2026-2027 School Calendar

Dadeville Christian Academy

800 Horseshoe Bend rd
256-596-3411 256-794-1546
Dadeville, Al 36853

July 2026

S	M	T	W	T	F	S
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

August 2026

S	M	T	W	T	F	S
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31					

September 2026

S	M	T	W	T	F	S
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30			

October 2026

S	M	T	W	T	F	S
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

November 2026

S	M	T	W	T	F	S
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30					

December 2026

S	M	T	W	T	F	S
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

Aug 2	Open House 3-5pm
Aug 17	First day of School
Sept 14	**Blue Bell Ice Cream**
Sept 17	Labor Day
Oct 7-9	Fall Break
Oct 19	Pumpkin Patch
Nov 9	Hands-on Museum
Nov 11	Veterans Day
Nov 23-27	Thankgiving Break
Dec 21 – Jan 1	Christmas Break
Jan 4	Back to School
Jan 11	Museum of Alabama
Jan 18	MLK Day
Feb 8	Coca Cola Space Center
March 15-19	**Spring Break**
March 29	Agriculture Farm Day
April 5	Southern Museum of Flight
May 17	Wind Creek Picnic Day
May 28	Last Day of School
May 30	Graduation

Grading Periods	
1st 9 Weeks	Aug 17 – Oct 16
2nd 9 Weeks	Oct 19 – Dec 18
3rd 9 Weeks	Jan 4 – Mar 5
4th 9 Weeks	Mar 8 – May 28

January 2027

S	M	T	W	T	F	S
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30
31						

February 2027

S	M	T	W	T	F	S
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28						

March 2027

S	M	T	W	T	F	S
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31			

April 2027

S	M	T	W	T	F	S
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	

May 2027

S	M	T	W	T	F	S
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31					

June 2027

S	M	T	W	T	F	S
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30			

No School
(FD) Field Day / Field Trip

First / Last Day of School
1st of next 9 weeks

Dadeville Christian Academy

STUDENT ENROLLMENT/RE-ENROLLMENT FORM **SCHOOL YEAR** _____

Please check one: ☐ New Enrollment ☐ Re-enrollment

Student Name _____

Date _____ Grade _____ Gender _____

Date of Birth _____ Telephone # _____

Address _____

City _____ State _____ Zip _____

Parent/Guardian _____

Father _____ Home Phone # _____

Address _____

City _____ State _____ Zip _____

Employer _____ Work Phone # _____

E-mail _____ Cell Phone # _____

Mother _____ Home Phone # _____

Address _____

City _____ State _____ Zip _____

Employer _____ Work Phone # _____

E-mail _____ Cell Phone # _____

Medications _____

Allergies, illnesses, injuries, hospitalizations within last 12 months _____

_____

Physician/Pediatrician _____ Telephone # _____

Physician Address _____

IN CASE OF EMERGENCY OR ILLNESS, IF PARENT/GUARDIAN CANNOT BE REACHED, NOTIFY:

1. Name _____ Telephone: (home) _____ (work) _____
Address _____ Relationship: _____
2. Name _____ Telephone: (home) _____ (work) _____
Address _____ Relationship: _____

Parent/Guardian _____ _____
(print) *(sign)*

Administrator: Tammy Salinas _____
(print) *(sign)*

FEE SCHEDULE

- Tuition: $150.00 per family per year
- Additional children: $75.00 each
- Fees must be submitted with the application.
- Payments are due at the time of application submission.

Late Enrollment

- For enrollment after August 31st, the fee is $150.00 plus a $50.00 late fee, totaling $200.00 per family.
- Additional children are $75.00 each.

No Student will be enrolled without complete payment.

Checks can be made to:

Pentecostals of Dadeville/Dadeville Christian Academy
800 Horseshoe Bend Rd.
Dadeville, Al 36853
(256) 596-3411 or (256) 794-1546
tammysalinas@charter.net (email)

*** All students who are re-enrolling must have all fees paid by August 31st. Failure to do so will result in cancellation of enrollment and a notification of record release being sent to the local Board of Education.**

_____ _____

Signature of Parent/Guardian Date

REQUEST FOR SCHOOL RECORDS FORM

TO: _____

_____

_____

Fax #: _____ Email: _____

STUDENT'S NAME_____ DATE OF BIRTH_____

The above named student has enrolled in The Dadeville Christian Academy for the _____ school year.

