responsible for the cost of damage)
- Mistreatment of others in any form
- Physically hitting or hurting another student, teacher or GV Christian employee

I understand there is a zero tolerance for any weapons, drugs or alcohol on school grounds and cause for immediate expulsion.

By signing this document I agree to follow and adhere to the Student Covenant, the Standard of Conduct Agreement and the Parent/Student Handbook. This document acknowledges that the school and home will be in unity.

Student Signature

Date

Parent Signature

Date

GV CHRISTIAN SCHOOL

The Pursuit of God, Knowledge, Compassion & Leadership

STUDENT COVENANT

I, _____, do hereby make the following covenant declaring my intention to do my
(printed student name)

best as a student at GV Christian School.

I will Pursue God:

- I will choose to follow Christ's teachings and learn to walk in His footsteps.
- I will obey God's commands.
- I will maintain a consistent Christian character of courtesy, kindness, morality, purity, honesty, respect and submission to authority.
- I will refrain from action that is ungodly or might offend and/or appear to be ungodly. As such I will refrain from any and all behaviors clearly outlined in the Bible as sin, and I will also abstain from activities, behaviors and places that, though they may not be blatant sin, may be deemed questionable.
- I will seek to have a heart that follows Christ and desire to be in "right" relationship with Him.
- I will be an active participant in chapel
- I will make every effort to attend a weekly Christian church service

I will Pursue Knowledge:

- I will value learning over a grade
- I will complete all assignments on time, correctly, and neatly
- I will discover how I best learn and use those skills to improve my education
- I will hold myself to high standards and endeavor to do my best, believing that I can do all things through Christ which gives me strength
- I will set my mind on things above and will be aggressive about keeping my mind pure

I will Pursue Compassion:

- I will honor peers, teachers, parents, and those in authority.
- I will practice a life of prayer that enables me to listen to how God would want me to express His love towards others.
- I will stand up for what is right and challenge the things that would bring harm to myself or others.
- I will be an active participant in acts of service and/or outreach projects.

I will Pursue Leadership:

- I will consistently display my best behavior and follow school rules.
- I will set an example for the school in speech, in conduct, in love, in faith and in purity
- I will, when I see others in danger of breaking the Parent/Student Handbook or Student Covenant, challenge them to choose to make the right decision.
- I will report students or actions that may cause harm to themselves or others.
- I will practice the Matthew 18 Principle when dealing with the offenses of others and I will not gossip.
- I will be confident, but will not exhibit a heart of pride.
- I will endeavor to be a leader in all areas of life and in any situation I may find myself.

I understand that attendance at GV Christian School is a privilege. I will work in cooperation with the faculty, staff, and administration of GV Christian School to pursue God, Knowledge, Compassion, and Leadership.

Student Signature

Parent Signature

Date

Date

GV CHRISTIAN SCHOOL

The Pursuit of God, Knowledge, Compassion & Leadership

Independent Student Release Form

I, _____, the parent/guardian of _____ give my
Name of parent and/or guardian (please print) Name of student (please print)

child permission to be released from GV Christian School at the close of each school day without being released to an adult. I understand and agree that my child is expected to immediately be in the care of a parent and/or guardian when he/she walks out the door when school is dismissed or has permission from me to walk home. I understand that my child is NOT permitted to wander on or near the GV Christian School campus.

I understand and agree that if I am not able to arrange pick up for my child then he/she must be checked into Safe Key by 3:30pm or within 20 minutes after the school day is dismissed or walk home at this time. I also understand and have full knowledge that if these guidelines are not followed my child will no longer be able to be released independently and then must be released to an approved adult on my contact list. I understand and agree that any violations of these guidelines can result in suspension and/or expulsion.

Below is an excerpt from the 6th-12th Parent Student Handbook:

Dismissal

All GV Christian School students in grades 6-12 are dismissed at 3:10pm. Any students still on campus at 3:30pm or 20 minutes after dismissal will be checked into Safe Key. All students are required to be picked up by an adult on the student pickup list, go to their after school club, walk home or check themselves into Safe Key at this time. Students are NOT permitted to wander the GVCS campus and Jr. & Sr. High students are NOT permitted at the main building unattended. An Independent Student Release Form must be signed permitting each child to be released at the close of each school day or the parent is expected to walk into the building and pick up their child. I understand that there are different guidelines regarding dismissal from Safe Key after students are at the main building and parents are required to come inside to pick up their children.

