



547 W. Nees Clovis, CA 93611 ▪ Phone: 559-298-0023 ▪ Fax: 559-298-0014
Email: frontdesk@vcsfresno.net ▪ Website: www.vcsfresno.net

APPLICATION

Welcome to Valley Crescent School. We are extremely proud of our school, our staff and our community. We believe that Valley Crescent School is a “great place to learn” and we hope you will agree!

Please take the time to complete all enrollment forms and return them to the school office. If you have any questions, please contact the front desk at 559-298-0023

School Hours:

Monday – Thursday: 7:30 am – 3:30 pm
Friday: 7:30 am – 1:45 pm

Rates for the 2021/2022 Academic School Year:

- **Registration:**
\$60.00 processing fee
\$70.00 per child – Standardized testing
- **Kindergarten through 8th grade:**
\$450.00 per child per month based on a 10-month academic year
- **I.C. (Islamic Class) (4 hour/half day class, Mondays-Thursdays only):**
\$450.00 per child per month based on a 10-month academic year

**Students purchase books, materials and supplies.*

Tuition:

\$4,500.00 yearly - may be paid in 10-monthly installments of \$450.00 August through May.
Discounts of 10% off the second sibling's tuition.

(1 = \$4,500; 2 = \$8,500; 3 = \$ 12,000 annually)

Flexible annual payment plans can be arranged in advance.

Transportation:

School Bus within Fresno: \$125.00 per month per child
School Bus to Madera: \$150.00 per month per child

Programs Available:

Islamic Class (Students, age 4)

Kindergarten – Extended Day (Students who turn 5 prior to September 1)

First through Eighth Grade

Arabic, Grades K – Eighth

Islamic Studies K – Eighth

All new students must complete and provide the following information to be admitted into Valley Crescent School:

*Enrollment Card *Release of Records *Certified Birth Certificate
*Ethnicity Form *Home Language Survey *Immunization Record

PROGRAMS

I.C. (Islamic Class) Half day classes for students age 4-5. The I.C. begins at 7:30 am, with a break and lunch time. Students are picked up at 12:00 pm. Islamic Principles, along with basic Islamic etiquette, is immersed in the teaching of pre-kindergarten education.

Full Day Kindergarten Rationale. Extended-Day Kindergarten is defined as a class taught by the staff that exceeds the four-hour maximum number of school day minutes. In 2009, about two thirds of United States kindergarten children attended full-day classes. In California, the percentage of students in full-day classes increased by 43%. For further information visit The Public Policy Institute of California Web site on Full-Day Kindergarten in California. Reasons to extend the Kindergarten Day include the following:

- To improve the educational program
- To provide more time for the teacher to get to know each child
- To encourage children's maximum social, emotional, physical and academic growth
- To address transportation issues related to parents and schools
- To address parental/guardian needs for child care

First Through Fourth Grade Students at Valley Crescent School are taught the California State Standards. The teachers use updated curriculum, which are considered College-and-Career Ready. Students from grades first through eight are taught Common Core mathematics from a teacher who specializes in mathematics.

Middle School students follow a public-school model and have different teachers for each subject, but have a home room teacher as well. The students are administered standardized testing annually using CTBS-Terra Nova, based on College-and Career Readiness Standards.

Islamic Studies All students K – 8 receive instruction in Islamic Studies to build character and foster the Islamic way of life. Curriculum for Islamic Studies is “I Love Islam” and “Learning Islam,” published by Islamic Services Foundation, Chicago, Illinois.

Arabic All students K – 8 receive instruction in Arabic. The main goal is to develop conversational fluency, with grammar, writing, and reading the Quran. Students are placed in beginning, intermediate and advanced levels. The curriculum for Arabic is Iqra’, published by International Education Foundation.

MISSION STATEMENT

The mission of Valley Crescent School is to build student character by fostering respect, honesty and responsibility. We strive to inspire our students to apply critical thinking and problem solving skills in both academic and daily life. Our goal is to equip our students with skills to take on any of life’s challenges and to become positive productive members of society.

PHILOSOPHY STATEMENT

We believe that every child can learn to his/her full ability. We, as educators, are dedicated to help each student develop his/her full potential. Our goal is to teach the students, using all learning modalities to meet and exceed the Common Core State Standards (CCSS) set by the government and the Islamic Principles.

