



# DENBIGH BAPTIST CHRISTIAN SCHOOL

13010 Mitchell Point Road ✧ Newport News ✧ Virginia ✧ 23602-6912  
(757)249-2654 FAX(757)249-9480



*A Ministry of  
Denbigh Baptist Church*

**Mr. Robert T. Law**  
Administrator  
High School Principal

**Mr. Stephen L. Fletcher**  
Elementary/Middle School Principal

**Pastor Thor Williams**  
Lead Pastor

**Mrs. Stephanie M. Holloway**  
Guidance Counselor

## *Shaping Hearts and Minds*

### **PURPOSE STATEMENT**

The purpose of Denbigh Baptist Christian School, a mission outreach of Denbigh Baptist Church, is to assist the family in fulfilling their God-given responsibility for the training of their child, by providing an education marked by a Biblical world view, curricular and extra-curricular excellence, and affordability so that students will be equipped to impact their world for the glory of God.

### **MISSION STATEMENT**

The mission of Denbigh Baptist Christian School is to EDUCATE the mind, NURTURE the soul, and SHAPE the character of each student and staff member in a Christ-centered environment, based on the Truth of God's Word.

### **VISION STATEMENT**

The vision of Denbigh Baptist Christian School is to develop students who will ENGAGE God's Truth, EXAMINE all things in light of God's Truth, and EMBRACE what is consistent with God's Truth.



Accredited by the Association of Christian Schools International,  
and recognized by the Commonwealth of Virginia  
through the Virginia Council of Private Education





# WELCOME LETTER

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**T**hank you for considering Denbigh Baptist Christian School for the educational needs of your child. We thank God for every student who enrolls in our school and appreciate the opportunity to invest in each life. Many of your questions will be answered as you review the attached materials, and we suggest that you visit our website at [www.dbcs.org](http://www.dbcs.org) for more information.

Founded in 1970 as a ministry of Denbigh Baptist Church, the purpose of DBCS is to provide a sound education, integrated with a Christian view of God and the world, based upon the authoritative and inerrant Word of God. Our Statement of Faith, which governs both the church and school, can be found on the church's website at [www.dbconline.com](http://www.dbconline.com). The DBCS Student Handbook can be picked up at the school office.

Today, DBCS is a school of approximately 220 students with classes from our Early Learning Center through the 12th grade. Since 1997, we have been accredited by The Association of Christian Schools International, an agency which is recognized in the Commonwealth of Virginia through the Virginia Council of Private Education.

Our school offers a traditional academic setting in which the fundamentals, including a phonetic reading program, are taught. Music, Art, and Computers are a regular part of the elementary and middle school curriculum and are offered as electives in high school. Students can graduate from DBCS with a General Studies Diploma or an Advanced Studies Diploma. Honors and Advanced Placement courses are offered for qualified high school students. Select dual credit courses are available to qualified Juniors and Seniors.

Denbigh Baptist Christian School is pleased to offer an exciting athletic program for both girls and boys. With Middle School, Junior Varsity, and Varsity teams, students participate in interscholastic athletics through the METRO Athletic Conference. Our program includes soccer, volleyball, cross country, basketball, baseball, and track.

Our graduates have continued their education at such technical schools as The Apprentice School at Newport News Shipbuilding. Others have been admitted to very selective colleges in the Commonwealth of Virginia as well as across the country. Some of these schools include the College of William and Mary, Virginia Tech, the University of Virginia, the United States Air Force Academy, the United States Naval Academy, Liberty University, Grove City College, and Wheaton College.

We look forward to meeting you and your child!

Robert Law  
Administrator

*"The fear of the Lord is the beginning of knowledge: but fools despise wisdom and instruction"*  
*Proverbs 1:7*





# STUDENT REQUIREMENTS

Denbigh Baptist Christian School is pleased to offer options to Middle and High School students who wish to attend DBCS on a part-time basis, whether they are homeschoolers filling gaps, or students doing make-up classes.

## **The following are the Part-Time Student Requirements:**

### **Number of Courses**

A student may take a maximum of 3 credits per year. Each course is worth 1 credit and lasts the entire year.

### **Campus Safety**

The student must sign in and out at the office every day. Students are expected to be in class before the bell rings. Should a student not be able to attend, parents must call the school office at 757-249-2654 and leave a voice mail by 8:00 am.

Students may not loiter on campus. No-credit Study Hall is available for students who require this service.

### **Chapel**

Chapel attendance each week is highly recommended.

### **Policies**

Students are expected to adhere to the Student Handbook. This includes our dress code. This document is available on our website.

### **Athletics**

DBCS is a member of the METRO Athletic Conference. The METRO conference does not allow part time / homeschool students to participate in athletics.

### **Testing**

We offer several tests for our students. Fees will be assessed.