I am aware of the dangers of the amount of traffic on and around the GV Christian School campus and understand that my child is not permitted in or around the traffic flow. **I UNDERSTAND AND HEREBY AGREE TO ASSUME ALL OF THE RISKS WHICH MAY BE ENCOUNTERED BY MY CHILD BEING INDEPENDENTLY RELEASED.** I do, for myself and for my child, heirs and assignees, hereby irrevocably and unconditionally release, acquit and forever discharge GV Christian School, GV Christian Center, and its agents, employees, and volunteers from any and all liability, actions, causes of actions, claims, expenses, obligations and damages of any nature whatsoever, which I now have or which may arise in the future, in connection with my child being independently released or in any other associated activities including, but not limited to, any injury to my child or property, even injury resulting in death.

I further state that **I HAVE CAREFULLY READ AND UNDERSTAND THE FOREGOING RELEASE AND KNOW THE CONTENTS HEREOF AND I SIGN THE RELEASE AS MY OWN FREE ACT.** I understand that this is a legally binding agreement. By signing below I acknowledge and agree to adhere to the above mentioned policies.

Parent/Guardian Name (please print)

Parent/Guardian Signature

Date

Student Name (please print)

Student Signature

Date

GV CHRISTIAN SCHOOL

The Pursuit of God, Knowledge, Compassion & Leadership

Publicity Permit

Student's Name: _____ Grade: _____

Dear Parents,

Occasionally we have the opportunity to promote our school through community events and publications. In doing this we would like to use pictures of our school "in action". Please indicate below whether we may or may not use pictures that include your child.

I give my permission for GV Christian School to use my child's picture/portrait/photograph/video in materials to be published by GV Christian School. I grant GV Christian School a non-exclusive, royalty-free license to use the photographs in all forms and media, including composite or digitally enhanced modifications, for the purpose of advertising, trade or any other lawful purposes. I waive the right to inspect or approve the final product, and understand that no royalties or any other type of monetary compensation will be awarded to any individuals involved and that these images and/or videos may be used with no expiration date.

_____ Yes, you may use pictures of my child to promote GV Christian School.

_____ No, you may not use pictures of my child to promote GV Christian School.

Parent/Guardian Signature

Date

Student Signature

Date

GV CHRISTIAN SCHOOL

The Pursuit of God, Knowledge, Compassion & Leadership

Field Trip/Athletic Activities Release Form

I, the undersigned parent(s) or guardian(s), hereby give my child, _____, who is in _____ grade, permission to attend various field trips/athletic activities with GV Christian School, during the school year. I certify that my child is able to participate in any and all activities pertaining to any field trips. If my child has a medical condition, which may be relevant to a physician in the event of an emergency, I have listed them below. In the event that an emergency occurs, I may be reached at the telephone number listed below. If I cannot be reached within a reasonable period of time, as determined by school officials, or if immediate medical attention is required, I hereby authorize the school or the adult sponsor to make emergency medical decisions for my child. If there are any activities that I do not want my child to be involved in, I have listed them below.

I UNDERSTAND AND HEREBY AGREE TO ASSUME ALL OF THE RISKS WHICH MAY BE ENCOUNTERED ON SAID ACTIVITIES, INCLUDING ACTIVITIES PRELIMINARY AND SUBSEQUENT THERETO. I do, for myself and for my child, heirs and assignees, hereby irrevocably and unconditionally release, acquit and forever discharge GV Christian School, GV Christian Center, and its agents, employees, and volunteers from any and all liability, actions, causes of actions, claims, expenses, obligations and damages of any nature whatsoever, which I now have or which may arise in the future, in connection with my child's participation in the described activity or in any other associated activities including, but not limited to, any injury to my child or property, even injury resulting in death.

I expressly agree that this release, waiver, and indemnity agreement is intended to be broad and inclusive as permitted by the law of the state of Nevada and that if any portion thereof is held invalid it is agreed that the balance shall, notwithstanding, continue in full legal force and effect. This release contains the entire agreement between the parties hereto.

I further state that **I HAVE CAREFULLY READ AND UNDERSTAND THE FOREGOING RELEASE AND KNOW THE CONTENTS HEREOF AND I SIGN THE RELEASE AS MY OWN FREE ACT.** I understand that this is a legally binding agreement.