Please send this student's educational records, including:

____cumulative records
____transcripts
____standardized testing
____psychological testing
____health information (immunizations)
____IEP
____date of withdrawal

Please send the above information to Dadeville Christian Academy. I hereby waive my right to review these records prior to their being forwarded to the school.

Please send the above information to:

Dadeville Christian Academy
800 Horseshoe Bend Rd.
Dadeville, Al 36853
(256) 596-3411 or (256) 794-1546
tammysalinas@charter.net *(email Administrator)*

Parent/Guardian_____ _____
(print) *(sign)*

Administrator_____ _____
(print) *(sign)*

STUDENT LIABILITY RELEASE FORM

I understand and agree that by enrolling our children at Dadeville Christian Academy, the responsibility for their education lies with us, the parents. We will not hold Dadeville Christian Academy or its administrators responsible for our children's education or supervision. We release Dadeville Christian Academy from any legal responsibility and agree not to hold the school liable for legal fees or other expenses related to any legal actions involving our family.

I also understand that a student may be dismissed from Dadeville Christian Academy for the following reasons:

- Failure to submit semester reports (grades and attendance) on time.
- Any verbal or abusive behavior towards anyone connected with Dadeville Christian Academy, including behavior during any school-related events.

If a student misbehaves during a Dadeville Christian Academy event, these steps will be taken:

1. First offense: Verbal warning from a school official.
2. Second offense: Written suspension from school events.
3. Third offense: Permanent dismissal from Dadeville Christian Academy.

I also understand it is my responsibility to regularly check the Dadeville Christian Academy website for information and updates. The website is available for me to read and print any materials.

Name of Child: _____

Signature of Parent or Guardian: _____ Date: _____

Dadeville Christian Academy
800 Horseshoe Bend Rd.
Dadeville, Al 36853
(256) 596-3411 or (256) 794-1546
tammysalinas@charter.net

School Year _____ Grade _____ Enrollment Date _____ Ending Date _____

MASTER RECORD SHEET

DADEVILLE CHRISTIAN ACADEMY
800 HORSESHOE BEND RD
DADEVILLE, AL 36853

Student Name _____ **Academic Advisor** _____

Subject	Test Scores 1	2	3	4	5	6	First Term Avg.	Test Scores 7	8	9	10	11	12	Second Term Avg.	Final Grade
MATH	# / %	# / %	# / %	# / %	# / %	# / %		# / %	# / %	# / %	# / %	# / %	# / %		
ENGLISH	# / %	# / %	# / %	# / %	# / %	# / %		# / %	# / %	# / %	# / %	# / %	# / %		
WORD BUILDING	# / %	# / %	# / %	# / %	# / %	# / %		# / %	# / %	# / %	# / %	# / %	# / %		
LITERATURE AND CREATIVE WRITING	# / %	# / %	# / %	# / %	# / %	# / %		# / %	# / %	# / %	# / %	# / %	# / %		
SCIENCE	# / %	# / %	# / %	# / %	# / %	# / %		# / %	# / %	# / %	# / %	# / %	# / %		
SCIENCE LABS	# / %	# / %	# / %	# / %	# / %	# / %		# / %	# / %	# / %	# / %	# / %	# / %		
SOCIAL STUDIES	# / %	# / %	# / %	# / %	# / %	# / %		# / %	# / %	# / %	# / %	# / %	# / %		
BIBLE	# / %	# / %	# / %	# / %	# / %	# / %		# / %	# / %	# / %	# / %	# / %	# / %		
	# / %	# / %	# / %	# / %	# / %	# / %		# / %	# / %	# / %	# / %	# / %	# / %		
	# / %	# / %	# / %	# / %	# / %	# / %		# / %	# / %	# / %	# / %	# / %	# / %		

☐ P.E. Card ☐ Total Hours for P.E.

