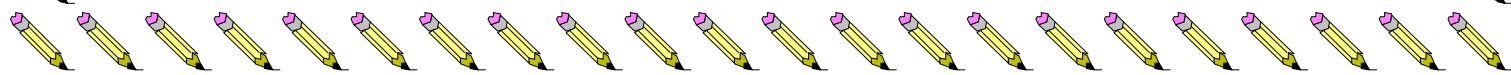


John Nevins Andrews School

Please bring the following items with you when you return to complete the Registration Forms:

- ✓ Emergency contact phone numbers
- ✓ Family physician name & phone number to fill out Medical Consent Form
- ✓ Health Insurance Information
- ✓ Student Medical Form (CURRENT immunization and physical)
- ✓ Student's last report card.
- ✓ Birth Certificate
- ✓ Student's social security number



JOHN NEVINS ANDREWS SCHOOL

2015-2016 *NEW STUDENT* REGISTRATION FORM

STUDENT INFORMATION:

Full Name: _____ Gender: _____ Grade: _____
 LAST, FIRST MIDDLE

Date of Birth: _____ SS# _____ Known Allergies: _____

Date of Student
SDA Baptism: _____ Church Membership: _____

FAMILY MEMBER ONE:

Relation to Student: _____ E-mail Address: _____
First Name: _____ Last Name: _____
Work Phone: _____ Mobile Phone: _____
Home Phone: _____ Occupation: _____
Church Membership: _____ Responsible for Bill? Yes No

FAMILY MEMBER TWO:

Relation to Student: _____ E-mail Address: _____
First Name: _____ Last Name: _____
Work Phone: _____ Mobile Phone: _____
Home Phone: _____ Occupation: _____
Church Membership: _____ Responsible for Bill? Yes No

ADDRESS OF STUDENT & PERSON RESPONSIBLE FOR BILL:

Street: _____ City: _____
State: _____ Zip Code: _____

EMERGENCY CONTACT (OTHER THAN YOURSELF):

First and Last Name: _____ Relation to Student: _____
Home or Mobile Phone: _____ Work Phone: _____

We understand **JOHN NEVINS ANDREWS SCHOOL** policies and regulations, and pledge our full cooperation and support.
PUBLICATION PHOTO AUTHORIZATION: JNA has our permission to use student photo in administration authorized publications.

Student Signature (Grades 5-8) Parent/Guardian Signature Today's Date

John Nevins Andrews School admits students of any race, color, ethnic background, country of origin or gender; proffers all the rights, privileges, programs and activities generally available to students; and, makes no discrimination on the basis of race, color, ethnic background, country of origin or gender in administration of education policies, application for admission, scholarship programs, and athletic or extracurricular programs.

JOHN NEVINS ANDREWS SCHOOL

2015-2016 *NEW STUDENT* REGISTRATION FORM (con't)

Who referred you to
JNA? _____

LIST NAMES & ADDRESSES OF SCHOOL(S) ATTENDED IN THE LAST TWO YEARS

School & Address	Grade	Reason For Withdrawal
------------------	-------	-----------------------

1. _____

2. _____

Has the student ever been suspended or dismissed from another school? _____ No _____ Yes If yes, please explain the reason:

Has the student ever received special help in school work, i.e. remedial instruction, learning disability, counseling, IEP, etc?
_____ No _____ Yes If yes, please explain:

How did you become acquainted with JNA?

Why are you interested in having your child attend JNA?

REFERENCES - Disregard if application is for Kindergarten

Please list three references *1 Immediate Past Teacher, 1 Other Teacher, 1 Guidance Counselor* which can be contacted regarding this application process. It is understood that all recommendations will be strictly confidential.

NAME

TELEPHONE

Immediate Past Teacher

1. _____

Other Teacher

2. _____

Guidance Counselor/Principal

3. _____

Students will pay their accounts or make satisfactory arrangements before beginning another semester. Students who owe on an account in one school will NOT be accepted by another school until the account is paid or the student has made satisfactory financial arrangements with the former school.

I (we) hereby authorize personnel of John Nevins Andrews School to contact the references listed above and the current school attending to obtain information regarding scholastic ability, behavior, character, responsibility and family responsibility. A copy of this authorization will be considered as effective and valid as the original. In addition, I (we) pledge our full cooperation and adherence to the rules and regulations of John Nevins Andrews School.