Medical conditions _____

Allergies/Physical restrictions _____

Instructions and Medications _____

I do not wish my child to participate in the following: _____

Telephone numbers where I may be reached in an emergency: _____

Parent/Guardian Signature

Date

GV CHRISTIAN SCHOOL

The Pursuit of God, Knowledge, Compassion & Leadership

Student Driver Agreement

The following is taken from our parent/student handbook:

Student Drivers

Students who drive to GV Christian School must abide by the same rules as adult drivers. Parking is permitted only in the student parking area. Once the student is at school, our campus is considered a closed campus and the student will not be permitted to leave until the end of the school day or by permission of administration and/or parent.

Parking Lot and Vehicle Violations

Please park in the designated parking areas only. **Please do not park in the drop off zone or in areas that will inhibit or interfere with traffic flow.** For the safety of our children, please adhere to a maximum speed of 5 MPH while on school property. For the safety of all, please enter and exit only through the appropriate, marked entrance and exit areas. Violation of the parking lot rules could result in a \$25.00 fine.

Closed Campus

GV Christian School is a closed campus. Students are to remain on school grounds during school hours, including lunch-time, passing times, and school activities. Students are only allowed off-campus if they are properly checked out by a parent/guardian. If this procedure is not followed, students will be considered truant and face immediate suspension with a required parent conference before the student is permitted back on the school campus or possible expulsion.

Automobile Searches

Students are permitted to park on GV Christian School premises as a matter of privilege, not of right. Permission to park on school property is granted only after the student driver, the owner of the vehicle, and the student's parent or guardian have signed written consent to allow search of that vehicle upon the school's request.

School authorities may perform periodic patrols of parking spots and conduct exterior inspections of students parking automobiles on school property. Interior searches of student vehicles can occur to determine if contraband or illegal materials are contained inside. Refusal to allow access to a vehicle at the time of search will be cause for terminating the privilege of parking on school property without further hearing.

License Plate #: _____ Make/Model: _____ Year: _____ Color: _____

Vehicle Owner: _____
Please Print

Signature

Date

Student Driver: _____
Please Print

Signature

Date

Parent: _____
Please Print

Signature

Date

GV CHRISTIAN SCHOOL

The Pursuit of God, Knowledge, Compassion & Leadership

Jr. & Sr. High Parent/Student Handbook Acknowledgement

The GV Christian School Parent and Student Handbook is found on the parent FACTS account or a hard copy may be obtained at our front desk.

My signature below indicates that I have read and understand the contents of the GV Christian School Parent and Student Handbook and agree to abide and adhere to all policies and procedures in which it contains. I understand it is updated periodically and I am responsible for reviewing it regularly.

Student's Name

Grade

Student's Signature

Date

Parent's Name

Date

Parent's Signature

Date

GV CHRISTIAN SCHOOL

The Pursuit of God, Knowledge, Compassion & Leadership

Health Statement

For students not involved in any school sports. To be updated yearly.

Child's Name: _____ Date of Birth: _____

Address: _____

Street Address

P.O. Box

City

State

Zip

Mother's Name: _____

Father's Name: _____

TO BE COMPLETED BY A PHYSICIAN OR RN:

Status of Child's Health:

____ Satisfactory

____ Other: _____

Allergies: _____

List any known conditions under treatment:

Is the child capable of adjusting to programs of the school facility?

Signature of Physician or RN

Date

Physician's Address

Phone

GV CHRISTIAN SCHOOL

The Pursuit of God, Knowledge, Compassion & Leadership

For students participating in school sports. To be updated yearly.

This form should be placed into the athlete's medical file and should **NOT BE SHARED** with schools or sports organizations.

■ PREPARTICIPATION PHYSICAL EVALUATION

HISTORY FORM

Note: Complete and sign this form (with your parents if younger than 18) before your appointment.

Name: _____ Date of birth: _____

Date of examination: _____ Sport(s): _____

Sex assigned at birth (F, M, or intersex): _____ How do you identify your gender? (F, M, or other): _____

List past and current medical conditions. _____

Have you ever had surgery? If yes, list all past surgical procedures. _____

Medicines and supplements: List all current prescriptions, over-the-counter medicines, and supplements (herbal and nutritional). _____

Do you have any allergies? If yes, please list all your allergies (ie, medicines, pollens, food, stinging insects). _____

Patient Health Questionnaire Version 4 (PHQ-4)

Over the last 2 weeks, how often have you been bothered by any of the following problems? (Circle response.)

	Not at all	Several days	Over half the days	Nearly every day
Feeling nervous, anxious, or on edge	0	1	2	3
Not being able to stop or control worrying	0	1	2	3
Little interest or pleasure in doing things	0	1	2	3
Feeling down, depressed, or hopeless	0	1	2	3

(A sum of >3 is considered positive on either subscale [questions 1 and 2, or questions 3 and 4] for screening purposes.)

GENERAL QUESTIONS (Explain "Yes" answers at the end of this form. Circle questions if you don't know the answer.)	Yes	No
1. Do you have any concerns that you would like to discuss with your provider?		
2. Has a provider ever denied or restricted your participation in sports for any reason?		
3. Do you have any ongoing medical issues or recent illness?		
HEART HEALTH QUESTIONS ABOUT YOU	Yes	No
4. Have you ever passed out or nearly passed out during or after exercise?		
5. Have you ever had discomfort, pain, tightness, or pressure in your chest during exercise?		
6. Does your heart ever race, flutter in your chest, or skip beats (irregular beats) during exercise?		
7. Has a doctor ever told you that you have any heart problems?		
8. Has a doctor ever requested a test for your heart? For example, electrocardiography (ECG) or echocardiography.		

HEART HEALTH QUESTIONS ABOUT YOU (CONTINUED)	Yes	No
9. Do you get light-headed or feel shorter of breath than your friends during exercise?		
10. Have you ever had a seizure?		
HEART HEALTH QUESTIONS ABOUT YOUR FAMILY	Yes	No
11. Has any family member or relative died of heart problems or had an unexpected or unexplained sudden death before age 35 years (including drowning or unexplained car crash)?		
12. Does anyone in your family have a genetic heart problem such as hypertrophic cardiomyopathy (HCM), Marfan syndrome, arrhythmogenic right ventricular cardiomyopathy (ARVC), long QT syndrome (LQTS), short QT syndrome (SQTS), Brugada syndrome, or catecholaminergic polymorphic ventricular tachycardia (CPVT)?		
13. Has anyone in your family had a pacemaker or an implanted defibrillator before age 35?		

BONE AND JOINT QUESTIONS		
	Yes	No
14. Have you ever had a stress fracture or an injury to a bone, muscle, ligament, joint, or tendon that caused you to miss a practice or game?		
15. Do you have a bone, muscle, ligament, or joint injury that bothers you?		
MEDICAL QUESTIONS		
	Yes	No
16. Do you cough, wheeze, or have difficulty breathing during or after exercise?		
17. Are you missing a kidney, an eye, a testicle (males), your spleen, or any other organ?		
18. Do you have groin or testicle pain or a painful bulge or hernia in the groin area?		
19. Do you have any recurring skin rashes or rashes that come and go, including herpes or methicillin-resistant <i>Staphylococcus aureus</i> (MRSA)?		
20. Have you had a concussion or head injury that caused confusion, a prolonged headache, or memory problems?		
21. Have you ever had numbness, had tingling, had weakness in your arms or legs, or been unable to move your arms or legs after being hit or falling?		
22. Have you ever become ill while exercising in the heat?		
23. Do you or does someone in your family have sickle cell trait or disease?		
24. Have you ever had or do you have any problems with your eyes or vision?		

MEDICAL QUESTIONS (CONTINUED)		
	Yes	No
25. Do you worry about your weight?		
26. Are you trying to or has anyone recommended that you gain or lose weight?		
27. Are you on a special diet or do you avoid certain types of foods or food groups?		
28. Have you ever had an eating disorder?		
FEMALES ONLY		
	Yes	No
29. Have you ever had a menstrual period?		
30. How old were you when you had your first menstrual period?		
31. When was your most recent menstrual period?		
32. How many periods have you had in the past 12 months?		

Explain "Yes" answers here.

I hereby state that, to the best of my knowledge, my answers to the questions on this form are complete and correct.

Signature of athlete: _____

Signature of parent or guardian: _____

Date: _____

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This form should be placed into the athlete's medical file and should **NOT BE SHARED** with schools or sports organizations.

■ PREPARTICIPATION PHYSICAL EVALUATION

PHYSICAL EXAMINATION FORM

Name: _____ Date of birth: _____

PHYSICIAN REMINDERS

- Consider additional questions on more-sensitive issues.
 - Do you feel stressed out or under a lot of pressure?
 - Do you ever feel sad, hopeless, depressed, or anxious?
 - Do you feel safe at your home or residence?
 - Have you ever tried cigarettes, e-cigarettes, chewing tobacco, snuff, or dip?
 - During the past 30 days, did you use chewing tobacco, snuff, or dip?
 - Do you drink alcohol or use any other drugs?
 - Have you ever taken anabolic steroids or used any other performance-enhancing supplement?
 - Have you ever taken any supplements to help you gain or lose weight or improve your performance?
 - Do you wear a seat belt, use a helmet, and use condoms?
- Consider reviewing questions on cardiovascular symptoms (Q4–Q13 of History Form).

EXAMINATION		
Height	Weight	
BP: / (/)	Pulse:	Vision: R 20/ L 20/ Corrected: <input type="checkbox"/> Y <input type="checkbox"/> N
MEDICAL	NORMAL	ABNORMAL FINDINGS
Appearance • Marfan stigmata (kyphoscoliosis, high-arched palate, pectus excavatum, arachnodactyly, hyperlaxity, myopia, mitral valve prolapse [MVP], and aortic insufficiency)		
Eyes, ears, nose, and throat • Pupils equal • Hearing		
Lymph nodes		
Heart ^a • Murmurs (auscultation standing, auscultation supine, and ± Valsalva maneuver)		
Lungs		
Abdomen		
Skin • Herpes simplex virus (HSV), lesions suggestive of methicillin-resistant <i>Staphylococcus aureus</i> (MRSA), or tinea corporis		
Neurological		
MUSCULOSKELETAL	NORMAL	ABNORMAL FINDINGS
Neck		
Back		
Shoulder and arm		
Elbow and forearm		
Wrist, hand, and fingers		
Hip and thigh		
Knee		
Leg and ankle		
Foot and toes		
Functional • Double-leg squat test, single-leg squat test, and box drop or step drop test		

^a Consider electrocardiography (ECG), echocardiography, referral to a cardiologist for abnormal cardiac history or examination findings, or a combination of those.

Name of health care professional (print or type): _____ Date: _____
 Address: _____ Phone: _____
 Signature of health care professional: _____, MD, DO, NP, PA or DC

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This form should be placed into the athlete's medical file and should **NOT BE SHARED** with schools or sports organizations.

■ PREPARTICIPATION PHYSICAL EVALUATION

ATHLETES WITH DISABILITIES FORM: SUPPLEMENT TO THE ATHLETE HISTORY

Name: _____ Date of birth: _____

1. Type of disability:		
2. Date of disability:		
3. Classification (if available):		
4. Cause of disability (birth, disease, injury, or other):		
5. List the sports you are playing:		
	Yes	No
6. Do you regularly use a brace, an assistive device, or a prosthetic device for daily activities?		
7. Do you use any special brace or assistive device for sports?		
8. Do you have any rashes, pressure sores, or other skin problems?		
9. Do you have a hearing loss? Do you use a hearing aid?		
10. Do you have a visual impairment?		
11. Do you use any special devices for bowel or bladder function?		
12. Do you have burning or discomfort when urinating?		
13. Have you had autonomic dysreflexia?		
14. Have you ever been diagnosed as having a heat-related (hyperthermia) or cold-related (hypothermia) illness?		
15. Do you have muscle spasticity?		
16. Do you have frequent seizures that cannot be controlled by medication?		

Explain "Yes" answers here.

Please indicate whether you have ever had any of the following conditions:

	Yes	No
Atlantoaxial instability		
Radiographic (x-ray) evaluation for atlantoaxial instability		
Dislocated joints (more than one)		
Easy bleeding		
Enlarged spleen		
Hepatitis		
Osteopenia or osteoporosis		
Difficulty controlling bowel		
Difficulty controlling bladder		
Numbness or tingling in arms or hands		
Numbness or tingling in legs or feet		
Weakness in arms or hands		
Weakness in legs or feet		
Recent change in coordination		
Recent change in ability to walk		
Spina bifida		
Latex allergy		

Explain "Yes" answers here.

I hereby state that, to the best of my knowledge, my answers to the questions on this form are complete and correct.

Signature of athlete: _____

Signature of parent or guardian: _____

Date: _____

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The Medical Eligibility Form is the only form that **should be submitted** to a school or sports organization.