ATTENDANCE RECORD

	WEEK #1					WEEK #2					WEEK #3					WEEK #4					WEEK #5					WEEK #6					WEEK #7					WEEK #8					WEEK #9				
	M	T	W	T	F	M	T	W	T	F	M	T	W	T	F	M	T	W	T	F	M	T	W	T	F	M	T	W	T	F	M	T	W	T	F	M	T	W	T	F	M	T	W	T	F
1st Quarter																																													
2nd Quarter																																													
3rd Quarter																																													
4th Quarter																																													

Code: C = Curriculum Studies S = Special Studies F = Field Trip I = Illness H = Holiday

I certify that all PACE Tests were scored by me and that the above information is accurate to the best of my knowledge.

Parent Signature _____ Date _____

Parent Signature _____ Date _____

☐ Please check here if your address has changed. Write new address on back of form.

Parents keep copy

INSTRUCTIONS FOR USING THE MASTER RECORD SHEET

The Master Record Sheet is your most important document for record keeping. Individual student grades and attendance records are entered on the form to create a permanent history of activity.

Student Name _____ Academic Advisor _____

Subject	Test Scores 1	2	3	4	5	6	First Term Avg.	Test Scores 7	8	9	10	11	12	Second Term Avg.	Final Grade
MATH	# 49	# 50	# 51	# 52	# 53	# 54	98.7	# 55	# 56	# 57	# 58	# 59	# 60	98.7	98.7
	100 %	100 %	98 %	94 %	100 %	100 %		96 %	100 %	100 %	98 %	98 %	100 %		
ENGLISH	#	#	#	#	#	#		#	#	#	#	#	#		
	%	%	%	%	%	%		%	%	%	%	%	%		

Entering Grades

Each box on the Master Record Sheet is divided into two sections. Enter the PACE number in the area above the dotted line behind the # symbol. Enter the student's test grade in the bottom of the box under the dotted line in front of the % sign. (For test grades below 80%, please do not write the test score in the box; call your Academic Advisor.) After the first semester, average the first six grades in each subject to determine percentages. To calculate the second semester grades, average the remaining grades in each subject. Determine the final grade by averaging all test scores completed during the year.

Attendance Record

On a daily basis, enter school attendance on the Attendance Record located in the lower section of the Master Record Sheet. Please use the letter codes designated on the form. Children above the fourth level should keep their own daily school diary to strengthen their ability to communicate in writing their thoughts and observations. Also, each homeschool should maintain a separate diary including academic observations, field trips, and other special events.

NOTIFICATION OF STUDENT WITHDRAW SCHOOL YEAR _____

I hereby authorize the administration of Dadeville Christian Academy to notify the Public School Superintendent that the named student has ceased attendance at this school.

Student Name _____

Address _____

City _____ State _____ Zip _____

_____ _____

Parent/Guardian Signature Date

To be completed by School Administrator

School Administrator: **Tammy Salinas** Date of withdraw _____

Dadeville Christian Academy
800 Horseshoe Bend Rd.
Dadeville, Al 36853
(256) 596-3411 or (256) 794-1546
tammysalinas@charter.net

STUDENT ID CARD FORM

Each student will receive one (1) student ID card per year at no extra cost. This card offers many benefits, including academic resources and discounts on cultural events, historical tours, and a variety of stores.

If a replacement ID card is needed, there is a $20.00 fee.

Name of Child: _____ Date of Birth: _____

Address :(City)_____ (State) _____ (zip)_____

Parents Names: (first) _____ (Last)_____

Parents Names: (first) _____ (Last)_____

Phone Numbers: _____ or _____

Please send a head shot (Picture from the chest up) to tammysalinas@charter.net, be sure to include students name in the email.

- Please use a separate form for each child requesting a STUDENT ID CARD.
- If this is a request for a replacement card, a $20.00 fee will need to be paid before ordering. Please send a check/money order to:

Dadeville Christian Academy
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Dadeville, Al 36853
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tammysalinas@charter.net