

# MCS HOME SCHOOL PROGRAM APPLICATION: FAMILY INFO (1/3)

LAST NAME \_\_\_\_\_

SCHOOL YEAR \_\_\_\_\_

**FOR OFFICE USE**

Date Received: \_\_\_\_\_ Interview date: \_\_\_\_\_

Total Received: \$ \_\_\_\_\_ Cash \_\_\_\_\_ Check # \_\_\_\_\_

Date Notification Doc received: \_\_\_\_\_

\_\_\_ NEW APPLICANT

\_\_\_ RETURNING PARTNER

**Parents:**

(\*Father) \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

(\*Mother \_\_\_\_\_)

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

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

\*If there is more than one household involved in the home schooling/parenting, please explain and give the necessary contact info: \_\_\_\_\_

**Students enrolling in the program: (Please list from the oldest to the youngest)**

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_

Special Needs/Considerations? YES NO If YES, please explain: \_\_\_\_\_

Something interesting about your child: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_

Special Needs/Considerations? YES NO If YES, please explain: \_\_\_\_\_

Something interesting about your child: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_

Special Needs/Considerations? YES NO If YES, please explain: \_\_\_\_\_

Something interesting about your child: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_

Special Needs/Considerations? YES NO If YES, please explain: \_\_\_\_\_

Something interesting about your child: \_\_\_\_\_

Name*: _____ Age: _____ Grade: _____ _____ Special Needs/Considerations? YES      NO    If YES, please explain: _____ Something interesting about your child: _____ (*Additional children can be listed on the back of this page.)
--

## MCS- HOME SCHOOL PROGRAM APPLICATION: EXPECTATIONS (2a/3)

LAST NAME \_\_\_\_\_

SCHOOL YEAR \_\_\_\_\_

**GETTING TO KNOW YOU AND YOUR HOME SCHOOL JOURNEY:** (Returning partners may skip to the next section, PARTNERING WITH MCS HOMESCHOOL)

**Yes No** Have you homeschooled before? If so, how long? \_\_\_\_\_

What were your reasons for choosing to home school? \_\_\_\_\_  
\_\_\_\_\_

How would you describe your philosophy of home schooling? (Un-schooling, classical, enrichment, hands-on, etc.) \_\_\_\_\_  
\_\_\_\_\_

What are your long-term goals for home schooling? (College prep, career/apprenticeship directed, civil service minded adults, military, ministry, etc.) \_\_\_\_\_  
\_\_\_\_\_

**Yes No** Is your spouse supportive of home schooling?

**Yes No** Are your children enthusiastic home schooling?

How would you describe your journey thus far? \_\_\_\_\_  
\_\_\_\_\_

**PARTNERING WITH MCS Homeschool:**

How did you hear about the MCS Homeschool Program? \_\_\_\_\_  
\_\_\_\_\_

What do you hope to gain from your partnership with the MCS Homeschool Program? \_\_\_\_\_  
\_\_\_\_\_

**Yes No** Is your spouse in agreement with this partnership?

**Yes No** Are your children enthusiastic about the partnership?

Where would you like to serve your volunteer hours while partnering with us?

\_\_\_\_ On MCS campus

\_\_\_\_ At special events

\_\_\_\_ In the Homeschool study hall

\_\_\_\_ In the MCS classroom/ aide

\_\_\_\_ At a Homeschool activity

\_\_\_\_ At home school convention

\_\_\_\_ During achievement tests

\_\_\_\_ For the Homeschool

yearbook page

\_\_\_\_ Parent Teacher Fellowship

\_\_\_\_ Concession Stand at

Sporting Events

\_\_\_\_ Other:

## MCS HOME SCHOOL PROGRAM APPLICATION: EXPECTATIONS (2b/3)

LAST NAME \_\_\_\_\_

SCHOOL YEAR \_\_\_\_\_

Most of our services must be registered for at the beginning of the school year in order to meet the deadlines for participation. Please mark the services and activities you would like your family to participate in. Include the grades of the children you wish to participate.