SIGNED BY PARENT/GUARDIAN

DATE

**John Nevins Andrews School
2015-2016**

**CONSENT FOR MEDICAL/SURGICAL CARE,
EMERGENCY TREATMENT AND CHILD'S MEDICAL INFORMATION**

In presenting my son/daughter for diagnosis and treatment

Date of Birth: _____

Name: _____ for _____ Grade _____

Mother Father Legal Guardian Son Daughter

of _____ years of age; hereby voluntarily consent to the rendering of such care, including diagnostic procedures, surgical and medical treatment, and blood transfusions, by authorized members of the hospital staff or their designees, as may in their professional judgment be necessary.

I hereby acknowledge that no guarantees have been made to me as to the effect of such examinations or treatment of my child's condition.

I have read this form and I certify that I understand its contents.

We/I hereby give our (my) consent to JOHN NEVINS ANDREWS SCHOOL who will be caring for our (my) child, _____, for the school year of 2015-2016 to arrange for routine or emergency medical care and treatment necessary to preserve the health of our (my) child.

We/I acknowledge that we are (I am) responsible for all reasonable charges in connection with the care and treatment rendered during this period.

Parent Name: _____ Family Physician: _____ Phone: _____

Address: _____ Pediatrician: _____ Phone: _____

_____ Surgeon: _____ Phone: _____

Telephone No: _____ Orthopaedist: _____ Phone: _____

Name of Health Insurance Carrier: _____ Other Specialist: _____ Phone: _____

_____ Known medical problems: _____

Group No.: _____ Child's allergies, if any: _____

Member No.: _____ _____

Signature: _____ Date of last tetanus booster: _____

(Mother, Father, or Legal Guardian)

Address: _____ Medicines child is taking and dosages: _____

School Witness: _____ Date: _____

IN CASE OF EMERGENCY I CAN BE REACHED AT: _____

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**John Nevins Andrews School
School Year 2015-2016**

STUDENT NAME _____ GRADE _____
Last First

GENERAL FIELD TRIP PERMISSION

I hereby give permission for my child to attend all field trips within the metropolitan Washington D.C. and Baltimore areas during the 2015-2016 school year.

I further agree that in the event of injury or accidental death, involved in any of the above mentioned activities, I will not hold the school or its personnel liable beyond that coverage provided by the school accident insurance policy when reasonable care and supervision has been provided. I understand that all field trip details will be sent home with my child prior to its occurrence.

If in the course of any such field trip, it becomes necessary for my child to seek and receive medical attention, the staff of the school have my permission to obtain such attention for my child. The doctor and/or hospital have my permission to commence with the necessary treatment.

If such care is needed, I can be contacted at (Work) _____

or (Home) _____. *I further will advise the school should such numbers change during the course of the school year.*

Parent/Legal Guardian Signature

Date

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JOHN NEVINS ANDREWS SCHOOL

School Dress Code

The John Nevins Andrews School dress code is designed to reflect a Christian lifestyle and to provide students with functional, appropriate attire for the classroom and other school sponsored activities.

A coordinated collection of clothing has been selected for student wear. This wardrobe provides a variety of options both in price and in clothing styles. Regardless of the occasion, the student should follow these basic guidelines:

ALL CLOTHING SHOULD BE CLEAN, MODEST, CORRECTLY SIZED, AND IN GOOD REPAIR.

All shirts must fit the Dress Code colors (**white, navy blue, and burgundy**).

First-eighth grade must have their shirts tucked in.

Visible layers need to be in the school dress code colors (**white, navy blue, and burgundy**).

MARK ALL CLOTHING: Student names should be written on ALL clothing.

FIELD TRIP DRESS: Every student **MUST HAVE** a burgundy top with the JNA logo. Students will **NOT** be allowed to go on field trips if they do not have a **BURGUNDY TOP WITH LOGO**. The burgundy top makes the student easily identifiable as part of the group and helps to ensure a safe field trip. Dress code for overnight trips is determined by the sponsors.

LENGTH POLICY: Jumpers, skirts, and shorts are to be no more than the student's own fist width above the back of the knee. Skorts may be worn for grades Kindergarten through third grade only.

SHOES, SOCKS, STOCKINGS: Shoes, solid white and solid blue color socks and **stockings/tights must coordinate with the outfit** and be clean and properly fastened. For safety, footwear must enclose and protect the entire foot. **Leggings** and shoes that contain wheels are not allowed.

