

Sallisaw Christian Academy

1000 N. Wheeler Avenue, Sallisaw, OK 74955 · (479) 747-3850

Family Covenant

Sallisaw Christian Academy is an affiliate ministry of Apostolic Faith Church, Trinity. The atmosphere of SCA is a culture of Holiness and Pentecostal distinction. Faculty, staff, and students are expected to be in harmony with the atmosphere of SCA. Families who are willing to accept the culture of SCA without controversy and abide by the polices set forth by the SCA Administration and/or the SCA Board are eligible to apply for enrollment.

- I recognize that it is my biblical responsibility to educate my child.
- I understand that SCA is an extension of my home and church for educating my child in biblical training and academic excellence.
- I commit myself to safeguard my child from any unwholesome influences that will be counterproductive to the mission and vision of SCA.
- I, along with my child, will be faithful in regular church attendance (at least once per week).
- I will be attentive to the needs of my child, making sure he/she receives the proper sleep, exercise, study time, and discipline required for his/her optimal performance at SCA.
- I will be proactive, ensuring my student(s) arrive at SCA on time and in their proper uniform each day.
- I pledge to be in **complete** cooperation with SCA's administration, staff, and policies. If a misunderstanding arises with my child & SCA, I will give SCA (it's administration, staff, and policies) the benefit of the doubt before accusing anyone/thing and/or placing blame.
- I commit to resolving conflict with SCA the biblical way, going to the proper channel of authority **privately**, without spreading slander and will address such issues with a Christian attitude, following Christ's pattern in Matthew 18.
- I realize enrollment at SCA is a privilege and not a right. I understand my child's enrollment is at my will, as well as the will of the SCA Administration. I recognize that if I and/or my child is not in harmony with the expectations of SCA, I may choose to withdraw my child or may be asked to withdraw by the Administration at any time.

I hereby agree to this SCA Family Covenant and will faithfully abide by its terms on behalf of my child.

Students name (printed)

Date

Parent/Guardian's Authorized Signature: _____

Parent/Guardian's Authorized Signature: _____