■ PREPARTICIPATION PHYSICAL EVALUATION

MEDICAL ELIGIBILITY FORM

Name: _____ Date of birth: _____

- Medically eligible for all sports without restriction
- Medically eligible for all sports without restriction with recommendations for further evaluation or treatment of

- Medically eligible for certain sports

- Not medically eligible pending further evaluation

- Not medically eligible for any sports

Recommendations: _____

I have examined the student named on this form and completed the preparticipation physical evaluation. The athlete does not have apparent clinical contraindications to practice and can participate in the sport(s) as outlined on this form. A copy of the physical examination findings are on record in my office and can be made available to the school at the request of the parents. If conditions arise after the athlete has been cleared for participation, the physician may rescind the medical eligibility until the problem is resolved and the potential consequences are completely explained to the athlete (and parents or guardians).

Name of health care professional (print or type): _____ Date: _____

Address: _____ Phone: _____

Signature of health care professional: _____, MD, DO, NP, PA or DC

SHARED EMERGENCY INFORMATION

Allergies: _____

Medications: _____

Other information: _____

Emergency contacts: _____

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GV CHRISTIAN SCHOOL

The Pursuit of God, Knowledge, Compassion & Leadership

Student Statement of Faith

Please write an essay that incorporates the answers to the following questions:

(a separate sheet of paper may be used)

- When did you accept Jesus as your Lord and Savior?
- How do you live out your faith in Christ everyday (i.e. relationship with parents, friendships, work ethics, morals, beliefs, prayer, church attendance, etc.)?
- How are you changing because of your relationship with Jesus Christ?
- Why do you want to attend GV Christian School Jr. & Sr. High?

Student Name: _____

Date: _____

GV CHRISTIAN SCHOOL

The Pursuit of God, Knowledge, Compassion & Leadership

Teacher's Recommendation

Parent/Guardian: Please complete the top half of this form and turn it into the registrar's office.
Any recommendations not handled in this manner are voided.

Name of Applicant: _____

Applying for Grade: _____ Date: _____

Parent's Name: _____

Teacher: Please contact our GV Christian School Registrar's Office at (702)454-4056 if you have any questions. You can email your recommendation to our director of admissions at cjohnson@gvchristian.com or mail your recommendation to the address below:

GV Christian School Registrar's Office
711 Valle Verde Court
Henderson, NV 89014

Name of Referring School: _____

Address: _____

School Phone Number: _____

Number of years you have known this student: _____

Date Completed: _____

Please rate the student to the best of your ability	4	3	2	1
Treats Others With Respect	Exceptional	Good	Average	Below Average
Ability to Accept Responsibility	Exceptional	Good	Average	Below Average
Behavior/Attitude	Exceptional	Good	Average	Below Average
Character	Exceptional	Good	Average	Below Average
Leadership Ability	Exceptional	Good	Average	Below Average
Parental Support	Exceptional	Good	Average	Below Average
Academics	Exceptional	Good	Average	Below Average
Responsibility in Homework	Exceptional	Good	Average	Below Average

Additional Comments:

GV CHRISTIAN SCHOOL

The Pursuit of God, Knowledge, Compassion & Leadership

School Director's / Principal's Recommendation

Parent/Guardian: Please complete the top half of this form and turn it into the registrar's office.
Any recommendations not handled in this manner are voided.

Name of Applicant: _____

Applying for Grade: _____ Date: _____

Parent's Name: _____

Director/Principal: Please contact our GV Christian School Registrar's Office at (702)454-4056 if you have any questions.
You can email your recommendation to our director of admissions at cjohnson@gvchristian.com or mail your recommendation to the address below:

GV Christian School Registrar's Office
711 Valle Verde Court
Henderson, NV 89014

Name of Referring School: _____

Address: _____

School Phone Number: _____

Number of years you have known this student: _____

Date Completed: _____

Please rate the student to the best of your ability	4	3	2	1
Treats Others With Respect	Exceptional	Good	Average	Below Average
Ability to Accept Responsibility	Exceptional	Good	Average	Below Average
Behavior/Attitude	Exceptional	Good	Average	Below Average
Character	Exceptional	Good	Average	Below Average
Leadership Ability	Exceptional	Good	Average	Below Average
Parental Support	Exceptional	Good	Average	Below Average
Academics	Exceptional	Good	Average	Below Average
Responsibility in Homework	Exceptional	Good	Average	Below Average

Has this student even been expelled/suspended for their behavior? Yes _____ No _____

Additional Comments:

How to Obtain Your FBI Fingerprinting FD-258/Background Check for GV Christian

Our state licensing requires all school employees and volunteers that may be alone with children to be fingerprinted and background checked by the FBI. Thank you for your help in working together to keep our kids safe and keeping in alignment with state licensing!

