



# Still Waters Christian Boarding School

11901 Road 505 • Union, MS 39365

601-656-7714

Still Waters does not and shall not discriminate on the basis of race, color, religion (creed), gender, gender expression, age, national origin (ancestry), or disability, in any of its activities or operations.

## APPLICATION FOR ADMISSION

(To be completed by parent or legal guardian—if writing, please print with black pen)

\*Please note that any falsification of application documents may result in dismissal, denial, or cancellation of acceptance. Also please note that rehabilitation success is not guaranteed. Although this process has worked for some, we cannot ensure or promise that placement will rehabilitate your child.

### GENERAL INFORMATION

Date of Application:		Please be sure to include a recent photo of the child with this application	
Child's Legal Name (Last, First, Middle):		Nickname:	
Child's Date of Birth:	Ethnicity:	Age:	Child's SSN:
Child's Current Street Address:			
City:	State:	ZIP Code:	
Church Affiliation:		Pastor's Name:	
Church Address:			
Church/Pastor's Phone Number:			

### FAMILY INFORMATION

Name(s) of Legal Guardian(s):		Relationship to Child:	
Address:			
Home Number:	Work Number:	Cell Number:	
Mother's Name:	Is she a part of the child's life?		
Mother's Email:	Mother's Cell:		
Father's Name:	Is he a part of the child's life?		
Father's Email:	Father's Cell:		
Parents' Marital Status:	If divorced, are stepparents involved?		
Sibling Information:			
<u>Name</u>	<u>Age</u>	<u>Living in home with child currently?</u>	
Does this child receive Social Security benefits?			
Was your child adopted?		If yes, at what age did the adoption take place?	
If yes, was the adoption international?		If so, what country is your child originally from?	

### EMERGENCY CONTACT

In case of an emergency, please notify:	
Phone Number:	Relationship to Child:

<b>BACKGROUND INFORMATION</b>		
Reason(s) for Placing Child in Home:		
Has he ever been involved with any of the following? (Select all that apply)		
<input type="checkbox"/> Gang Activity	<input type="checkbox"/> Alcohol	<input type="checkbox"/> Illegal Drugs
<input type="checkbox"/> Satanism	<input type="checkbox"/> Tobacco	<input type="checkbox"/> Pornography
<input type="checkbox"/> Homosexuality	<input type="checkbox"/> Cyber Crime	<input type="checkbox"/> Violence
<input type="checkbox"/> Lying	<input type="checkbox"/> Stealing	<input type="checkbox"/> Vandalism
<input type="checkbox"/> Self-Mutilation/Suicidal Tendencies	<input type="checkbox"/> Excessive Mood Changes	<input type="checkbox"/> Fascination with Fire
<input type="checkbox"/> Daredevil Behavior	<input type="checkbox"/> Animal Cruelty	<input type="checkbox"/> Other:
Has your child had previous placements outside the home?		
If yes, please list all other programs, boarding schoolings, family members, hospitals, or other institutions below:		
<u>Facility</u>	<u>Dates of Stay</u>	<u>Reason</u>
Does he have any physical handicaps or learning disabilities? If so, please explain.		
Has he ever ran away? If so, when and for how long?		
Does he display violent tendencies? If so, please explain.		
Is there any legal action in process currently involving the boy? If so, please explain.		
Has he ever been incarcerated? If so, please explain (i.e.: reasoning, length of time, when, where, etc.)		
Has your child ever been part of abuse (physical, verbal, sexual)?	If so, were they the offender or the victim?	
Please explain:		
Have there been any circumstances in the child's life which have been hard for him/her to accept? If so, please explain:		