Iowa Test	Grades 6-9
PSAT	Grade 10
AP Exams	Grades 11-12

## **Bell Schedule**

	<b>Regular Schedule</b>	<b>Thursday Chapel Schedule</b>
Home Room	8:15 - 8:23	8:15 - 8:23
First Period	8:27 - 9:17	8:27 - 9:11
<b>Chapel</b>		<b>9:15 - 9:50</b>
Second Period	9:21 - 10:11	9:55 - 10:46
Third Period	10:15 - 11:05	10:50 - 11:34
Fourth Period	11:10 - 12:00	11:38 - 12:22
Lunch	12:05 - 12:30	12:26 - 12:51
Fifth Period	12:35 - 1:25	12:55 - 1:39
Sixth Period	1:30 - 2:20	1:43 - 2:27
Seventh Period	2:25 - 3:15	2:31 - 3:15





# COURSES OF STUDY 2024-2025

Subject Area	Course	Grade Level	Book Fee
Bible	The Story of the Old Testament	8	\$24
Bible	Patterns for Christian Living	9 - 11	\$24
Bible	Christian Worldview: Understanding the Times	12	\$40
English	English / Language Arts	8 - 12	\$25
English	Honors English / Language Arts	9 - 11	\$25
English	English Composition & Literature Advanced Placement (AP)	12	\$65
Math	Algebra 1	8 - 12	\$20
Math	Geometry	9 - 12	\$20
Math	Algebra 2	10 - 12	\$20
Math	Algebra 2 / Trigonometry	10 - 12	\$20
Math	Personal Finance/ Consumer Math (Tentative)	11, 12	\$35
Math	Statistics Advanced Placement (AP)	11, 12	\$30
Math	Pre-Calculus	11, 12	\$30
Math	Calculus AB Advanced Placement (AP)	11, 12	\$30
Physical Education / Health	Physical Education / Health (10th includes Driver's Ed, First Aid and CPR)	8 - 10	\$15
Science	Earth Science	8	\$40
Science	Physical Science	9	\$20
Science	Biology	10	\$40
Science	Chemistry	11, 12	\$20
Science	Science Elective	11, 12	\$40
Science	Physics	11, 12	\$20
Social Studies	World Geography	8	\$15
Social Studies	World History	9	\$15
Social Studies	United States History	11	\$15
Social Studies	American Government	12	\$15
Electives	Art	9 - 12	\$30*
Electives	Choir	9 - 12	\$100**
Electives	Spanish 1, 2	8 - 12	\$35
Electives	Study Hall	8 - 12	
Electives	Yearbook	10 - 12	

\* Art-Supply Fee

\*\* Music-Formal Wear/Polos







# FINANCIAL INFORMATION 2024-2025

## 1. Registration and Testing Fees

These fees are *non-refundable* and are not deducted from tuition

- \* **\$100** Registration fee per student / **\$200** max. per family
- \* **\$45** Testing fee per student, payable on day of testing, if testing is required

## 2. Tuition

A discount has been built into the payment schedule for those paying on the annual or semester plan.

	1 Class	2 Classes	3 Classes	Study Hall
9-Month	\$115	\$230	\$345	\$25
Semester	\$500	\$1,000	\$1,500	\$110
Annual	\$1,000	\$2,000	\$3,000	\$220

### Payment Plans

- \* 9-month: Payment is due on the 1st of the month, August-April.
- \* Per semester: Payment is due August 1 and January 2.
- \* In full: Payment is due by August 1.
- \* Payment plans do NOT include Registration, Testing, Book, and Lunch Fees. These fees must be paid in full.

### Methods of Payment

- \* Cash, Check
- \* Visa, MasterCard, Discover. Credit card payments are NOT accepted over the phone.
- \* Payments are accepted on-line at [www.dbcs.org](http://www.dbcs.org). You can find this on the Home page at the bottom under Services— On-line Payment.

## 3. Book Fee

- \* The Book fee for each class is listed on the Courses chart. *It is non-refundable. It must be paid in full by September 1st.*

## 4. Study Hall Fee

- \* Loitering on campus is prohibited. A no-credit Study Hall is available for students who require this service.

## DBCS Financial Policy

- \* Tuition is due by the close of business on the 1st of the month.
- \* **Late Fee:** \$50 late fee will be assessed if paid after the 10th or the first business day after the 10th.  
**If payment, including late fees, is not received on the 20th, the student will not be allowed to attend class starting on the 21st.** When the account is then brought up-to-date, including the late fees, the student may return to class, but will not be afforded make-up work or tutoring to fill the missed classes.
- \* **NSF Fee:** \$35 fee will be assessed for checks returned for non-sufficient funds. After two occurrences in a school year, only guaranteed funds (cashier's checks, money orders, cash, or certified check) will be accepted for payment.
- \* **Accounts in Arrears:** If unforeseen financial difficulties arise, parents/guardians are responsible to notify the School Administrator immediately. DBCS reserves the right to suspend educational services, exam administration and issuance of grades, transcripts, and medical records due to delinquent accounts. A late fee of \$50 per month will be assessed to delinquent accounts (i.e., those not paid in full).
- \* **No student will be allowed to reenter school in August until all accounts are paid in full.**





# APPLICATION PROCEDURES

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## **Step 1-Application Package**

**Complete the online portion with Gradelink. Turn in the completed application package, along with the non-refundable registration fee of \$100 per student / \$200 max. per family.**

No documents may be faxed or e-mailed to the school separately.

When your student's completed application is received, this reserves a space in the desired grade as your family goes through the application process. Receipt of the application does not guarantee final acceptance into the desired grade.

## **Step 2-Testing**

**Entrance testing will be scheduled for your student.**

Testing will be required for grades E3 - 5th and may be required for 6th - 12th. Payment of \$25 for grades E3 - K5 or \$45 for grades 1 - 12 will be due at the time of testing.