1. Schedule an appointment to get fingerprinting done by clicking on the link below (select "**FINGERPRINTS ONLY**", **DO NOT** select Child Care Fingerprinting, that is for preschool): <https://www.cityofhenderson.com/government/departments/police/police-records>

Fingerprint and Registration Services

Fingerprint and registration services will be provided for Business License Applicants, Child Care Applicants, City of Henderson Employee Badges, City of Henderson Vendor Badges, Convicted Felon Registration and Sex Offender Registration only.

The City of Henderson Police Department asks that individuals needing these services arrive alone and abide by social distancing guidelines: any person being fingerprinted will be required to wear facial covering.

Those who must complete Sex Offender registration should print out and complete the required paperwork before arrival. If you are unable to print the required paperwork, please arrive with enough time to complete the paperwork before your appointment.

→You may schedule an appointment for these services at [QLESS](#).←

- a. Arrive on time to your appointment at (follow the signs for "Fingerprinting"):

Henderson Police Services Headquarters
223 Lead St., Henderson, NV 89015

- b. Pay \$10 using cash or card for your **FD-258** fingerprint card that you will obtain at the window. You **MUST use the FD-258** fingerprint card ONLY.

2. DO NOT attempt to complete all of the information on your **FD-258** fingerprint card before reviewing the instructions. There are strict instructions and codes for: hair color, eye color, gender and race that can be found by clicking on this link

https://accuratebiometrics.com/files/FD-258_card_w_instructions.pdf

REASON FINGERPRINTED/**Parents:** school volunteer **Staff:** Education

3. Complete the [Nevada Department of Public Safety Fingerprint Background Waiver](#), please print double sided (see below).

4. Complete page three of the [Identification File Request for State of Nevada Records of Criminal Form](#) (see below).

5. Obtain a money order or certified check for \$27 made out to Nevada Department of Public Safety.

6. Staple together the following items:

- a. FD-258 Fingerprint card
- b. Nevada Department of Public Safety Fingerprint Background Waiver (**obtain administrator signature**)
- c. Identification File Request for State of Nevada Records of Criminal Form
- d. Money order or certified check for \$27 made out to Nevada Department of Public Safety

7. **PARENTS:** Mail your stapled items to (DO NOT BEND YOUR FINGERPRINT CARD):

Department of Public Safety Records, Communications and Compliance Division
333 West Nye Lane, Suite 100
Carson City, NV 89706

STAFF: Turn in your stapled items to your administrator who will then submit your information through certified mail (DO NOT BEND YOUR FINGERPRINT CARD).

8. **What Happens Next:** If they find no Identity History Summary on file, you will receive a response by First-Class Mail via the U.S. Postal Service indicating that you have no prior arrest data on file at the FBI. If you do have an Identity History Summary on file, you will receive your Identity History Summary or "rap sheet" by First-Class Mail via the U.S. Postal Service.

9. Submit a copy of the response mailed to you from the FBI to the front desk in order to work or volunteer with children at GV Christian School.



Fingerprint Background Waiver

As an applicant who is the subject of a Federal Bureau of Investigation (FBI) fingerprint-based criminal history record check for a noncriminal justice purpose you have certain rights which are discussed below.

1. You must be notified by GV Christian School
(*name of requesting agency*) that your fingerprints will be used to check the criminal history records of the FBI and the State of Nevada.
2. If you have a criminal history record, the officials making a determination of your suitability for the job, license or other benefit for which you are applying must provide you the opportunity to complete or challenge the accuracy of the information in the record. You may review and challenge the accuracy of any and all criminal history records which are returned to the submitting agency. The proper forms and procedures will be furnished to you by the Nevada Department of Public Safety, Records Bureau upon request. If you decide to challenge the accuracy or completeness of your FBI criminal history record, Title 28 of the Code of Federal Regulations Section 16.34 provides for the proper procedure to do so:

16.34 - Procedure to obtain change, correction or updating of identification records. If, after reviewing his/her identification record, the subject thereof believes that it is incorrect or incomplete in any respect and wishes changes, corrections or updating of the alleged deficiency, he/she should make application directly to the agency which contributed the questioned information. The subject of a record may also direct his/her challenge as to the accuracy or completeness of any entry on his/her record to the FBI, Criminal Justice Information Services (CJIS) Division ATTN: SCU, Mod. D-2, 1000 Custer Hollow Road, Clarksburg, WV 26306. The FBI will then forward the challenge to the agency which submitted the data requesting that agency to verify or correct the challenged entry. Upon the receipt of an official communication directly from the agency which contributed the original information, the FBI CJIS Division will make any changes necessary in accordance with the information supplied by that agency.

