



Dear Parents,

Thank you for considering Woodland Christian School for your child's education. WCS has served the Woodland community for almost 50 years!

Our mission is to prepare students for college and the Christian life, cultivating them to know Christ through His word, communicate in a way that is winsome, gracious, and respectful, grow in discernment, work with excellence, and serve their community.

We are thankful for the privilege of pursuing that mission with your family.

Enclosed you will find all necessary paperwork to begin the enrollment process. Please look at the checklist for your child's grade level to ensure you bring all of the required information. Please contact the school office with any questions. We would love for an opportunity to share our program with you in person and provide a tour of our campus.

To be considered for priority enrollment, completed applications must be received by March 25, 2024. All other applications may be turned in at any point after that. Families will be notified of priority enrollment status no later than April 8, 2024.

Sincerely,

A handwritten signature in black ink, appearing to read 'Ryan Devine', is positioned below the word 'Sincerely,'.

Mr. Ryan Devine  
Administrator

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Woodland, CA 95776  
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Elementary School  
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Middle School  
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## 2024–2025 NEW STUDENT APPLICATION AND INFORMATION GRADES K–12

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Welcome to Woodland Christian School. Completing this packet is the first step in the application and enrollment process for new students. A checklist of required forms and procedures for each grade level is provided below. Applicants will not be considered for enrollment until the school receives **all** required documents and appropriate fees. Please be sure to print legibly, in black or blue ink. Some documents are two sided; please make sure that both sides are completed in full. If you have any questions, please call the school office. Please keep this checklist for your records.

Once your completed application is received, you and your student will be scheduled for student testing and for an interview with the principal. Upon acceptance to Woodland Christian Schools, a separate registration packet will be required to complete enrollment.

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### ELEMENTARY SCHOOL APPLICATION CHECKLIST GRADES K–5

- \$95 Application Fee
- Enrollment Application
- Parent Letter
- Letter(s) of Reference - (Optional) *Please provide 1 or 2 letters of reference from someone who could recommend your family to WCS.*
- Behavior Record (*Grades 1-5 only - Last year & current*)
- Copy of IEP/504 plan (*if applicable*)
- K ONLY** - Report of Health Examination for School Entry (*due by Aug. 1st*)

### MIDDLE/HIGH SCHOOL APPLICATION CHECKLIST GRADES 6–12

- \$95 Application Fee
- Enrollment Application
- Parent Letter
- Student Letter (*Grades 9-12 only*)
- Letter(s) of Reference - (Optional) *Please provide 1 or 2 letters of reference from someone who could recommend your family to WCS.*
- Educator's Recommendation
- Most Current Report Card/Transcript
- Attendance Record (*Last year & current*)
- Behavior Record (*Last year & current*)
- Copy of IEP/504 plan (*if applicable*)

### STEP 1—APPLICATION

To start the application process, WCS must receive all items from the appropriate grade level checklist. Forms and fees may be turned in to the appropriate school office.

### STEP 2—ASSESSMENT AND INTERVIEW

After turning in the application paperwork, your child(ren) will be scheduled for an interview with the appropriate grade-level principal. Assessment for grade placement, if needed, will take place during this time as well. Parents will be notified of acceptance and grade level recommendation at the end of this appointment.

### STEP 3—COMPLETION OF SCHOOL REGISTRATION

Upon acceptance, the following completed and signed forms must be submitted to the appropriate grade-level office along with the payment of fees in order to complete your student's registration:

- Registration Form
  - \$155 Registration Fee
  - Tuition Agreement for New Students
  - Parent/Guardian Cooperation Statement and Acknowledgment of Policies.
  - Copy of Birth Certificate
-



# WOODLAND CHRISTIAN SCHOOL

## 2024–2025 TUITION AND FEE INFORMATION

### 2024-2025 WCS Application/Registration Fees

Grade	New Student Application Fee (Non-Refundable)	New Student Enrollment Fee (Non-Refundable)
Grades K–12	\$95	\$155
International	\$200	\$450

### 2024–2025 Published Tuition Rates & Student Fees (Tuition + Student Fees = Annual School Fees)

\*Discounts cover published tuition only, NOT Student Fees

Tuition Rates			
Child	Elementary Grades K–5	Middle School 6–8	High School 9–12
First	\$7550	\$8400	\$8610
Second	\$6785	\$7550	\$7735
Third +	\$2775	\$2775	\$2775
International	\$11,110	\$12,290	\$12,645

Student Fees				
Grade	Student Fee	Activities Fee	Camp/Retreat Fee	Total Fees
Kindergarten	\$365	\$75	—	\$440
Grades 1–3	\$365	\$65	—	\$430
Grade 4	\$365	\$65	\$300	\$730
Grade 5	\$365	\$85	—	\$450
Middle School	\$400	—	\$570	\$970
High School	\$420	—	\$410	\$830

### Additional Information

**New Student Application Fee:** New student applications will be accepted beginning March 6, 2024. The non-refundable fee is \$95 per new student and is submitted at the time of initial application. New student applicants will be contacted by administrative personnel to schedule testing and interviews.

**New Student Registration Fee:** Upon acceptance, a registration fee of \$155 per student is due to secure each student’s placement. This fee is non-refundable.

**Student Fee:** This fee covers textbooks, workbooks, classroom and art supplies, building use, and computer equipment.

**Elementary Activities Fee:** This fee covers class field trips, promotion supplies, and art projects. It is non-optional and is billed along with your tuition and other fees.

**Camp/Retreat Fees:** Special camps and retreats are planned each year for fourth-grade, middle-school and high-school students. The camps and retreats are a part of their learning experience and attendance is considered non-optional.

- **Fourth Grade 49er Camp:** The fourth grade classes participate in a two-day California history 49er camp, centered around learning what life was like during the Gold Rush days in California. The cost of the camp is \$150 and is billed along with your tuition and other fees (\$300 total, which includes student and one parent).
- **Middle School Retreat:** Middle school students attend a three-day retreat during the early fall. They participate in a diverse, challenging program that includes inspiring worship, Biblical teaching, and a number of activities that help them grow in their relationship with the Lord, their teachers, and their peers. The cost for the middle school three-day retreat is \$570. If your child is not planning on attending retreat, please inform your principal as soon as possible. The retreat fee is non-refundable after August 1.
- **High School Retreat:** High school students attend an annual three-day retreat. This spiritual retreat has become a key component of our school year. Students participate in a number of activities such as zip-lining, wall climbing, swimming and team-building games that help them grow in their relationships with the Lord, their teachers, and their peers. The cost for the high school three-day retreat is \$410. If your child is not planning on attending retreat, please inform your principal as soon as possible. The retreat fee is non-refundable after August 1.

**Payments:** The student fees are charged per student, per year. The fees are added to the annual tuition and apportioned according to your choice of payment plan. Payments are made to the school and are due on the first of each month. School payments are established by choices made on the enrollment agreement. The first payment is due June 1, 2024. \$500 of this payment is non-refundable.

**Payment Plans:** There are five payment plans available: payment in full; payment by semester; or 10, 11, or 12 equal monthly payments made by check or cash, ACH Direct Debit, or Credit Card Auto Debit. The first payment is due June 1, 2024. The remaining payments start in July, August, or September depending on which monthly plan you choose. All accounts must be paid in full by May 10th of each year.

**Discounts:** Families that return (all children) will receive a 2.5% discount off of published tuition rates. This discount also applies to children who go from WCS preschool to WCS kindergarten. Families who refer a new, full-time (K–12) student will receive a one time \$600 tuition credit per new student (\$200 for part-time students). This discount only applies if the child is accepted and attends WCS. The credit will be pro-rated if the new student starts after September 1. Discounts cover published tuition only, not Student Fees, camp/retreats, or class fees.

**Parent Service Hours:** Each family with a child enrolled in grades 1–12 is required to serve 30 hours per year. Single-parent families as well as families with a child enrolled in preschool or kindergarten only are required to serve 15 hours per year. Families with a parent serving in the armed forces overseas are required to serve 15 hours per year. Parents can log their volunteer hours via RenWeb. Hours can be fulfilled in many ways, including but not limited to: serving on a committee, helping in the classroom, yard duty, copying papers, driving on field trips, or serving on a campus beautification day. Grandparents, as well as adult aunts and uncles, can also serve the hours. Hours served during the summer will count toward the upcoming year. In lieu of fulfilling the service hours, families may opt to pay \$15 per each hour of the requirement (\$450) or opt to serve a portion of the hours and pay \$15 per hour for any unserved hours. At the end of the year, hours will be tallied and a bill will be sent out for any unserved hours.