## **Step 3-Interview**

**A parent/student interview with the respective principal will be scheduled when the applicant is brought in for testing.**

Families that have students applying to both the elementary and the middle/high school will interview with both principals.

Students are required to attend the interview.

## **Step 4-Notification**

**The parent/guardian will receive notification of acceptance or denial, following the interview.**

All acceptances are provisional, pending the receipt of official student records from the previous school(s).





# APPLICATION CHECKLIST

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***Your child's application will not be accepted  
without every item on this list.***

## ***Grades 6th-12th***

- ☐ Registration fee of \$100 per student, with a maximum of \$200 per family
- ☐ Online registration with Gradelink
- ☐ Fully completed student application forms
- ☐ Child's original state-issued birth certificate
- ☐ Final custody judgment, if applicable
- ☐ Recent copy of the child's immunization record
- ☐ Recent copy of the child's latest physical
- ☐ Latest report card from current school year
- ☐ Final report card from the previous grade
- ☐ Latest achievement test scores
- ☐ Copies of all IEPs, 504 plans, or public school mandated "Instructional Support Plans" the applicant has ever received
- ☐ Homeschool Students: If the student's coursework is not transcribed by an external source, please complete a Homeschool Student Report for each year of homeschooling





# School Calendar 2024-2025

## Minutemen

*School begins at 8:15 am. Drop-off is from 7:45-8:10. Elementary Dismissal is at 3:05.  
Middle / High School Dismissal is at 3:15. On half-days, Elementary dismisses at 11:35 am,  
Middle/High School at 11:45 am, and Extended Care remains open until 6 pm.*

**Most current calendar check here: <https://www.dbcs.org/calendar.html>**

### AUGUST '24

- 1 Fall Sports Try-Outs ~ see website
- 1-2 Praise Band Camp ~ 10 am - 1 pm
- 9, 12 Teacher Work Days
- 9 Seniors & Staff Portraits (tentative)
- 13 Open House ~ 3 - 5 pm
- 6<sup>th</sup> & 7<sup>th</sup> Grade Orientation ~ 4 - 4:30 pm
- 9<sup>th</sup> Grade Orientation ~ 4:30 - 5 pm
- 14 1<sup>st</sup> Day of School ~ ½ Day
- 15 ½ Day
- 16 Full days begin

### SEPTEMBER '24

- 2 NO SCHOOL ~ Labor Day
- 9 All-School Fundraiser Kick-off
- 12 Mid-Quarter
- 26-28 Junior Class Trip - D.C.
- 28 Fall Photos (tentative)
- Fall Sports Photos ~ 3:30-5:30 pm

### OCTOBER '24

- 9 PSAT Testing for Sophomores
- 11 Chili Cook-off
- 11 1<sup>st</sup> Quarter ends
- 14 NO SCHOOL ~ Columbus Day
- 17 Report Cards sent home

### NOVEMBER '24

- 6 Fall Photos Make Up Day (tentative)
- Senior/ Staff Portraits Make Up Day
- 11 Mid-Quarter
- 13 Winter Sports Photos ~ 3:30-5:30 pm
- 27-29 NO SCHOOL ~ Thanksgiving Holiday

### DECEMBER '24

- 6 MS/HS Christmas Concert & Art Show ~ 7 pm
- 13 Elem. Christmas Concert & Art Show ~ 7 pm
- 13 ½ Day ~ Exam Review
- 16 ½ Day ~ 7<sup>th</sup> Period Exam / Exam Review
- 17 ½ Day ~ 1<sup>st</sup> & 4<sup>th</sup> Period Exams
- 18 ½ Day ~ 2<sup>nd</sup> & 5<sup>th</sup> Period Exams
- 19 ½ Day ~ 3<sup>rd</sup> & 6<sup>th</sup> Period Exams
- 19 E3/E4/K5 Christmas Concert/Chapel ~ 8:30 am
- 1st Semester ends
- 20-1/5 NO SCHOOL ~ Christmas Holiday

### JANUARY '25

- 6 School resumes
- 8 Report Cards sent home
- 11 Homecoming
- 20 NO SCHOOL ~ Martin Luther King, Jr. Day

### FEBRUARY '25

- 6 Mid-Quarter
- 17 NO SCHOOL ~ Presidents' Day
- 19 Class Photos/12th & K5 Cap & Gown (tentative)

### MARCH '25

- 2-7 Senior Trip
- 12 3rd Quarter ends
- 17 Report Cards sent home
- 19 Spring Sports Photos ~ 3:30-5:30 pm (tentative)
- 23-26 ACSI Reaccreditation Visit (tentative)

### APRIL '25

- 7-11 NO SCHOOL ~ Spring Break
- 18 Elem. Grandparent's Day Concert & Art Show
- E3-2nd ~ 9:00 am, 3rd-5th ~ 11:00 am
- 21 Mid-Quarter
- 21-25 Achievement Testing
- 25 MS/HS Spring Concert & Art Show ~ 7 pm
- 26 Sophomore Ring Banquet

