

REFERENCES:

Please list names, complete address, and phone numbers for those that are to be your two references.

Principal/ or teacher From last school Name: _____ Phone: _____
Address: _____
City: _____ State: _____ Zip: _____

Church Pastor: Name: _____ Phone: _____
Address: _____
City: _____ State: _____ Zip: _____

Or Adult friend: Name: _____ Phone: _____
Address: _____
City: _____ State: _____ Zip: _____

Contract

I have read the **Salisbury Adventist School Handbook** and am completely willing to abide by all the principles, rules and regulations stated therein.

Student's Signature (Grades 3-9)

- I understand the principles, rules and regulations stated within the **Salisbury Adventist School Handbook**.
- I pledge my full support in aiding my child with work brought home from school.
- I will stay in communication with my child and his/her teacher about the completion of homework.
- I am also fiscally and morally responsible to the SAS School Board for the payment of fees and tuition charges which are invested in my child at Salisbury Adventist School.

Parent's Signature (All Grades)

Date

For Office Use Only:	
Date received: _____	
Date accepted: _____	Board approval: yes _____ no _____
Transcript Requested: _____	Received: _____
References Received: 1: _____ 2: _____	
Other: _____	