Have there been any deaths of family or friends that have greatly impacted your child? If yes, please explain:	
What does your child believe his/her issue to be, and how does he/she perceive being placed at Still Waters Christian Boarding School?	
What are your child's strengths and weaknesses in each of the following areas?	
Physical:	
Familial:	
Educational:	
Spiritual:	
Socially:	
Psychologically:	
Does he profess to be saved?	
Any additional information you feel would be helpful for us to know about your child?	
<b>SCHOOL INFORMATION</b>	
Name of current or last school:	School Phone Number:
Address of School:	Last Grade Completed:
Has your child had an IEP (Individualized Education Plan) or special education placement?	
If yes, please explain:	
Has your child ever repeated grades? If so, which grades?	
Has your child ever been suspended or expelled? If so, please explain:	
<b>MEDICAL HISTORY</b>	
<b><u>Insurance Information</u></b>	
Name of Provider:	Phone Number:
Address:	
Policy Holder:	Policy Number:
*Please note that some insurance may not be covered in our area. Parents will be responsible for all co-pays for medical, dental, vision, etc.	
Family Physician:	Phone Number:
Family Dentist:	Phone Number:

<b><u>Vaccination Dates</u></b>		
DPT:	HiB:	OPV:
MMR:	Tdap:	Tetanus:
Check any ailments of which the child has had difficulties with previously:		
<input type="checkbox"/> Diabetes	<input type="checkbox"/> Epilepsy	<input type="checkbox"/> Anemia
<input type="checkbox"/> Arthritis	<input type="checkbox"/> Fainting	<input type="checkbox"/> Rheumatic Fever
<input type="checkbox"/> Kidney/Bladder Disease	<input type="checkbox"/> High Blood Pressure	<input type="checkbox"/> Low Blood Pressure
<input type="checkbox"/> Eye Trouble	<input type="checkbox"/> Chicken Pox	<input type="checkbox"/> Jaundice
<input type="checkbox"/> Pneumonia	<input type="checkbox"/> Typhoid Fever	<input type="checkbox"/> STD's (please list below)
<input type="checkbox"/> Heart Disease	<input type="checkbox"/> Liver Disease	<input type="checkbox"/> Tuberculosis
<input type="checkbox"/> Frequent Headaches	<input type="checkbox"/> Other:	
Glasses?	Contact Lenses?	Braces?
Allergies? If so, please explain.		
History of major injuries or surgeries?		
Has the child ever been diagnosed as having any mental illnesses? If so, please explain.		
<b><u>Medications</u></b>		
Please list any current medications below:		
<u>Name</u>	<u>Dosage</u>	<u>Reason for Medication</u>

I/We, the legal guardian(s) of \_\_\_\_\_, hereby certify that this information is true and accurate to the best of my knowledge and belief, and that I bear to the child the relationship of \_\_\_\_\_.

Signature: \_\_\_\_\_

Signature: \_\_\_\_\_

## TO BE COMPLETED BY PHYSICIAN

(please print)

Child's Name (Last, First, Middle):		Date of Examination:	
Age:		Date of Birth:	
Height:	Weight:	Blood Pressure:	
Vision: Right- _____/_____		Left- _____/_____	
Pulse:		E.E.N.T.:	
Heart:		Lungs:	
Abdomen:		Extremities:	
Reflexes:		Genitals:	
Urinary:		Neurological:	
Serological Test for Syphilis:		Test for AIDS:	
		Test for TB:	
Does this child seem to be physically capable of being enrolled in a boarding school environment and dormitory setting?			
Please list any limitations or concerns:			
Lab Testing/Results:			
Urine:	Micro:	Hemotocrit:	Gonorrhea Screen:
VDRL:	Herpes Blood IGM:	Chlamydia:	AIDS:
Please include a copy of current vaccination records and the completed physical report as well.			
<b>SIGNATURE</b>			
Physician:			
Address:		Phone:	

# Still Waters Christian Boarding School

## GUARDIANSHIP AGREEMENT

**THIS AGREEMENT**, made and entered into this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by and between **THE STILL WATERS CHRISTIAN BOARDING SCHOOL**, a Mississippi Non-profit Corporation, engaging in the care and rehabilitation of minor children on a Christian basis in a Christ-centered institution (hereinafter called Still Waters) and

\_\_\_\_\_  
(Parent / Guardian / Legal Guardian/s/  
\_\_\_\_\_, of (address) \_\_\_\_\_ County of \_\_\_\_\_, State of \_\_\_\_\_, Zip \_\_\_\_\_, being the parent(s) legal guardian(s) of \_\_\_\_\_, a minor, age \_\_\_\_\_, born \_\_\_\_\_ covenant and agree as follows:

1. It is understood by the parent(s)/guardian(s) that in addition to providing for the room, board, and education of the child while in residence at Still Waters, the program is also designed to develop the physical, emotional, academic, and spiritual qualities of the young person. As for the other accommodations provided by Still Waters, the parent(s)/guardian(s) acknowledge by signing this agreement that they have been given a tour of the facilities and have by personal observation been made aware of such accommodations that are not specifically listed.
2. The parent(s)/ guardian(s) voluntarily and unconditionally, without coercion or force, relinquish and convey care and control of said minor child to Still Waters, expressly appointing Still Waters as lawful attorney for said parent/guardian and in said parent(s)/guardian(s) name, place, and stead to serve in place of parent(s)/guardian(s) of said child for his/her care, safety, education, and training (both secular and religious) and for all other responsibilities, real or legal, including all necessities which Still Waters deems essential for said child. This grant of care and control shall commence upon the signing of this Agreement by the parent(s)/guardian(s) and shall terminate as hereinafter provided.
3. Still Waters agrees to accept the care and control of said minor child for the period of and under the terms and conditions herein provided.
4. The parent(s)/guardian(s) covenants and agrees to assist in the support of said child while in care of Still Waters by paying to Still Waters the sum of \_\_\_\_\_ with the first payment due on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, and with subsequent payments being due and payable on the first day of each month thereafter as long as this Agreement is in effect, or such greater or lesser amount Still Waters, and the parent(s)/guardian(s) might hereafter agree to in writing.
5. The parent(s)/guardian(s) agree not to interfere with the care or management of said minor child in any way and shall not encourage or permit anyone else to do so.
6. The parent(s)/guardian(s) further acknowledge and understand that their cooperation with Still Waters is expected not only with financial support, but also in personal participation in the Still Waters program. This is essential to the successful rehabilitation not only of said minor, but also for the entire family. The parent(s)/guardian(s) acknowledges that they have been provided a list of required participation and attendance in the program of Still Waters, a copy of which has been read, initialed, and is attached to each Agreement as Exhibit "A" thereto and made a part there of.
7. **VISITATION:** I will abide by all facility visitation policies, especially these terms:

- a. Pick up and return child on time!
  - b. Assume full responsibility for child on his/her visit.
  - c. Bearing in mind that the purpose of these visits is not primarily entertainment, but rather the opportunity to grow together as a family unit, to check progress in family relationships.
  - d. While visiting my child I will attend all church services with Still Waters.
  - e. **It will further be appreciated if while visiting child, parent(s) /guardian(s) adhere to the Home's standards of dress, music, etc. in order to demonstrate that you are behind the work here at Still Waters.**
8. Included in the booklet are disciplinary procedures of Still Waters. Parent(s)/ guardian(s) acknowledges they understand all disciplinary procedures and will support Still Waters in these procedures with said minor child or children. Their signing of the booklet form has indicated parent(s)/guardian(s) approval.
9. That both Still Waters and parent(s)/guardian(s) understand and agree that it is the goal of Still Waters to return the child covered by the Agreement to its parent(s), legal guardian(s), or the person(s) having legal custody of said child.
10. In the unfortunate event that the child's behavior proves to be beyond our capabilities, or if there are any falsifications of entrance application discovered, the parent(s)/guardian(s) will be responsible and provide the necessary provisions for the immediate return of the child accordingly.
11. In addition to the above, the following special agreements have been made between Still Waters and the parent(s)/guardian(s). (See list attached if applicable)

**IN WITNESS WHEREOF**, the undersigned have set their hands and seals on herein above indicated date.

\_\_\_\_\_  
Parent/Guardian/Person with legal custody:

\_\_\_\_\_  
Parent/Guardian/Person with legal custody:

Subscribed and sworn before me this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

Notary Public signature \_\_\_\_\_

My Commission Expires \_\_\_\_\_

Affix Seal Below

I, \_\_\_\_\_, have read the above mentioned agreement signed by my parent(s), legal guardian(s), or person(s) having legal custody of me, and by joining in with them, consents to all of the terms and conditions of the same.