### MAY '25

- 2 Junior/Senior Banquet
- 5-9 HS Art Display
- 14 K5 Graduation ~ 10 am
- Last Day of School ~ E3, E4, & K5
- 16 8<sup>th</sup> Grade Promotion ~ 11 am
- 19 ½ Day ~ Exam Review
- 20 ½ Day ~ 1<sup>st</sup> & 4<sup>th</sup> Period Exams
- 21 ½ Day ~ 2<sup>nd</sup> & 5<sup>th</sup> Period Exams
- 22 ½ Day ~ 3<sup>rd</sup> & 6<sup>th</sup> Period Exams
- 1<sup>st</sup>-3<sup>rd</sup> Grade Awards ~ 8:30 am
- 23 Last Day of School ~ ½ Day
- 7<sup>th</sup> Period Exam ~ 8:30 am
- 4<sup>th</sup> Grade Awards, 5<sup>th</sup> Grade Promotion ~ 8:30 am
- MS/HS Awards ~ 10:05 am
- Graduation Class of 2025 ~ 7 pm







# ONLINE REGISTRATION OPTION

Our school offers online registration through Gradelink here:

<https://secure.gradelink.com/730/enrollment>

## Denbigh Baptist Christian School

[Complete Enrollment](#)[Create Account](#)[Password Reset](#)

Welcome to the online enrollment site for Denbigh Baptist Christian School

If this is your first time here, you will need to register using your email address

Email Address

Password

Confirm Password

Register

Is this a Public Computer?

[Yes](#)[No](#)

[Terms of Service](#)[Privacy](#)[Contact](#)[Home](#)

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Terms, conditions, features, availability, pricing, support and service options subject to change without notice.

**Registration Fee:** \$100 per student / \$200 maximum per family





# ADMISSION APPLICATION 2024-2025

Denbigh Baptist Christian School adheres to a policy of admitting students of any race, color, nationality or ethnic origin to all rights, privileges, programs and activities generally accorded, or made available to students at the school. DBCS does not discriminate on the basis of race, color, national or ethnic origin in the administration of its educational, athletic, or any other policies or school-administered programs. However, DBCS reserves the right to refuse admission to, or dismiss, any student if they or their family profess, promote, or participate in a lifestyle that is contrary to the established teaching of Denbigh Baptist Church.

**Student's Name:** \_\_\_\_\_  
Last First Middle

**Date of Birth:** \_\_\_\_/\_\_\_\_/\_\_\_\_ **Age:** \_\_\_\_\_ **Male:** \_\_\_\_\_ **Female:** \_\_\_\_\_

**Grade Entering:** \_\_\_\_\_

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

City State Zip Code

**Student's Cell Phone:** \_\_\_\_\_

**Parental Marital Status:** \_\_\_\_ Married \_\_\_\_ Separated \_\_\_\_ Divorced \_\_\_\_ Single \_\_\_\_ Custody Paperwork

**Student lives with:** \_\_\_\_ Father \_\_\_\_ Mother \_\_\_\_ Stepfather \_\_\_\_ Stepmother \_\_\_\_ Other

US Citizen? ☐ Yes ☐ No

Country of Visa \_\_\_\_\_

Expiration of Visa \_\_\_\_/\_\_\_\_/\_\_\_\_

## **Family 1**

**Father/Guardian** \_\_\_\_\_ **Mother/Guardian** \_\_\_\_\_

Address \_\_\_\_\_ Address \_\_\_\_\_

Cell # \_\_\_\_\_ Cell # \_\_\_\_\_

Home # \_\_\_\_\_ Home # \_\_\_\_\_

Work # \_\_\_\_\_ Work # \_\_\_\_\_

E-Mail \_\_\_\_\_ E-mail \_\_\_\_\_

Place of Employment \_\_\_\_\_ Place of Employment \_\_\_\_\_

Church Affiliation \_\_\_\_\_ Church Affiliation \_\_\_\_\_

## **Family 2**

**Father/Guardian** \_\_\_\_\_ **Mother/Guardian** \_\_\_\_\_

Address \_\_\_\_\_ Address \_\_\_\_\_

Cell # \_\_\_\_\_ Cell # \_\_\_\_\_

Home # \_\_\_\_\_ Home # \_\_\_\_\_

Work # \_\_\_\_\_ Work # \_\_\_\_\_

E-Mail \_\_\_\_\_ E-mail \_\_\_\_\_

Place of Employment \_\_\_\_\_ Place of Employment \_\_\_\_\_

Church Affiliation \_\_\_\_\_ Church Affiliation \_\_\_\_\_



## Admission Application continued

**Please provide two LOCAL emergency contacts who can pick up your child from school if we are unable to reach you in the event of an illness or an emergency school closure**

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Cell # \_\_\_\_\_ Home # \_\_\_\_\_ Work # \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Cell # \_\_\_\_\_ Home # \_\_\_\_\_ Work # \_\_\_\_\_

Please list all schools the student has attended.

SCHOOL NAME	COMPLETE ADDRESS	GRADES

Condition of student's health: Excellent \_\_\_\_\_ Good \_\_\_\_\_ Fair \_\_\_\_\_ Poor \_\_\_\_\_

Does your child have any disability or medical condition that may require special services or care?