3. Based on 28 CFR § 50.12 (b), officials making such determinations should not deny the license or employment based on information in the record until the applicant has been afforded a reasonable time to correct or complete the record or has declined to do so.
4. You have the right to expect that officials receiving the results of the fingerprint-based criminal history record check will use it only for authorized purposes and will not retain or disseminate it in violation of federal or state statute, regulation or executive order, or rule, procedure or standard established by the National Crime Prevention and Privacy Compact Council.

GV Christian School

5. I hereby authorize _____ (name of requesting agency), to submit a set of my fingerprints to the Nevada Department Public Safety, Records Bureau for the purpose of accessing and reviewing State of Nevada and FBI criminal history records that may pertain to me.

In giving this authorization, I expressly understand that the records may include information pertaining to notations of arrest, detentions, indictments, information or other charges for which the final court disposition is pending or is unknown to the above referenced agency. For records containing final court disposition information, I understand that the release may include information pertaining to dismissals, acquittals, convictions, sentences, correctional supervision information and information concerning the status of my parole or probation when applicable.

6. I hereby release from liability and promise to hold harmless under any and all causes of legal action, the State of Nevada, its officer(s), agent(s) and/or employee(s) who conducted my criminal history records search and provided information to the submitting agency for any statement(s), omission(s), or infringement(s) upon my current legal rights. I further release and promise to hold harmless and covenant not to sue any persons, firms, institutions or agencies providing such information to the State of Nevada on the basis of their disclosures. I have signed this release voluntarily and of my own free will.

A reproduction of this authorization for release of information by photocopy, facsimile or similar process, shall for all purposes be as valid as the original.

In consideration for processing my application I, the undersigned, whose name and signature voluntarily appears below; do hereby and irrevocably agree to the above.

Applicant's Name:
PLEASE PRINT _____
Last Name First Name Middle

ADDRESS:
PLEASE PRINT _____

Applicant's Signature: _____

Date: _____

Submitting Agency: GV Christian School

Address: 711 Valle Verde Court
Henderson Nevada 89014

Agency Representative:
PLEASE PRINT _____
Last Name First Name Middle

Agency Representative Signature: _____

Date: _____



Nevada Department of
Public Safety
DEDICATION PRIDE SERVICE

Department of Public Safety
Records, Communications and Compliance Division
333 West Nye Lane, Suite 100
Carson City, Nevada 89706

**IDENTIFICATION FILE REQUEST FOR STATE OF NEVADA
RECORDS OF CRIMINAL HISTORY FORM (DPS-006)**

I hereby authorize the State of Nevada Criminal History Repository to disclose criminal history record information, if any, within my identification file to me or the person or entity indicated below:

Please indicate the full name, address and contact information of the individual to be searched below (to be completed by the subject of the record).

All information is REQUIRED unless otherwise stated.
Type or Print legibly. Incomplete and/or unreadable documents may be returned.

First Name: _____ Middle Name: _____

Last Name: _____

Mailing Address: _____
Street Address

City, State and Zip Code

Contact Phone #: () _____

Contact Email: _____

Signature of Subject of Record Search / Date of Birth

Date Signed

Please ensure mailing address is valid and accurate. **Due to the confidential nature of this response, mail cannot be forwarded.**
If a change of address is needed a new DPS-006 Form will need to be submitted.

Respond to: GV Christian School

Mailing Address: 711 Valle Verde Court
Street Address

Henderson Nevada 89014
City, State and Zip Code

Please indicate reason for request: School

To obtain a duplicate response, the request must be within 90 days from the original date processed.

The use of this form is intended to safeguard the rights of the signatory and ensure the confidentiality of the requested information against non-authorized disclosure. The fingerprint card accompanying this request will be used to verify identity. **A \$27.00 certified check or money order made payable to the Department of Public Safety must accompany each request.**