BELTS: Solid colored plain belts are required for clothing with belt loops. Belts should be black, brown, or white.

HEADWEAR: Unless otherwise stated, no hats, bandanas, caps, hoods or other headgear are to be worn inside the school building.

JEWELRY: Non-functional jewelry (metal, plastic, rubber, leather, or cloth) of any kind, including rings, earrings, bracelets, necklaces or friendship bands etc. is not permitted at any school sponsored function on or off campus. Jewelry will be taken from the student. Confiscated items may be picked up in the office by a parent or legal guardian. The school takes no responsibility for loss of confiscated items.

OUTER GARMENTS: Outer garments are to be worn **OUTSIDE ONLY**. Messages on outer wear such as jackets and coats, must comply with Christian standards. Jackets, coats, and hoodies may not be worn in the classrooms. Only Dress Code sweaters or sweatshirts may be worn in the classrooms on cold days.

HAIR: Extreme hair styles such as unnatural hair color, Mohawks, and shaving designs, are inappropriate for school.

COSMETICS: Makeup or nail polish that gives the student an unnatural appearance is not acceptable for school wear.

FAILURE TO COMPLY: Penalties for failing to comply with the school dress code will include reminders, referrals, and detentions. Questions about exceptions should be directed to the administration. **Parents will be called to bring clothing that complies with the school dress code.**

AFTER SCHOOL CARE/BASKETBALL GAMES, AND OTHER SCHOOL SPONSORED ACTIVITIES: Unless otherwise announced, students must continue to wear their uniform during after school care, while they are spectators at after school basketball games, and at other school sponsored activities.

The list of school clothing pieces includes:

MUST BE PURCHASED FROM RISSE BROTHERS

(5112 Berwyn Road, College Park- 301-345-0700)

Polo w/JNA logo-long/short sleeve*	(Burgundy, Navy Blue, and White) <u>ALL SHIRTS MUST HAVE A LOGO</u>
Sweater/cardigan/pullover w/JNA logo	(Burgundy)
P.E. Uniforms (3 rd – 8 th grade)*	(Navy)

*All students must have these items.

CAN BE PURCHASED FROM RISSE BROTHERS OR OTHER SOURCES:

Skirts/Jumpers – Slit front or drop waist only	(Navy Blue, Khaki)
Skorts (Grades K-3 only)	(Navy Blue, Khaki)
Turtleneck Polo – NO EMBLEMS	(Navy Blue, White) Can be worn <u>underneath</u> logo shirt
Oxford Shirts – long or short sleeve	(Navy Blue, White)
Pants/Slacks* NO JEANS	(Navy Blue, Khaki)
Walking Shorts NO JEANS	(Navy Blue, Khaki)
Sweater/Sweatshirts	(Navy Blue, White, Burgundy)

*Slacks are to be plain front or pleated. No cargo pants. **No burgundy plaid jumpers or skirts.**

*No **tight** pants are allowed.

DRESS FOR PHYSICAL EDUCATION

ALL STUDENTS are required to wear soft soled shoes for P.E. class. For safety, keys worn on chains around the neck must be kept inside students' clothing.

KINDERGARTEN – SECOND GRADE do not change for gym. Students who wear skirts to school must have a pair of shorts on underneath.

THIRD – EIGHTH GRADE must wear the required P.E. uniform purchased from Risse Brothers. Students out of uniform will not participate. This will affect their P.E. grade. The 5K Run/Walk shirts and the JNA anniversary shirts can be purchased at school and worn for P.E. classes.

RISSE BROTHERS

9700 Martin Luther King Jr. Highway Suite B
Lanham, MD 20786
Telephone: 301-220-1985 Fax: 301-220-0368
Rissebrothers.com (School code: JO 1044)

Monday, closed*

Tuesday, 10:00 a.m. to 7:00 p.m.

Wednesday, 10:00 a.m. to 5:00 p.m.

Thursday, 10:00 a.m. to 5:00 p.m.*

Friday, 10:00 a.m. to 5:00 p.m.

Saturday, 10:00 a.m. to 5:00 p.m.

Sunday, closed**

*Note: Open Mondays 10:00 a.m. to 5:00 p.m. during July, August, and open until 7:00 p.m. on Thursdays during the month of August.

**Store is open Sundays 12PM-5PM during month of August.

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