\_\_\_\_\_  
Child's Signature

# POWER OF ATTORNEY

(In Loco Parentis)

I hereby grant to Still Waters Christian Boarding School, and its' agents, a **POWER OF ATTORNEY** over my legal ward \_\_\_\_\_, DOB \_\_\_\_\_ to act in loco parentis

(in place of parent) in all matters pertaining to my child's health, safety, education, and general welfare. This

**POWER OF ATTORNEY** to include but not limited to the following:

1. I/We consent that the authorities of Still Waters Christian Boarding School may provide for examination and/or diagnostic procedures and may provide emergency surgery, counseling services, and/or medical or dental treatment or administration of necessary anesthetics, when in the opinion of any physician or surgeon of good standing such examination, diagnostic procedures, emergency surgery, administration of anesthetic or medical treatment is necessary for the mental or physical health of said child.
2. I will inform this facility and make accessible to them complete background information, social, psychological, and medical records of said child.
3. To supervise my child's daily living requirements, including authority to administer discipline when under the supervision of the director or his agent, in accordance with the planned objectives of this placement. To use other forms of discipline, such as restriction, temporary loss of privileges, added assignments, etc.
4. I/We grant my/our child(ren) permission to travel to various Still Waters Christian Boarding School functions during her/his stay. I understand these activities may take my child to other states.
5. To allow my child to participate in normal childhood and/or teenage activities including church, school, sport, and social events.
6. I understand that my child will be participating in various activities such as boating, swimming, softball, skating, volleyball, basketball, etc. I will not hold Still Waters Christian Boarding School responsible for any injury to my child while at Still Waters Christian Boarding School.
7. I understand that I am responsible for all medical expenses acquired for medical care granted to my child. I will provide the necessary health insurance information to Still Waters Christian Boarding School and will assume the responsibility of locating a preferred health care provider near the Union, MS area accordingly. If I do not have health insurance for my child, I understand that they will be enrolled in the local discount insurance program made available to them upon enrollment at Still Waters.
8. To allow my child to operate designed lawn care equipment when approved and supervised by staff.
9. To allow my child to be photographed and/or filmed and to make appearances for advertising and other legitimate fund raising promotions of the Home. Such photographs or appearances to be in professional good taste, without exploitation or embarrassment and where possible voluntary.
10. To provide religious and spiritual instruction which includes compulsory church attendance, Bible studies, Bible memorization and youth fellowship activities.
11. I recognize that the Home provides a substitute home environment and that my child may travel to and from activities.

INITIAL \_\_\_\_\_



**POWER OF ATTORNEY**

Page 2

- 12. I agree that should my child run away or leave the Home property without permission, the Home and its staff will not be responsible for any acts or accidents that may occur during such an absence. I will assume all liability during any such unauthorized absences.
- 13. I acknowledge that placement of my child \_\_\_\_\_ is voluntary on my part and my child's, and I will not hold the Home, directors, trustees, administrators, staff or volunteers liable for any injury, sickness, or accident, including death of my child during exercise of this **POWER OF ATTORNEY** granted by me.
- 14. I understand that this **POWER OF ATTORNEY** can be revoked by me at any time by serving such revocation in writing, properly witnessed and notarized (providing there is no current order to be contrary), or by mutual consent by me/us and the Home.

Before me personally appeared \_\_\_\_\_ and  
(Legal Guardian)

\_\_\_\_\_ known to be one and the same, and who  
(Legal Guardian)

attest that he/she/they are the legal guardian(s) of \_\_\_\_\_  
(Child's Name)

DOB \_\_\_\_\_ and have the authority to execute the **Power of Attorney**.  
(Child's)

And that he/she/they understand the conditions of the granting of the **POWER OF ATTORNEY** and have entered into it willingly and freely.

IN WITNESS WHEREOF, the undersigned have set their hands and seals on herein above indicated date.

\_\_\_\_\_  
Parent /Guardian /Person with legal custody

\_\_\_\_\_  
Parent /Guardian /Person with legal custody

Subscribed and sworn before me this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

Notary Public signature \_\_\_\_\_

My Commission Expires \_\_\_\_\_

Affix Seal Below

# MEDICAL CARE RELEASE

Permission is herewith given to agents representing Still Waters Christian Boarding School to assure full responsibility for the physical wellbeing of my child \_\_\_\_\_, if any illness of sustained injury, use of prescription medicine, test, x-rays or hospitalization should become necessary.

Permission is herewith granted by me \_\_\_\_\_ for all necessary care.  
(Parent / Guardian)

I, \_\_\_\_\_ acknowledge that I am financially responsible for all  
(Parent / Guardian)

medical, dental and optical needs of \_\_\_\_\_ and will assume  
(Child)

all financial responsibility for any needs that may arise such as office visits, hospitalization, x-rays, other tests deemed necessary, exams, glasses and all prescriptions needed.

I / We further consent to:

1. All necessary test and immunizations deemed necessary.
2. For hospitalized isolation in the event of contagious disease.
3. The administration of anesthetic and any required surgery should any such emergency develop. The opinion on advisability and all surgical work to be done by the medical advisors and their consultants are released from any and all responsibility in any contingency.
4. Take care of all financial obligations for medical treatment and/or hospitalization of

\_\_\_\_\_  
(Child's Name)

Permission is also herewith given to the staff members to take my child for any of the above-mentioned medical needs. This person will have a letter to confirm they are on staff at Still Waters Christian Boarding School.

IN WITNESS WHEREOF, the undersigned have set their hands and seals on herein above indicated date.

\_\_\_\_\_  
Parent /Guardian /Person with legal custody

\_\_\_\_\_  
Parent /Guardian /Person with legal custody

Subscribed and sworn before me this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

Notary Public signature \_\_\_\_\_

My Commission Expires \_\_\_\_\_

Affix Seal Below

## PERMISSION TO PUBLISH PHOTOGRAPHS/VIDEOS

It is now required by law that parents must give written permission for their children to be posted on a website and/or social media site. Pictures/videos of students engaging in various home/school activities are often posted. Therefore, we need your written permission in order to publish any photographs or videos of your child, whether in a group, or as an individual.

**This certifies that I give Still Waters Christian Boarding School permission to publish photographs and/or videos, and testimonies of my child on the home's website and/or social media account(s), for the home's use.**

IN WITNESS WHEREOF, the undersigned have set their hands and seals on herein above indicated date.

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Parent /Guardian /Person with legal custody

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Parent /Guardian /Person with legal custody

Subscribed and sworn before me this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

Notary Public signature \_\_\_\_\_

My Commission Expires \_\_\_\_\_

Affix Seal Below

**CONSENT TO TRAVEL**

The State of \_\_\_\_\_

County of \_\_\_\_\_

I, the parent/guardian of \_\_\_\_\_, do hereby give my consent to appointed staff of Still Waters Christian Boarding School, to allow my child to travel with the staff of Still Waters Christian Boarding School on church tours in and out of the state of Mississippi for the purpose of singing, testifying and representing the work of this ministry during the time he/she is a resident of Still Waters Christian Boarding School.

I also hereby give my permission for my child to travel with above stated staff of Still Waters Christian Boarding School to attend sporting events and other extracurricular activities.

IN WITNESS WHEREOF, the undersigned have set their hands and seals on herein above indicated date.

\_\_\_\_\_  
Parent /Guardian /Person with legal custody

\_\_\_\_\_  
Parent /Guardian /Person with legal custody

Subscribed and sworn before me this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

Notary Public signature \_\_\_\_\_

My Commission Expires \_\_\_\_\_

Affix Seal Below

## DISCIPLINE AND BEHAVIOR MODIFICATION

In order to maintain a happy and peaceful atmosphere, proper discipline and respect for others must be exhibited by all residents at Still Waters Christian Boarding School at all times. Therefore, there are rules in place which are designed to regulate and modify behavior of the student. There is also a fair system of punishment for when those rules are broken. The rules within the school are always in a form of flux, meaning that new rules may be introduced at any time and that old rules may be amended on a regular basis. Listed below are some examples of the forms of punishments employed at Still Waters Christian Boarding School. This list is neither exhaustive nor complete and is subject to change without written notice.

<u>Physical</u>	<u>Restrictions</u>	<u>Writing</u>	<u>Outside</u>	<u>Extra Chores</u>
Push-ups	No soda/tea	Sentences	Weeding	Bathroom Toilets Scrubbed
Sit-ups	No sugar	Essays	Running laps	Scrubbing Floors
Extra P.T.	No fun activities	Bible Verses	Digging holes	Handwashing Laundry
	No talking			

IN WITNESS WHEREOF, the undersigned have set their hands and seals on herein above indicated date.

\_\_\_\_\_  
Parent /Guardian /Person with legal custody

\_\_\_\_\_  
Parent /Guardian /Person with legal custody

Subscribed and sworn before me this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

Notary Public signature \_\_\_\_\_

My Commission Expires \_\_\_\_\_

Affix Seal Below

# STUDENT RECORD RELEASE

## To Releasing School Counselor:

\_\_\_\_\_  
School Name Date

\_\_\_\_\_  
Address

\_\_\_\_\_  
City State/Province Zip

PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

Dear Counselor:

My child has been withdrawn from your school. Please release their academic and health records to the following school. Thank you.

**Accepting School**

Still Waters Christian Boarding School  
11901 Road 505  
Union, MS 39365-7323

FAX: 601-656-5393 Office: 601-656-7714

## Student's Name

\_\_\_\_\_  
Last First Middle Initial Age Grade level at time of withdrawal

\_\_\_\_\_  
Signature of Requesting Parent/Guardian

\_\_\_\_\_  
Signature of Receiving Principal

## **CORRESPONDENCE GUIDELINES**

- All mail, incoming and outgoing, is read by staff.
- Mail will be held if we do not feel it is helpful or appropriate for your child.
- Parents will need to provide stamps & pull & seal envelopes for the child or the funds for your child to purchase them.
- Do not send pre-stamped envelopes – all stamps are held by staff and put on envelopes prior to mailing.

## **VISITATION RULES**

1. All visits must first be approved by the Still Waters Christian Boarding School staff.
2. Staff must be notified of, and approve, intended visits at least two weeks prior.
3. All visitors are required to observe the dress code of the home while on property (modest skirts or dresses for ladies, long pants on men, sleeved shirts, no shorts).
4. Initial visits are permitted, pending staff approval, after the end of the child's first six months at the home.
5. The child and his/her visitors will be required to attend any church services which may occur during the time of the visit.
6. Visitors are permitted to pick up their child at the home the day of their visit and spend the day with them off-site, respecting return curfew set by the staff, accordingly.
7. The home's dress code must be followed by the child while off-property as well during his/her visit, respecting the ministry and the work that is being done.
8. Visitors will be limited to the child's immediate family: parents, grandparents, brothers and sisters. Pastors and youth leaders are permitted earlier visits, as approved by the staff, if so desired.
9. No alcohol or tobacco products are permitted on Still Waters Christian Boarding School property.
10. Do not discuss the intended visit with your child prior to the visit. The staff will inform him/her the morning of his/her visit accordingly.
11. The Still Waters staff reserves the right to cancel, or end visits at their discretion.

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Parent/Guardian Signature

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Dates

## Items to Bring

*\*Please ensure that all personal belongings are marked with child's initials appropriately with a laundry-safe marker.*

*\*Quantities listed below are suggested minimums.*

- Bible (King James only)
- Stamps, Stationary, & Envelops (if so desired)
- Suit(s)/Sports Coat(s)
- Dress Shirts (4)
- Ties
- Dress Belt
- Casual Belt
- Dress Pants (3)
- Casual Pants (5) (No jean material)
- Jean Pants (1) (Nice condition—No skinny or baggy jeans)
- Work Pants (2) (hole-free)
- Casual Shirts with Collar (5) (Label free)
- T-shirts for Working (3) (Plain/Appropriate Graphics)
- T-shirts for Sleeping (3) (Plain/Appropriate Graphics)
- Plain, White Undershirts (7) (Worn Daily)
- Underwear (8)
- White Socks (8)
- Dress Socks (5)
- Pajama Pants/Shorts for Sleeping (3)
- Dress Shoes
- Work Shoes
- Casual Shoes
- Play Shoes/Tennis Shoes
- House/Shower Shoes
- Waterproof Mattress Cover (Preferably with a zipper)
- Pillow
- Twin Sheet Set with Pillowcase
- Blanket
- Towels (4)
- Washcloths (4)
- Clothes Hangers
- Large Mesh Laundry Basket
- Deodorant
- Razor (if applicable)
- Pullman Suitcase and/or Overnight Bag (1)



## General Rules

1. \_\_\_\_\_ You will have a weekly chore list which must be completed each day prior to any privileges, unless otherwise told. The chore chart is posted on the bulletin boards in each dorm. Having your area around your bed and closet area clean and tidy is to be done daily before leaving the dorm.
2. \_\_\_\_\_ Ask permission before leaving the upstairs area.
3. \_\_\_\_\_ Do NOT leave the property unless specific permission is granted. Learn where the property lines are in the woods and be sure NOT to cross into other property. This is especially important during hunting seasons as hunters utilize these woods.
4. \_\_\_\_\_ Phone calls will be granted every two weeks and will only last 10 minutes. Calls are to be made to parents, grandparents or siblings only. Phone calls may be taken away per the discretion of the Dean.
5. \_\_\_\_\_ Fire drills are conducted once a month. You are to drop whatever you are doing and leave by the designated door and gather by the flag pole in the front yard until everyone has been accounted for and you are given permission to go back inside.
6. \_\_\_\_\_ You are not allowed to carry money on you. All money will be kept for you by the director. You may ask to utilize this money as needed.
7. \_\_\_\_\_ All adults must be addressed as "sir" or "ma'am."
8. \_\_\_\_\_ Backtalk and arguing will not be tolerated.
9. \_\_\_\_\_ All meals and snacks must be eaten in the dining room ONLY, with the exception of water. You must ask to be excused before leaving the table during meals. Permission must be given for all food, drinks and snacks, with the exception of water.
10. \_\_\_\_\_ Shorts may be worn at bedtime, but are NOT permitted to be worn outside, or during any time when guests are visiting.
11. \_\_\_\_\_ T-shirts are only permitted to be worn when lounging around the house or when working outside. Sleeveless shirts are not allowed at any time; hoodies are only permitted when working in the cold.
12. \_\_\_\_\_ Jeans are only to be worn around the house or while working. Skinny jeans and excessively baggy jeans are NOT allowed at any time.
13. \_\_\_\_\_ School attire is Khaki pants, collared shirt, plain white undershirt, and belt. Shirts are to be tucked in at all times.
14. \_\_\_\_\_ Church attire for all church services (unless otherwise noted) is a plain white undershirt, dress pants, tie, suit jacket, dress socks, belt and dress shoes.
15. \_\_\_\_\_ Plain, white undershirts must be worn at all times with both collared shirts and dress shirts.
16. \_\_\_\_\_ A shirt and either sleep shorts or pants are required to be worn to bed.
17. \_\_\_\_\_ House shoes, or shoes must be worn at all times indoors; bare feet are not permitted.
18. \_\_\_\_\_ "Ready to leave" means that proper attire is on, shirts are tucked in, belt is on, and shoes are on and tied. All possessions that will be going with you are in your arms and ready to be taken (ex. Bible, backpacks, lunches, etc.).
19. \_\_\_\_\_ Contraband, such as cell phones, electronics, cigarettes, drugs, etc. will result in necessary discipline.
20. \_\_\_\_\_ Discipline measures are determined accordingly by the Dean (ex. writing sentences, food and privilege restrictions, etc.).
21. \_\_\_\_\_ Your personal belongings are subject to inspection at any time by the Dean during your time here.
22. \_\_\_\_\_ You are responsible for your own personal belongings and personal hygiene.
23. \_\_\_\_\_ Bible reading is required daily prior to breakfast.

24. \_\_\_\_\_ There is zero tolerance of profanity or bad language, including "substitute" words used for vulgar language, gang activity of any kind (ex. Flashing, graffiti, colors, etc.).
25. \_\_\_\_\_ Bullying will also not be tolerated.
26. \_\_\_\_\_ Talking about "old times" or prior misbehaviors is not permitted. Arguing will not be tolerated.
27. \_\_\_\_\_ There will be no singing of rock, rap, country, or contemporary songs.
28. \_\_\_\_\_ No physical contact is allowed such as fighting, horseplay, rough-housing, etc.
29. \_\_\_\_\_ You must always be clean shaven and have a Dean-approved haircut.
30. \_\_\_\_\_ Anything brought into the home must first be approved by the Dean.
31. \_\_\_\_\_ Anything brought into the home for the other boys to use becomes the property of the home and we are not responsible if it is broken or misused.
32. \_\_\_\_\_ When leaving the property, we stay together as a group unless otherwise instructed.
33. \_\_\_\_\_ All staff housing is STRICTLY off-limits.
34. \_\_\_\_\_ You will be held responsible for replacing or repairing anything you break.
35. \_\_\_\_\_ Do not wear other boys' clothes without permission.
36. \_\_\_\_\_ No flirting with or writing to girls is permitted during your time here at the home. Romantic relationships are not allowed.
37. \_\_\_\_\_ All reading material must first be approved by the Dean.
38. \_\_\_\_\_ No firearms, ammunition or knives allowed.
39. \_\_\_\_\_ You will be assigned a designated laundry day. Laundry must be completed on your day accordingly.
40. \_\_\_\_\_ Chores must be completed after each meal unless otherwise instructed.
41. \_\_\_\_\_ Lights-out is at 9:30 PM unless otherwise instructed.
42. \_\_\_\_\_ You are required to wake up at the designated time as instructed by the Dean.
43. \_\_\_\_\_ Do not take or use ministry property without permission.
44. \_\_\_\_\_ Stay out of locked rooms and buildings on property.
45. \_\_\_\_\_ When the kitchen door is closed, you are NOT permitted to open it.
46. \_\_\_\_\_ You are permitted access to your own dorm, shower, bathroom, and sink ONLY, unless specific permission is granted by the Dean.
47. \_\_\_\_\_ All belongings will be searched upon initial entrance and final exit of the home and are subject to searching at any time during your time here.

I have read and understand each of the rules outlined above.

Signed: \_\_\_\_\_

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

## **PARENT'S PAPERWORK AND CHECK- IN INFORMATION CHECK LIST**

**Everything on this list MUST be completed before arrival.**

The following paperwork **MUST** be filled out and notarized (if so indicated [\*]) prior to admission. Please bring a copy of all documents with you at the time of in-take.

- Application for Admission
- Medical Examination (Including a complete physical)
  - Blood work
  - STD and AIDS Testing
  - Flu Shot
  - All immunizations must be up-to-date
  - Dental work must be done
  - Eye exam – if wearing contacts, we will need you to supply those as needed.
  - All daily medications need to be sent with your child.
  - Head lice checked before arrival—NO child will be admitted with lice.
- Guardianship Agreement\***
- Power of Attorney\***
- Medical Care Release\***
- Permission to Publish Photographs\***
- Consent to Travel\***
- Discipline and Behavior Modifications\***
- Student Record Release
- Correspondence and Visitation Rules
- Biographical Information of Residents (state required)– COMPLETED AT DROP-OFF**

### **Additional Documentation Required:**

- Original or *certified* copy of child's birth certificate
- Original or *certified* copy of child's social security card
- Copy of child's insurance card
- Child's federal issued photo ID (if applicable)
- Copy of child's immunization records
- Copy of child's school transcripts (if feasible)

**First tuition payment is due at time of in-take and is non-refundable.**