\_\_\_\_\_ No \_\_\_\_\_ Yes If "Yes" please explain \_\_\_\_\_

Does your child suffer from any allergies? \_\_\_\_\_ No \_\_\_\_\_ Yes

If "Yes", is treatment required? \_\_\_\_\_ Will medication need to be kept at school? \_\_\_\_\_

### WAIVER OF CONFIDENTIAL MATERIALS

We understand that recommendations and evaluations obtained for the purpose of admission to Denbigh Baptist Christian School are **confidential** (excluding transcripts), and as parents/legal guardians, we waive our right to them. To the best of our knowledge, the information in this application is accurate. We also understand that misrepresentation might invalidate the application process or be grounds for dismissal after enrollment.

Father/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Mother/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_



## Admission Application continued

**All the following questions require an explanation, if answered "Yes".  
Please use a separate sheet of paper, if needed.**

1. Has the applicant ever "skipped" or been placed in a higher grade?  
No \_\_\_\_\_ Yes \_\_\_\_\_ Explain: \_\_\_\_\_
2. Has the applicant ever repeated a grade?  
No \_\_\_\_\_ Yes \_\_\_\_\_ Which grades? \_\_\_\_\_ Explain: \_\_\_\_\_
3. Have there been discipline problems that required intervention beyond that of the classroom teacher?  
No \_\_\_\_\_ Yes \_\_\_\_\_ Explain: \_\_\_\_\_
4. Has the applicant ever been suspended, expelled, or asked to withdraw from a school?  
No \_\_\_\_\_ Yes \_\_\_\_\_ Explain: \_\_\_\_\_
5. Has the applicant ever been brought before the juvenile court or any law enforcement agency?  
No \_\_\_\_\_ Yes \_\_\_\_\_ Explain: \_\_\_\_\_
6. Has the applicant ever been suspected of having a learning disability or attention challenges?  
No \_\_\_\_\_ Yes \_\_\_\_\_ Explain: \_\_\_\_\_
7. Has the applicant ever been tested for a learning disability or attention challenges?  
No \_\_\_\_\_ Yes \_\_\_\_\_ If "Yes", a copy is required. Explain: \_\_\_\_\_
8. Has the applicant ever had an IEP, 504 Plan (including speech/language), or an Instruction Support Plan?  
No \_\_\_\_\_ Yes \_\_\_\_\_ If "Yes", a copy is required. Explain: \_\_\_\_\_
9. Has the applicant ever required academic accommodations?  
No \_\_\_\_\_ Yes \_\_\_\_\_ Explain: \_\_\_\_\_
10. Has medication ever been recommended or prescribed for emotional, learning, or attention challenges?  
No \_\_\_\_\_ Yes \_\_\_\_\_ Explain: \_\_\_\_\_
11. Please list the name(s) of any private practice counselor, psychiatrist, or clinical psychologist applicant has seen/sees \_\_\_\_\_
12. Has the applicant ever attended a school or participated in a program designed for students who have special academic needs or abilities (including gifted, special education, tutoring, or therapy)?  
No \_\_\_\_\_ Yes \_\_\_\_\_ Explain: \_\_\_\_\_



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[illegible]



# COURSE SELECTION

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Please choose the courses you would like your student to attend

**Student's Name** \_\_\_\_\_

**Class #1**

Course Name \_\_\_\_\_

Grade Level \_\_\_\_\_

**Class #2**

Course Name \_\_\_\_\_

Grade Level \_\_\_\_\_

**Class #3**

Course Name \_\_\_\_\_

Grade Level \_\_\_\_\_







# STATEMENT OF COOPERATION

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In making application for my child, it is my desire to have him/her complete the 2024-2025 school year. I understand that the policy of the school is to make no refund on registration, book, or testing fees.

I give permission for my child to take part in all school activities, including sports and school-sponsored trips away from the school premises. I absolve the school from liability to me or my child because of injury to my child at school or during any school activity.

I also give permission for emergency medical treatment, to be administered, as deemed necessary by the attending medical personnel, while my child is under the supervision of Denbigh Baptist Christian School (DBCS). This includes all school-sponsored activities.

I understand that DBCS occasionally uses photographs of individual students, as well as the entire student body, in various newsletters, publication ads, brochures, bulletin boards, videos, school Facebook page, and school websites. I understand that if this is problematic for me, I will inform the office staff when submitting this application.

I understand that, if I, or any member of my immediate family, reach a point of disagreement on an issue of a non-criminal nature with DBCS and/or its legal corporate entity, in keeping with I Corinthians 6:1, I agree to submit to a board of conciliation, the members of which have been mutually selected by myself and officials of the school, rather than taking the dispute to a civil court. I agree that the procedure to be followed, including costs involved, will be that which has been established by the Association of Christian Conciliation Services.

I understand that students are admitted for one year at a time, and that DBCS reserves the right to dismiss a student at any time during the school year. Any student who persistently neglects work, who fails to meet academic standards, who exercises poor citizenship, or who fails to cooperate, may be asked to withdraw from the school. Specifics concerning academic, spiritual, and behavioral standards are detailed in the Student Handbook.

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I and my **Middle/High School** student have read and agree to support the school in following the policies stated in the Denbigh Baptist Christian School Student Handbook. If any questions or problems arise, I will bring them to the attention of the proper authority.

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*Middle/High School Parent Signature*

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*Date*

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*Middle/High School Student Signature*

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*Date*





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*The mission of Denbigh Baptist Christian School is to EDUCATE the mind, NURTURE the soul, and SHAPE the character of each student and staff member in a Christ-centered environment, based on the Truth of God's Word.*

## RECORDS RELEASE

This is an official records request.

\_\_\_\_\_  
*Student's Printed Name*                      *Date of Birth*                      *Grade Entering*

### Transferring from:

\_\_\_\_\_  
*School Name*

\_\_\_\_\_  
*Street Address*

\_\_\_\_\_  
*City*                      *State*                      *Zip*

\_\_\_\_\_  
*Phone Number*                      *Fax Number*

I, \_\_\_\_\_, hereby authorize \_\_\_\_\_  
*Parent/Guardian*                      *Student's Current School*

to release the following records of \_\_\_\_\_  
*Student's Printed Name*

to the Admissions Office of Denbigh Baptist Christian School for the purpose of admissions review and academic placement.

1. Official transcripts/grades and comments for the previous academic years
2. Results of standardized achievement and/or aptitude tests
3. Records of attendance and disciplinary actions
4. Records of personal evaluations, psychological reports, legal reports, medical reports
5. Confidential records, including IEPs

\_\_\_\_\_  
*Parent/Guardian Signature*                      *Date*

**Transferring School:** *Please send the records listed above to:*

Denbigh Baptist Christian School  
Director of Admissions  
13010 Mitchell Point Road  
Newport News, VA 23602  
Fax: (757) 249-9480  
E-mail: [chughes@denbighbaptist.org](mailto:chughes@denbighbaptist.org)





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## ENGLISH TEACHER RECOMMENDATION

### Parent/Guardian:

*Please sign the authorization below and return with your child's application. If additional insight/evaluation is required by our review committee, this will be mailed to your child's former English teacher.*

\_\_\_\_\_  
Student's Printed Name

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Grade Entering

\_\_\_\_\_  
Current English Teacher's Name

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

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Fax Number

I hereby authorize the release of my child's records and evaluative data to DBCS.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

### Teacher:

*Please complete the following information (front and back) on the above named student and return this form in the envelope provided as soon as possible. Thank you for your time and attention to this evaluation.*

In what capacity and for how long have you known this student?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please elaborate on this student's strengths and weaknesses.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

ENGLISH RECOMMENDATION CONT...	POOR	BELOW AVERAGE	AVERAGE	ABOVE AVERAGE	EXCELLENT
Peer relationships					
Adult relationships					
Integrity					
Positive leadership					
Self-confidence					
Consideration of others					
Receives correction gra- ciously/humbly					
Academic achievement					
Academic potential					
Attention span					
Use of time					
Written expression					
Verbal expression					
Homework completion					
Creativity					
Classroom conduct					

I ☐ **do not recommend** ☐ **recommend** ☐ **strongly recommend**  
this applicant for admission to Denbigh Baptist Christian School.

\_\_\_\_\_  
*Printed Name of Recommending Teacher*

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Name of School*

\_\_\_\_\_  
*Date*

*Denbigh Baptist Christian is accredited by the Association of Christian Schools International  
This accreditation is recognized by the Commonwealth of Virginia and the Virginia Council for Private Education*



# DENBIGH BAPTIST CHRISTIAN SCHOOL

13010 Mitchell Point Road ~ Newport News ~ Virginia ~ 23602-6912 ~ (757) 249-2654 ~ Fax (757) 249-9480

*The mission of Denbigh Baptist Christian School is to EDUCATE the mind, NURTURE the soul, and SHAPE the character of each student and staff member in a Christ-centered environment, based on the Truth of God's Word.*

## MATH TEACHER RECOMMENDATION

### Parent/Guardian:

*Please sign the authorization below and return with your child's application. If additional insight/evaluation is required by our review committee, this will be mailed to your child's former Math teacher.*

\_\_\_\_\_  
Student's Printed Name

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Grade Entering

\_\_\_\_\_  
Current Math Teacher's Name

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

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Fax Number

I hereby authorize the release of my child's records and evaluative data to DBCS.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

### Teacher:

*Please complete the following information (front and back) on the above named student and return this form in the envelope provided as soon as possible. Thank you for your time and attention to this evaluation.*

In what capacity and for how long have you known this student?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please elaborate on this student's strengths and weaknesses.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

MATH RECOMMENDATION CONT...	POOR	BELOW AVERAGE	AVERAGE	ABOVE AVERAGE	EXCELLENT
Peer relationships					
Adult relationships					
Integrity					
Positive leadership					
Self-confidence					
Consideration of others					
Receives correction gra- ciously/humbly					
Academic achievement					
Academic potential					
Attention span					
Use of time					
Written expression					
Verbal expression					
Homework completion					
Creativity					
Classroom conduct					

I ☐ **do not recommend** ☐ **recommend** ☐ **strongly recommend**  
this applicant for admission to Denbigh Baptist Christian School.