- "FACTS" PAYMENT OPTION (monthly; special fee included)

- ON-CAMPUS CLASSES

CHILD	CLASS	GRADE

- Please use the backside for additional space

- TERRA NOVA ACHIEVEMENT TESTS (Must register in September to test in April) \$85/student

- YEAR END ASSESSMENTS with a certified teacher (Must register in September to assess in May/June)

- STRINGS PROGRAM (Must register in September to participate throughout the year)

- CHAPEL SERVICES (Elementary, weekly; JH/HS 3 days, monthly)

- ACSI: Spelling Bee (Grades 1-8; January)

- ACSI: Speech Meet (Grades 3-12; April)

- ACSI: Art Competition (Grades 3-12; March)

- PICTURE DAY (September, November, March; for inclusion in the yearbook)

- CURRICULUM PURCHASES through MCS discount (by April)

- CHRISTMAS SHOPPE

\_\_\_\_ Volunteering      \_\_\_\_\_ Shopping

- FIELD TRIPS

- Sports

CHILD	SPORT	GRADE

- Please use the backside for additional space

- PSAT (Juniors-October)
- ASVAB (military; Juniors-September)
- BOB JONES FINE ARTS FESTIVAL (high school by audition; September)
- JOB PERMITS (for high school students wanting their first job and needing a school verification)
- HIGH SCHOOL LOCK-IN at Chautauqua (first week of school)
- JR HIGH LOCK-IN (January)
- 8TH GRADE TRIP TO WASHINGTON (April)
- SENIOR GRADUATION
- 12TH GRADE TRIP
- JR/SR BANQUET
- FACILITY USE (GBC)

AREA (check)	GYM	ROOMS	CHAPEL	PICNIC AREA	OTHER

- CURRICULUM HELP
- TRANSCRIPT HELP

## MCS HOME SCHOOL PROGRAM APPLICATION: PROGRAM PARTNERSHIP ACKNOWLEDGEMENT (3/3)

*Please initial the following items indicating you understand the program guidelines and expectations.*

- \_\_\_\_\_ 1. I have read the MCS Homeschool Program Handbook and I understand this is a partnership in which I must take an active part with feedback and volunteer hours.
- \_\_\_\_\_ 2. I realize this is a ministry sponsored by Grace Baptist Church and Middletown Christian Schools. In such, neither GBC nor MCS can guarantee services beyond the initial year of enrollment.
- \_\_\_\_\_ 3. I have at least one year of experience in home schooling.\*  
 \_\_\_\_\_ \*I do not have at least one year of home schooling, but I will petition for special consideration.
- \_\_\_\_\_ 4. I understand that MCS is partnering with me, accepting me as the primary instructor and that the role may require me to participate in activities with my child as the teacher.
- \_\_\_\_\_ 5. I understand that as a partner, I will need to serve at least the requested number of hours to help support and encourage the continuation of the program.
- \_\_\_\_\_ 6. I understand that to participate in the program, I and my family members must comply with the policies and practices in place for the program and regular MCS families.
- \_\_\_\_\_ 7. I understand that the membership fee (also called the registration fee) for the program does not cover every service available to full-time MCS students and I may be responsible for additional fees related to some services (sports, tutoring, etc.).

- \_\_\_\_\_ 8. I understand that the membership fee (also called the registration fee) for the MCS Homeschool program provides special discounts for my family and I may be responsible for additional fees associated services (supply fees, participation fees, etc.)
- \_\_\_\_\_ 9. I understand that my membership fee (also called the registration fee) is nonrefundable once the services have been implemented and nontransferable for MCS full-time enrollment.
- \_\_\_\_\_ 9. As a partner in this program, I agree to provide intentional feedback regarding the program's operation and benefits.
- \_\_\_\_\_ 10. As a partner in this program, I agree to share a positive attitude toward the program's mission and objectives and will strive to represent our God, the school and the home school community well.
- \_\_\_\_\_ 11. I understand that the Home School Coordinator is the liaison for the home school program at Middletown Christian Schools. All program communications should start with her before addressing or contacting school or church personnel.
- \_\_\_\_\_ 12. I understand that the Homeschool program is a ministry of GBC and MCS to provide support and resources to the independent home school family educating under the OAC Section 3301-34 statutes. I am eligible for consideration for membership only if I can provide documentation that substantiates our family's compliance to this law for independent home schooling.