RELIGIOUS STATEMENT

Valley Crescent School is an Islamic School based on faith in Allah (Glory be to Allah and He is the Most High), Prophet Muhammad, and all the Prophets – peace be upon them. It is our goal to instill an understanding of the Islamic law, to build respect, honesty, truthfulness, responsibility, caring, and a strong Muslim identity in all our students.

PERSONAL INFORMATION

Child's Name: _____
(Last) (First) (Middle)

Date of Birth: ____ / ____ / ____ Male Female

Home Address: _____
(Street) (City) (State) (zip code)

Home Phone: (____) _____ E-Mail Address: _____

Father's Name: _____ Home Phone: _____

Occupation: _____ Work Phone: _____

Highest Education Completed (Please Circle): Doctoral Masters Bachelor High School

Ethnicity/Race (Please Circle): Hispanic Asian Black/African American
White Pacific Islander Other _____

Does child live with father? (Please Circle): Yes No

If not, please list address: _____
(Street) (City) (State) (zip code)

Mother's Name: _____ Home Phone: _____

Occupation: _____ Work Phone: _____

Highest Education Completed (Please Circle): Doctoral Masters Bachelor High School

Ethnicity/Race (Please Circle): Hispanic Asian Black/African American
White Pacific Islander Other _____

Does child live with mother? (Please Circle): Yes No

If not, please list address: _____
(Street) (City) (State) (zip code)

Is there a custody agreement pertaining to the Child? (Please Circle): Yes No

**If yes, please provide the agreement along with the enrollment application.*

List all others living in the child's home and their relationship to the child:

Name <i>(Please print legibly)</i>	Male/Female	Relationship
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Guardians must provide documentation to act on behalf of the child's parents.*

Medical Information:

Physician's Name: _____ **Phone:** _____

Allergies *(Please Circle):* Yes No

If yes, please list: _____

Does your child use an inhaler? *(Please Circle):* Yes No

Does your child use an Epi-Pen? *(Please Circle):* Yes No

If there any additional information about the health and welfare of your child of which the school needs to be aware, please contact the school office directly.

HOME LANGUAGE SURVEY

Valley Crescent School is collecting information regarding the language background of each of its students. This information will be used by the school for statistical purposes only, primarily for accreditation through the Western Association of School and Colleges, and will not be released by individual to the public.

Name of Student: _____ **Grade:** _____ **Age:** _____

Is your child's native language other than English? *(Please Circle):* Yes No

If not, what language is your child's first language? _____

What is the primary language spoken in your child's home? _____

Does your child speak other languages not listed above? _____

ETHNICITY FORM

Regarding data collection, the U.S. Department of Education encourages educational Institutions to allow all students and staff the opportunity to re-identify their race and ethnicity under the 1997 Standards.

Name of Student: _____ **Date of Birth:** _____

The U.S. Department of Education has identified the following six categories to be used in data collection. Please check one or more of the categories listed below and return this form to Valley Crescent School.

___ 1. **Native American or Alaska Native:**

A person having origins in any of the original people of North, South and Central America, and who maintains a tribal affiliation or community attachment.

___ 2. **Asian:**

A person having origins in any of the original peoples of the Far East, Southeast Asia or the Indian subcontinent. This includes: Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, The Philippine Islands, Thailand and Vietnam.

___ 3. **Black or African American:**

A person having origins in any of the black racial groups of Africa.

___ 4. **Hispanics or any race of Latino:**

A person of Mexican, Puerto Rican, Cuban, Central or South American or other Spanish Culture.

___ 5. **White:**

A person having origins in any of the original peoples of Europe, the Middle East or North Africa.

___ 6. **Native Hawaiian or other Pacific Islander:**

A person having origins in any of the original peoples of Hawaii, Guam, Samoa or other Pacific Islands.

RELEASE OF RECORDS

Valley Crescent School
457 W. Nees
Clovis CA 93611
Phone: 559-298-0023
Fax: 559-298-0014
Email: *frontdesk@vcsfresno.net*

Dear Registrar,

Please release the records for the student listed below and return them to Valley Crescent School at the address listed above.