\_\_\_\_\_  
*Printed Name of Recommending Teacher*

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Name of School*

\_\_\_\_\_  
*Date*

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# HEALTH INFORMATION FORM 2024-2025

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**Student's Name** \_\_\_\_\_ Male \_\_\_\_\_ Female  
Last First Middle

Date of Birth \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_

Student's Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Mother's Name \_\_\_\_\_ Phone \_\_\_\_\_

Father's Name \_\_\_\_\_ Phone \_\_\_\_\_

***Please note: A Medication Authorization Form must be completed for every medication that needs to be given at school.***

---

## ALLERGIES

\_\_\_\_\_ Yes \_\_\_\_\_ No

Type (Food, Insects, Drugs, Seasonal, Other) \_\_\_\_\_

Reaction \_\_\_\_\_

Currently prescribed medications and treatments

\_\_\_\_\_

\_\_\_\_\_ **Medication needs to be given at school**

---

## ASTHMA

\_\_\_\_\_ Yes \_\_\_\_\_ No

Triggers \_\_\_\_\_

Symptoms \_\_\_\_\_

Currently prescribed medications and treatments

\_\_\_\_\_

\_\_\_\_\_ **Asthma Action Plan**

\_\_\_\_\_ **Medication needs to be given at school**

---

## ADD/ADHD

\_\_\_\_\_ Yes \_\_\_\_\_ No

Currently prescribed medications and treatments

\_\_\_\_\_

\_\_\_\_\_ **Medication needs to be given at school**

---

*Continued on reverse*



## Health Information Form continued

### OTHER HEALTH CONCERNS

Please check all that apply

\_\_\_\_\_ Bladder Problem

\_\_\_\_\_ Bleeding Problem

\_\_\_\_\_ Bowel Problem

\_\_\_\_\_ Cancer

\_\_\_\_\_ Cerebral Palsy

\_\_\_\_\_ Cystic Fibrosis

\_\_\_\_\_ Dental Problems

\_\_\_\_\_ Diabetes

\_\_\_\_\_ Head Injury

\_\_\_\_\_ Hearing Problem

\_\_\_\_\_ Heart Condition

\_\_\_\_\_ Muscle Problem

\_\_\_\_\_ Seizures

\_\_\_\_\_ Sickle Cell Disease

\_\_\_\_\_ Speech Problem

\_\_\_\_\_ Spinal Injury

\_\_\_\_\_ Surgery

\_\_\_\_\_ Vision Problems

\_\_\_\_\_ Other \_\_\_\_\_

Please explain \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

List all prescription, over-the-counter, and herbal medications your child takes regularly

\_\_\_\_\_

I, \_\_\_\_\_, hereby authorize my child's health care provider and designated provider of health care in the school setting, including all school-sponsored activities (e.g. athletic programs, field trips, etc.) to discuss my child's health concerns and/or exchange information pertaining to this form. Any photocopy of this form carries the same authority as the original.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date



# TUITION PAYMENT SCHEDULE 2024-2025

*Only one form is required to be returned per family.*

## Tuition

	1 Class	2 Classes	3 Classes	Study Hall
<b>9-Month</b>	\$115	\$230	\$345	\$25
<b>Semester</b>	\$500	\$1,000	\$1,500	\$110
<b>Annual</b>	\$1,000	\$2,000	\$3,000	\$220

## Payment Plan

- ☐ **Nine Equal Payments**  
Pay tuition in nine (9) equal monthly payments. The first payment is due **August 1, 2024**, with the final payment due **April 1, 2025**.
- ☐ **Per-semester Payments**  
Pay the first semester tuition **by August 1, 2024**. Pay the second semester tuition by **January 2, 2025**.
- ☐ **Payment in Full**  
Pay full tuition by **August 1, 2024**.

## Financially Responsible Party/Parties

Please print the name(s) and phone number(s) of the financially responsible party/parties.

Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Your statements will be e-mailed to the address(es) given below:

E-mail Address \_\_\_\_\_

E-mail Address \_\_\_\_\_



## Tuition Payment Schedule continued

### **DBCS Financial Policy**

- \* Tuition is due by the close of business on the 1st of the month.
- \* **Late Fee:** \$50 late fee will be assessed if paid after the 10th or the first business day after the 10th.  
**If payment, including late fees, is not received on the 20th, the student will not be allowed to attend class starting on the 21st.** When the account is then brought up-to-date, including the late fees, the student may return to class, but will not be afforded make-up work or tutoring to fill the missed classes.
- \* **NSF Fee:** \$35 fee will be assessed for checks returned for non-sufficient funds. After two occurrences in a school year, only guaranteed funds (*cashier's checks, money orders, cash, or certified check*) will be accepted for payment.
- \* **Accounts in Arrears:** If unforeseen financial difficulties arise, parents/guardians are responsible to notify the School Administrator immediately. DBCS reserves the right to suspend educational services, exam administration and issuance of grades, transcripts, and medical records due to delinquent accounts. A late fee of \$50 per month will be assessed to delinquent accounts (i.e., those not paid in full).
- \* **Early Withdrawal:** If a student is unable to complete the academic year, tuition must be paid through the month the student was enrolled.

For the school year 2024-2025, I agree to pay all tuition and fees according to the option I chose.

\_\_\_\_\_  
*Printed Name of Father/Guardian*

\_\_\_\_\_  
*Signature of Father/Guardian*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Printed Name of Mother/Guardian*

\_\_\_\_\_  
*Signature of Mother/Guardian*

\_\_\_\_\_  
*Date*



# *Denbigh Baptist Christian School*

## **HOMESCHOOL STUDENT REPORT FORM** **Grades 6-12**

*Please complete a separate form for each grade level of homeschooling*  
*This must accompany the application packet*

Student's Name \_\_\_\_\_

School Year \_\_\_\_\_ Grade \_\_\_\_\_ Completed ☐ In Progress ☐

Was an achievement test taken for this school year? Yes ☐ No ☐

<b>ENGLISH/LANGUAGE</b>	Semester 1	Semester 2
Course Title		
Grades		
Curriculum Used		
<b>MATHEMATICS</b>	Semester 1	Semester 2
Course Title		
Grades		
Curriculum Used		
<b>SCIENCE</b>	Semester 1	Semester 2
Course Title		
Grades		
Curriculum Used		
<b>SOCIAL STUDIES/ HISTORY</b>	Semester 1	Semester 2
Course Title		
Grades		
Curriculum Used		
<b>BIBLE</b>	Semester 1	Semester 2
Course Title		
Grades		
Curriculum Used		

**HOMESCHOOL STUDENT REPORT FORM***Continued*

<b>FOREIGN LANGUAGE</b>	Semester 1	Semester 2
Course Title		
Grades		
Curriculum Used		
<b>PE/HEALTH</b>	Semester 1	Semester 2
Course Title		
Grades		
Curriculum Used		
<b>OTHER COURSES</b>	Semester 1	Semester 2
Course Title		
Grades		
Curriculum Used		
<b>OTHER COURSES</b>	Semester 1	Semester 2
Course Title		
Grades		
Curriculum Used		
<b>OTHER COURSES</b>	Semester 1	Semester 2
Course Title		
Grades		
Curriculum Used		



# *Denbigh Baptist Christian School*

## **HOMESCHOOL STUDENT REPORT FORM** **Kindergarten to 5<sup>th</sup> Grade**

*Please complete a separate form for each grade level of homeschooling*  
*This must accompany the application packet*

Student's Name \_\_\_\_\_

School Year \_\_\_\_\_ Grade \_\_\_\_\_ Completed ☐ In Progress ☐

Was an achievement test taken for this school year? Yes ☐ No ☐

Subject	Curriculum	1 <sup>st</sup> Quarter	2 <sup>nd</sup> Quarter	3 <sup>rd</sup> Quarter	4 <sup>th</sup> Quarter	Year
Bible						
Reading						
Phonics						
Language						
Spelling						
Math						
History						
Penmanship						
Art						
Music						
PE						
Computers						
Other:						
Other:						







# SURVEY

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

Child's Name \_\_\_\_\_

## How did you find us?

☐ **Alumni** ~ Class of \_\_\_\_\_

☐ **Word of Mouth** ~ Who told you about us \_\_\_\_\_

☐ **Website** ~ How did you find our website?

☐ **Facebook Post** ~ I noticed a post in my Facebook feed.

☐ **Google** ~ Standard search

☐ **Google Ad** ~ I clicked on the search returns ad at the top of the page or an ad on the right side of the page.

☐ **Other** ~ \_\_\_\_\_

☐ **Radio** ~ I heard the ad on 89.1 FM, 1650 AM, 1010 AM, or 1270 AM.

☐ **Mailer** ~ I received a flyer in my mailbox.

☐ **Other** ~ Please explain \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Thank you for taking the time to complete this survey.

DBCS School Management Team





# PARTICIPATION AGREEMENT

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## Participation Agreement

I acknowledge that school attendance involves risk to the student (and to the student's parents or guardians, if the student is a minor), and may result in various types of injury including, but not limited to, the following: sickness, exposure to infectious/communicable disease, bodily injury, death, emotional injury, personal injury, property damage, and financial damage.

In consideration for the opportunity to attend school, parents/guardians of the student acknowledge and expressly accept the risks of injury and/or illness associated with participation. Parents/guardians accept personal financial responsibility for any injury or other loss sustained during school as well as for any medical treatment rendered to the student that is authorized by the school. Further, parents/guardians release and promise to indemnify, defend, and hold harmless Denbigh Baptist Church, Denbigh Baptist Christian School, its directors, officers, employees, volunteers, agents, and representatives, for any injury, claim, expense, causes of action, lawsuits, damages and liabilities that they may have, arising directly or indirectly out of attending school, whether such injury arises out of the negligence of the school, the participant, or otherwise.

## Christian Dispute Resolution

If a dispute over this agreement or any claim for damages arises, parents/guardians agree to resolve the matter through the *Rules of Procedure for Christian Conciliation* (a copy of the Rules are published at [www.ICCPeace.com](http://www.ICCPeace.com)). Christian mediation should be attempted, but if it does not resolve the dispute then legally binding Christian Arbitration shall be employed by the Deacons of Denbigh Baptist Church, or individuals selected by the Deacons in accordance with the *Rules of Procedure for Christian Conciliation*. Judgment upon an arbitration decision may be entered in any court otherwise having jurisdiction. Jurisdiction and venue shall be the county and state where the school is located and Virginia law will apply to dispute. Members, pastors, staff or third party vendors/contractors shall understand that these methods shall be the sole remedy for any controversy or claim arising against the Church and expressly waive their right to file a lawsuit in any civil court against one another or the Church for such disputes, except to enforce an arbitration decision. In that case, judgment upon an arbitration award may be entered by any court having competent jurisdiction, in conformity with the laws of the Commonwealth of Virginia.

Student's Name \_\_\_\_\_

Student Signature (if 18 years of age): \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

