

SUM-01
2 0 1 7

Application for Summer Program for Hanalani Schools

Instructions

Complete this form along with the Summer Program Selection form. Submit both forms with payment to the appropriate divisional office. Full payment is required by Tuesday, May 30, 2017.

Receipt of the application and fees by Hanalani Schools does not constitute acceptance into the program.

Student Information

Student Legal Last Name		Student Legal First, Middle Name		
Grade Entering Fall 2017	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	Birth Date (Month, Date, Year)		
Mailing Address		City	State	ZIP
Student Status <input type="checkbox"/> First time attendee <input type="checkbox"/> Returning summer program student		Sibling(s) Applying (Name, Grade)		

Parent / Legal Guardian Information

FATHER/LEGAL GUARDIAN 1			MOTHER/LEGAL GUARDIAN 2		
First & Last Name			First & Last Name		
Phone Number Cell _____ Work _____			Phone Number Cell _____ Work _____		
Email Address			Email Address		
Mailing Address			Mailing Address		
City	State	ZIP	City	State	ZIP
Place of Employment			Place of Employment		

Student Lives With (*check all that apply*)

Father Mother Step-Father Step-Mother Legal Guardian Other _____

Applicant Lives At

1 Location 2 Locations More than 2 Locations



Visit us online at www.hanalani.org

P: (808) 625-0737 ext. 450 (Grades K3-1), 451 (Grades 2-6), 452 (Grades 7-12)

SUM-01
2 0 1 7

Application for Summer Program

for Hanalani Schools

Emergency Information

Emergency Contact 1 (<i>excluding parent/legal guardian</i>)	Phone Number	Relationship to Applicant
Emergency Contact 2 (<i>excluding parent/legal guardian</i>)	Phone Number	Relationship to Applicant
Physician	Phone Number	Medical Insurance Provider

Health Conditions

Nose bleeds easily Asthmatic Seizures Allergies/Other (specify) _____

Transportation

My child will (select one):

- | | |
|---|---|
| <input type="checkbox"/> Be picked up by parents/legal guardians, or persons listed below
(please provide name and relationship to student):

Pick up 1: _____

Pick up 2: _____ | <input type="checkbox"/> Walk, ride bike, or use public transportation |
|---|---|

Organizational Policies & Practices

MISSION STATEMENT

Our primary mission is to train the children “of the household of faith” (Galatians 6:10) and provide opportunities for all children to hear and receive the gospel of Jesus Christ. From a Biblical foundation, we strive to develop students’ intellectual, emotional, and spiritual capacities in a wide variety of fields and to lead students to a deeper worship of God and closer conformity to the image of Christ.

PHILOSOPHY & GOALS

Hanalani Schools is an independent, Christian day school. It is nondenominational and Protestant. A Bible-centered curriculum provides the most effective means and environment to educate the total child mentally, socially, physically, emotionally, and spiritually. The school’s primary goal is to see each student accept Christ as personal Savior and is dedicated to inspiring and maintaining Biblical standards of living, learning, and conduct.

STATEMENT OF BELIEF

- 1) We believe that the Bible is the infallible, verbally inspired Word of God and that it is, therefore, our final authority in matters of faith and practice.
- 2) We believe in the eternally existing, triune God: Father, Son, and Holy Spirit.
- 3) We believe in the deity of Jesus Christ, in His virgin birth, in His sinless life, in His miracles, in His vicarious and atoning death through His shed blood, in His bodily resurrection, and in His ascension to the right hand of the Father, where He now acts as Mediator and Advocate.
- 4) We believe in the personal, imminent return of our Lord Jesus Christ for His own, in His later return in power and glory with His own to reign in righteousness over the earth, and in the resurrection of both the saved and the lost--they that are saved unto the resurrection of life and they that are lost unto the resurrection of damnation.



Visit us online at www.hanalani.org

P: (808) 625-0737 ext. 450 (Grades K3–1), 451 (Grades 2–6), 452 (Grades 7–12)

SUM-01
2 0 1 7

Application for Summer Program for Hanalani Schools

Organizational Policies & Practices (continued)

- 5) We believe that Heaven is the place of eternal blessedness for the saved and that Hell is the place of eternal, conscious punishment for the lost.
- 6) We believe that regeneration by the Holy Spirit is absolutely essential for the salvation of lost and sinful men and that all who receive the Lord Jesus Christ by faith are born again and become the children of God.
- 7) We believe in the present ministry of the Holy Spirit whose presence in all believers enables them to live godly lives.
- 8) We believe in the spiritual unity of believers in our Lord Jesus Christ and in the necessity of all His followers maintaining good works as evidence of faith.

HAWAII SCHOOL ATTENDANCE LAW

All students entering Hawaii schools for the first time must have a physical examination and tuberculin clearance within one year prior to starting school. A completed physical exam/immunization form or proof of doctor's appointment as well as TB clearance must be turned in to the office before the child's first day of school. Up-to-date immunizations must meet Hawaii State Department of Health requirements.

APPLICATION

Priority will be given to currently-enrolled students and new students accepted for the coming school year. Applications are processed in the order in which they are received. Students applying for any EC summer program must be three-years-old by June 1, 2017; all students must be completely toilet-trained.

USE OF LIKENESS

I agree by my signature below that photos and videos of my child, as well as his/her artwork, writing samples, and other school work; may be reproduced in Hanalani brochures, advertisements, electronic publications, print and web media including website, email, and social media (i.e. Facebook, YouTube, etc.), or any other published materials.

Agreement Statement

I agree to accept the rules and regulations of Hanalani Schools. I have read and agree to the Organizational Policies & Practices above. I also understand that financial compensation will not be given for use of likeness.

Parent/Legal Guardian Signature	Print Name	Date