Cordially,

Registrar, Valley Crescent School

Student Name *(Please Print)*: _____

Date of birth: _____

Mother's Name: _____

Previous School Name: _____

Address: _____

City, State, Zip Code: _____

Last date attended: _____ **Grade**: _____

Please include the following:

- Birth Certificate
- Social Security Card
- Report Cards
- Any Special Education Records
- Health and Immunization Records
- Custody Agreement (if Applicable)
- Any other pertinent information

Parent Name *(print)*: _____

Parent Signature: _____ Date: _____

PHOTO RELEASE PERMISSION SLIP

As a parent or guardian of this student, I hereby consent to the use of photographs/videotapes taken by Valley Crescent School during the 2021/2022 school year. I acknowledge that photos and videos will be used for publicity, promotional and/or educational purposes (including publications, presentations or broadcast via school website, newsletter, or other media sources). I do this with full knowledge and consent and waive all claims for compensation for use or for damages.

Please check one of the options below:

Yes, I give consent for Valley Crescent School to photograph and/or videotape my child for school purposes and/or at school events.

No, I do not authorize Valley Crescent School to photograph and/or videotape my child for any event, and will therefore be excused prior to photographing or videotaping.

Parent Signature: _____ **Date:** _____

Student's Name (*print*): _____

ENROLLMENT AGREEMENT/CHECKLIST

Name of Student: _____

___ I have completed the enrollment packet for my child and am making a request to have my child considered for enrollment at Valley Crescent School beginning _____

___ I have been given a current Valley Crescent School Student-Parent Handbook and agree to abide by the rules and regulations as stated therein.

___ I understand and agree that my child will abide by the terms and conditions of Valley Crescent School Laptop Policy and Procedures.

___ I am aware of the uniform policy and agree that my child will conform to the policy at all times at school or on field trips.

___ I am aware that the Valley Crescent School religious policies and activities are based on main stream interpretation of Quran and Sunnah; activities not conforming with the above shall be reviewed on a case-by-case basis, by the School Board of Directors, VCS Director, and or other community Islamic Scholars that specialize in Islamic jurisprudence and they shall rule on disputes related to such activities.

___ In the event my child becomes ill or is injured at school and I cannot be reached, VCS is authorized to contact the person(s) listed on the emergency card, or to transport my child to the nearest hospital and is given consent for emergency care depending on the severity of the illness or injury. The school is NOT financially responsible for any emergency care or transportation.

___ I understand that a large part of VCS operations are sustained by charitable donations, and for fundraising and other promotional purposes VCS may conduct video, still photography, display of student work and live performances throughout the academic year. I agree that unless I submit a written statement to the contrary VCS has my consent and support to include my child in such promotional activity.

___ I give my consent, unless otherwise stated, for my child to take part in all school activities, including sports and school sponsored field trips away from or on the school premises.

___ I give permission for VCS to take disciplinary action as stated in the Student-Parent Handbook and will abide by the decision of the administrator. If I disagree with any disciplinary action, I will contact the administration for an appointment to discuss the situation as soon as possible.

___ I will honor the school hours as stated and have my child at school on time and will pick up my student on time on a daily basis.

___ I agree and commit to make prompt payments as stipulated in the attached. I understand that my child may not be allowed to attend class due to delinquent payments at the discretion of the school administrator.

Parent Name (Print): _____

Parent Signature: _____ **Date:** _____

Administrator or Registrar: _____ **Date:** _____

TUITION AGREEMENT
(Completed by Office Staff)

Name of Student: _____

Enrollment Fee: \$ _____

Collected: \$ _____ **Date:** _____

Student Start Date: _____

Tuition: \$ _____

Payment Plan Selected (All payments are due by the 5th of the designated month):

_____ Annually _____ Monthly _____ Quarterly _____ Other (Specify)

Other Arrangement Specifics:

Authorized by: _____ **Date:** _____

I, _____, parent of _____,
do agree to the tuition plan above. I understand that if payment is not received within five (5)
days of the agreed upon date, I will be charged a late fee of \$25.00. I further understand that if I
become delinquent over 20 days that my student may not be allowed to attend class until such
time that the account has been brought up to date.

Parent Signature

Date