**Financial Aid:** A limited amount of financial aid is available. These grants are based on financial need. Even if you have received financial assistance in the past, you must submit a new application for the new academic year. All applications must be submitted by March 15, 2024 for the 2024-25 school year. If approved, notification will be sent out during the month of May or upon acceptance to WCS. Information on how to apply online is available on the school website.

**Billing:** The accounts receivable policy for all families is as follows:

- High school students are not allowed to take semester exams if financial accounts are not current.
- Accounts must be current at the end of each quarter for families to receive a report card, have access to the online grade book, and continue with WCS in the following quarter.
- All accounts are charged a \$25 late fee per family if payment is received later than the tenth of the month.
- Accounts with returned checks are charged a \$25 fee, which is in addition to the late fee.
- Records are not released to parents unless all accounts are current.

PLEASE RETAIN THIS INFORMATION FOR YOUR RECORDS

Grade	Number of Doses Required of Each Immunization <sup>1, 2, 3</sup>				
<b>K-12 Admission</b>	<b>4 Polio<sup>4</sup></b>	<b>5 DTaP<sup>5</sup></b>	<b>3 Hep B<sup>6</sup></b>	<b>2 MMR<sup>7</sup></b>	<b>2 Varicella</b>
<b>(7th-12th)<sup>8</sup></b>	<b>K-12 doses</b>	<b>+ 1 Tdap</b>			
<b>7th Grade Advancement<sup>9,10</sup></b>		<b>1 Tdap<sup>8</sup></b>			<b>2 Varicella<sup>10</sup></b>

- Requirements for K-12 admission also apply to transfer pupils.
- Combination vaccines (e.g., MMRV) meet the requirements for individual component vaccines. Doses of DTP count towards the DTaP requirement.
- Any vaccine administered four or fewer days prior to the minimum required age is valid.
- Three doses of polio vaccine meet the requirement if one dose was given on or after the 4th birthday.
- Four doses of DTaP meet the requirement if at least one dose was given on or after the 4th birthday. Three doses meet the requirement if at least one dose of Tdap, DTaP, or DTP vaccine was given on or after the 7th birthday (also meets the 7th-12th grade Tdap requirement. See fn. 8.) One or two doses of Td vaccine given on or after the 7th birthday count towards the K-12 requirement.
- For 7th grade admission, refer to Health and Safety Code section 120335, subdivision (c).
- Two doses of measles, two doses of mumps, and one dose of rubella vaccine meet the requirement, separately or combined. Only doses administered on or after the 1st birthday meet the requirement.
- For 7th-12th graders, at least one dose of pertussis-containing vaccine is required on or after the 7th birthday.
- For children in ungraded schools, pupils 12 years and older are subject to the 7th grade advancement requirements.
- The varicella requirement for seventh grade advancement expires after June 30, 2025.

DTaP/Tdap = diphtheria toxoid, tetanus toxoid, and acellular pertussis vaccine

Hep B = hepatitis B vaccine

MMR = measles, mumps, and rubella vaccine

Varicella = chickenpox vaccine

### Instructions:

California schools are required to check immunization records for all new student admissions at TK / Kindergarten through 12th grade and all students advancing to 7th grade before entry. See [shotsforschool.org](http://shotsforschool.org) for more information.

**Unconditionally Admit** a pupil whose parent or guardian has provided documentation of any of the following for each immunization required for the pupil's age or grade as defined in the table above:

- Receipt of immunization.
- A permanent medical exemption.\*

**Conditionally Admit** any pupil who lacks documentation for unconditional admission if the pupil has:

- Commenced receiving doses of all the vaccines required for the pupil's grade (table above) and is not currently due for any doses at the time of admission (as determined by intervals listed in the Conditional Admission Schedule, column entitled "Exclude If Not Given By"), or
- A temporary medical exemption from some or all required immunizations.\*

## Conditional Admission Schedule for Grades K-12

Before admission a child must obtain the first dose of each required vaccine and any subsequent doses that are due because the period of time allowed before exclusion has elapsed.

Dose	Earliest Dose May Be Given	Exclude If Not Given By
<b>Polio #2</b>	4 weeks after 1st dose	8 weeks after 1st dose
<b>Polio #3<sup>1</sup></b>	4 weeks after 2nd dose	12 months after 2nd dose
<b>Polio #4<sup>1</sup></b>	6 months after 3rd dose	12 months after 3rd dose
<b>DTaP #2</b>	4 weeks after 1st dose	8 weeks after 1st dose
<b>DTaP #3<sup>2</sup></b>	4 weeks after 2nd dose	8 weeks after 2nd dose
<b>DTaP #4</b>	6 months after 3rd dose	12 months after 3rd dose
<b>DTaP #5</b>	6 months after 4th dose	12 months after 4th dose
<b>Hep B #2</b>	4 weeks after 1st dose	8 weeks after 1st dose
<b>Hep B #3</b>	8 weeks after 2nd dose and at least 4 months after 1st dose	12 months after 2nd dose
<b>MMR #2</b>	4 weeks after 1st dose	4 months after 1st dose
<b>Varicella #2</b>	Age less than 13 years: 3 months after 1st dose	4 months after 1st dose
<b>Varicella #2</b>	Age 13 years and older: 4 weeks after 1st dose	8 weeks after 1st dose

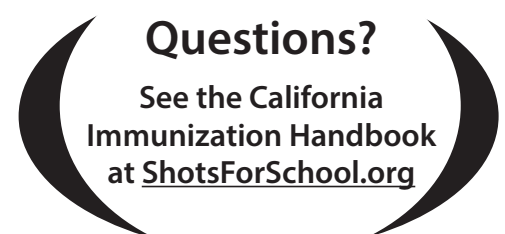
1. Three doses of polio vaccine meet the requirement if one dose was given on or after the fourth birthday. If polio #3 is the final required dose, polio #3 should be given at least six months after polio #2.
2. If DTaP #3 is the final required dose, DTaP #3 should be given at least six months after DTaP #2, and pupils should be excluded if not given by 12 months after second dose. Three doses meet the requirement if at least one dose of Tdap, DTaP, or DTP vaccine was given on or after the seventh birthday. One or two doses of Td vaccine given on or after the seventh birthday count towards the requirement.

**Continued attendance** after conditional admission is contingent upon documentation of receipt of the remaining required immunizations. The school shall:

- review records of any pupil admitted conditionally to a school at least every 30 days from the date of admission,
- inform the parent or guardian of the remaining required vaccine doses until all required immunizations are received or an exemption is filed, and
- update the immunization information in the pupil's record.

For a pupil **transferring** from another school in the United States whose immunization record has not been received by the new school at the time of admission, the school may admit the child for up to 30 school days. If the immunization record has not been received at the end of this period, the school shall exclude the pupil until the parent or guardian provides documentation of compliance with the requirements.

\* In accordance with 17 CCR sections 6050-6051 and Health and Safety Code sections 120370-120372.





**OFFICE USE ONLY**

Date Received: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Fee: \$ \_\_\_\_  Cash  CC  Ck # \_\_\_\_  
Testing/Interview Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Received by: \_\_\_\_  Cum Requested



**OFFICE USE ONLY**

\_\_\_\_ RenWeb    \_\_\_\_ Google Doc  
\_\_\_\_ Excel    \_\_\_\_ QB

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# 2024–2025 ENROLLMENT APPLICATION

## STUDENT INFORMATION

**Applying for Grade:**

Kindergarten  1  2  3  4  5  6  7  8  9  10  11  12

Full Legal Name \_\_\_\_\_ / \_\_\_\_\_  
Last First Middle Preferred First Name

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Age: \_\_\_\_ Gender:  M  F  
Student Social Security Number (Entering grades 11 & 12 only) \_\_\_\_\_

Primary Address (All school mailings will be sent to this address) \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Student E-mail Address \_\_\_\_\_ Student Home Phone \_\_\_\_\_ Student Cell Phone \_\_\_\_\_

Ethnicity (Optional):  American Indian  African American  Asian  Caucasian  Hispanic or Latino  Pacific Islander  Other \_\_\_\_\_

Language most often spoken at home: \_\_\_\_\_ Other Languages \_\_\_\_\_

## PARENT INFORMATION

**PARENTS' MARITAL STATUS:**  Married  Divorced  Remarried  Single  Deceased ( Father  Mother)  Other \_\_\_\_\_

**STUDENT LIVES WITH:**  Father  Step-father  Guardian  Shared Custody  
Spouse Name, if different than Mother: \_\_\_\_\_

100%  
 50%  
 Weekends only  
 Mailing list only  
 NO contact

**Father or Guardian:** \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
*(if different than student)*  
Occupation: \_\_\_\_\_  
Place of Employment: \_\_\_\_\_  
**Is parent an Alum of Woodland Christian School?**  Yes  No

Work Phone: (\_\_\_\_) \_\_\_\_\_  
Cell Phone: (\_\_\_\_) \_\_\_\_\_  
Home Phone: (\_\_\_\_) \_\_\_\_\_  
 Unlisted

E-mail Address: \_\_\_\_\_  Home  Work

**STUDENT LIVES WITH:**  Mother  Step-mother  Guardian  Shared Custody  
Spouse Name, if different than Father: \_\_\_\_\_

100%  
 50%  
 Weekends only  
 Mailing list only  
 NO contact

**Mother or Guardian:** \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
*(if different than student)*  
Occupation: \_\_\_\_\_  
Place of Employment: \_\_\_\_\_  
**Is parent an Alum of Woodland Christian School?**  Yes  No

Work Phone: (\_\_\_\_) \_\_\_\_\_  
Cell Phone: (\_\_\_\_) \_\_\_\_\_  
Home Phone: (\_\_\_\_) \_\_\_\_\_  
 Unlisted

E-mail Address: \_\_\_\_\_  Home  Work

**NEWSLETTERS & ANNOUNCEMENTS BY E-MAIL:** Newsletters and announcements will be sent via the e-mail addresses provided. Please send communications to the e-mail address provided for:  Father  Mother  Both

# 2024–2025 ENROLLMENT APPLICATION CONTINUED

## EDUCATIONAL BACKGROUND

List the schools student has attended in the past, beginning with the most recent.

School \_\_\_\_\_ Grade(s) Attended \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

School \_\_\_\_\_ Grade(s) Attended \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

**Has your student attended WCS in the past?**      Yes      No

**If yes,** please indicate the reason/circumstances for leaving and why you would like to return to WCS:

**How far do you intend to have your student(s) remain at Woodland Christian School?**

Through 5th grade

Through 8th grade

Through 12th grade

**FAMILY INFORMATION:** Please list all children under the age of 18 living with the family.

Name	Date of Birth	Grade Level	School Attending

## CHURCH INFORMATION

Does family attend church? <input type="checkbox"/> Yes <input type="checkbox"/> No	Church attendance: <input type="checkbox"/> Weekly <input type="checkbox"/> Once a month <input type="checkbox"/> Less than once a month
Pastor Name:	Name of Church:

**Is grandparent an Alum of Woodland Christian School?**      Yes (*please specify*): \_\_\_\_\_      No

**\*Name of person/current WCS family who referred you to WCS:** \_\_\_\_\_

**I CERTIFY THAT THE INFORMATION SUPPLIED ON ALL DOCUMENTS IS TRUE AND COMPLETE.**

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_      \_\_\_\_\_      \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Parent Signature      Printed Parent Name      Date



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**PARENT LETTER  
FOR APPLICANTS ENTERING GRADES K-12**

*As a parent/guardian, why do you want your student(s) to attend Woodland Christian School?*



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**STUDENT LETTER  
FOR APPLICANTS ENTERING GRADES 9–12**

*As a student, why do you want to attend Woodland Christian School?*



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## EDUCATOR'S RECOMMENDATION FOR APPLICANTS ENTERING GRADES 6-12

*This form must be filled out by a PRESENT ENGLISH OR MATH TEACHER.*

\_\_\_\_\_ is a candidate for enrollment at Woodland Christian School.  
Student's Name

Because of your experience with this child, we are asking you for your input as to his/her social and academic skills. Please assist us by answering the following questions and returning this form within two weeks.

I. **Academic Recommendation:** This recommendation should reflect your opinion of the applicant's ability and potential to succeed in a college-preparatory curriculum.

- I unconditionally recommend this student. Student works at "A" level.
- I strongly recommend this student. Student works at "B" level and has the ability and work habits to continue at this level or above.
- I recommend this student. Student works at the "C/B" level and has the ability and work habits to continue at this level or above.
- I recommend this student with reservations (please explain below).
- I do not recommend this student (please explain below).

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

II. **Character Recommendation:** This recommendation should reflect the desire and motivation this student has for growing spiritually, socially, and in service to his/her fellow human beings.

- I unconditionally recommend this student. Student has outstanding integrity.
- I strongly recommend this student. Student demonstrates attitudes and values, which will make him/her an asset at WCS.
- I recommend this student. Student demonstrates a willingness to grow in his/her values and attitudes. Though occasionally immature, he/she responds well to direction and/or correction.
- I recommend this student with reservations (please explain below).
- I do not recommend this student (please explain below).
- To my knowledge, this student has not been suspended or expelled from school within the last year. If false, please explain.

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

III. **Evaluation:** Please circle the appropriate letter for each of the categories listed below.

A = Excellent	B = Commendable	C = Acceptable	D = Questionable	E = Unacceptable	O = Not Observed	
1. Academic Motivation	A	B	C	D	E	O
2. Academic Ability	A	B	C	D	E	O
3. Initiative	A	B	C	D	E	O
4. Integrity/Responsibility	A	B	C	D	E	O
5. Leadership	A	B	C	D	E	O

IV. **Co-curricular Involvement/Awards:** Please list any co-curricular activities this student has been involved with and any awards (academic, service, leadership, attendance, athletic, etc.) he/she may have received:

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V. **Special Circumstances:** Please explain any special circumstances that we should be aware of should this student be admitted to Woodland Christian School:

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*Thank you for your time, care and concern in filling out this recommendation form.*

I CERTIFY THAT THE INFORMATION SUPPLIED IS TRUE AND COMPLETE.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
School

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Date

\_\_\_\_\_  
Please Print Name

\_\_\_\_\_  
Position

**Please mail to:**  
Woodland Christian School  
1787 Matmor Road  
Woodland CA 95776

## **ASSUMPTION OF RISK, WAIVER OF LIABILITY, and INDEMNIFICATION AGREEMENT**

In consideration for being allowed to participate in Activities at or with Woodland Christian School (“WCS”), on behalf of myself and my next of kin, heirs, and representatives, **I release from all liability and promise not to sue** Foundation for Excellence at Woodland Christian Schools (“FFE”) or WCS, which includes the employees, officers, directors, volunteers, and agents of FFE or WCS (collectively, “**Releasees**”). This release and promise not to sue applies to **any and all claims, including claims of negligence** resulting in any physical or psychological injury (including paralysis and death), illness, damages, or economic or emotional loss suffered because of participation in WCS Activities, including travel to, from said Activities. For purposes of this document, the term “**Activities**” includes, but is not limited to, participation as a student (whether on-site or via distance learning), participation in extracurricular activities (e.g., sports, clubs, camps, extended care), or participation in any other program offered by or at WCS.

I am **voluntarily** participating in these Activities. I acknowledge, appreciate, and agree that there are risks associated with traveling to/from and participating in Activities, which include but are not limited to physical or psychological injury, pain, suffering, illness, disfigurement, temporary or permanent disability (including paralysis), economic or emotional loss, and/or death.

Participation also includes possible exposure to and illness from infectious diseases including but not limited to MRSA, influenza, and **COVID-19**. While particular rules and personal discipline may reduce this risk, the risk of serious illness and death does exist. I understand that these injuries or outcomes may arise from my own or other’s actions, inaction, or negligence; conditions related to travel; or the condition of the Activities’ location(s). **Nonetheless, I assume all related risks, both known or unknown to me, of my participation in Activities, including travel to, from, or during Activities.**

I agree to **hold Releasees harmless** from any and all claims, including attorney’s fees or damage to my personal property, that may occur as a result of my participation in Activities, including travel to, from, and during the Activities. If the Releasees incur any of these types of expenses, I agree to reimburse Releasees. If I need medical treatment, I agree to be financially responsible for any costs incurred as a result of such treatment. I am aware and understand that I should carry my own health insurance.

I am 18 years or older and the parent or legal guardian of the Participant. **I understand the legal consequences of signing this document, including (a) releasing the Releasees from all liability on my and the Participant’s behalf, (b) promising not to sue on my and the Participant’s behalf, (c) and assuming all risks of the Participant’s participation in Activities, including travel to, from, and during Activities.** I allow Participant to participate in this Activity. I understand that I am responsible for the obligations and acts of Participant as described in this document. I agree to be bound by the terms of this document. **I have read this two-page document, and I am signing it freely.** No other representations concerning the legal effect of this document have been made to me.

I understand that this document is written to be as broad and inclusive as legally permitted by the State of California. I agree that if any portion is held invalid or unenforceable, I will continue to be bound by the remaining terms. **I have read this document, and I am signing it freely. No other representations concerning the legal effect of this document have been made to me.**

Minor Student/Participant Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Minor Student/Participant Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Minor Student/Participant Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Minor Student/Participant Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Minor Student/Participant Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Name of Participant's Parent/Guardian(s) (*print*): \_\_\_\_\_

Signature of Participant's Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_