Father's Name \_\_\_\_\_ Mother's Name \_\_\_\_\_  
 Father's Signature \_\_\_\_\_ Mother's Signature \_\_\_\_\_  
 Date \_\_\_\_\_

**MCS Homeschool Program  
INTENDED HOME INSTRUCTION**

**YEAR** \_\_\_\_\_  
**FAMILY** \_\_\_\_\_  
**STUDENT'S NAME** \_\_\_\_\_  
**GRADE** \_\_\_\_\_

**GRADES K-8**

**PLAN FOR FULFILLING OH Administrative Code Section 3301-34**

Pursuant to OH Revised Code Section 3301-34, "Home education must be in accordance with law." This requires that home school families notify their local superintendent of their intentions, provide the necessary student identification and information, and assure the local school ... "that home education will include the following...(a) Language, reading, spelling, and writing; (b) Geography, history of the United States and Ohio; and national, state, and local government; (c) Mathematics; (d) Science; (e) Health; (f) Physical education; (g) Fine arts, including music; and (h) First aid, safety, and fire prevention." **Under the ORC definitions for home schooling, the parent or guardian is the primary provider of the instruction.**

<b>SUBJECT AREAS EXPTECTED TO COVER THIS YEAR</b>	<i>Please list the course title &amp; curriculum name</i>		
	<b>AT HOME</b>	<b>AT MCS</b>	<b>OTHER OUTSIDE INSTRUCTION</b>
(a) Language, reading, spelling, and writing			
(b) Geography, US history, Ohio history; national, state, and local government;			
(c) Mathematics			
(d) Science			
(e) Health			
(f) Physical education			
(g) Fine arts, including music			
(h) First aid, safety, and fire prevention (i.e. health)			

**EXTRA CURRICULAR ACTIVITIES:**

- Sports:
- Clubs:
- Fine Arts:
- Church:

**MCS Homeschool Program**  
**INTENDED HOME INSTRUCTION**

**YEAR** \_\_\_\_\_  
**FAMILY** \_\_\_\_\_  
**STUDENT'S NAME** \_\_\_\_\_  
**GRADE** \_\_\_\_\_

## GRADES 9-12

### PLAN FOR FULFILLING OH Graduating Classes of 2018 and Beyond

Under the OAC definitions for home schooling, the parent or guardian is the primary provider of the instruction. If your child is a 10<sup>th</sup>, 11<sup>th</sup> or 12<sup>th</sup> grader applying to the Helping Hands program, please provide a copy of your child's current high school transcript so we can advise you more effectively on graduation requirements and expectations.

OHIO GRADUATION REQUIREMENTS for 2018		<i>Please list the course title &amp; curriculum name of the subjects you expect to cover with your child this year.</i>		
UNITS REQUIRED	COURSES REQUIRED	AT HOME	AT MCS	OTHER OUTSIDE INSTRUCTION
4 units	English language arts	(1 unit)	(1 unit)	(1 unit)
½ unit	Health	(½ unit)	(½ unit)	(½ unit)
4 units	Mathematics	(1 unit)	(1 unit)	(1 unit)
½ unit	Physical education 120 hours	(½ unit)	(½ unit)	(½ unit)
3 units	Science	(1 unit)	(1 unit)	(1 unit)
3 units	Social studies (Must include ½ credit World History)	(1 unit)	(1 unit)	(1 unit)
5 units	Electives	(___ unit)	(___ unit)	(___ unit)
1 unit	Economics and financial literacy REQUIRED	(___ unit)	(___ unit)	(___ unit)
1 unit	Fine arts REQUIRED	(___ unit)	(___ unit)	(___ unit)
>22	TOTAL CREDITS			

### EXTRA CURRICULAR ACTIVITIES: