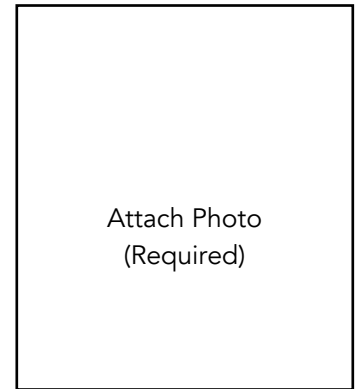




# Calvary Christian Academy

## Application For Enrollment



For academic year beginning August \_\_\_\_\_ Today's Date \_\_\_\_\_

Applying for grade \_\_\_\_\_

### Student's Name

First

Middle

Last

Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_

Male \_\_\_\_\_ Female \_\_\_\_\_

Mailing Address \_\_\_\_\_

Street

City

State

Zip Code

Student's Home Phone \_\_\_\_\_

Student's First Language \_\_\_\_\_ Other Language(s) \_\_\_\_\_

### Father's Full Name

Father's Email

Father's Home Phone \_\_\_\_\_ Father's Cell Phone \_\_\_\_\_

Address (if different from above) \_\_\_\_\_

Employer \_\_\_\_\_

Name

Address

Phone

### Mother's Full Name

Mother's Email

Mother's Home Phone \_\_\_\_\_ Mother's Cell Phone \_\_\_\_\_

Address (if different from above) \_\_\_\_\_

Employer \_\_\_\_\_

Name

Address

Phone

### Siblings

Name Gender Birth Date Grade School

Name Gender Birth Date Grade School

Name Gender Birth Date Grade School

Name Gender Birth Date Grade School

Student Lives With (check all that apply): \_\_\_\_\_ Father \_\_\_\_\_ Mother \_\_\_\_\_ Stepfather \_\_\_\_\_ Stepmother \_\_\_\_\_

Other \_\_\_\_\_

Name / Relationship

**Previous School(s) Attended** (begin with the most recent):

Name	Address	Phone

May we contact the above school(s) for official transcripts and records? Yes \_\_\_ No \_\_\_

**Intentions for Enrollment:** I intend for my child to complete the following program(s) at Calvary Christian Academy:

<input type="checkbox"/> Elementary School K-5 <sup>th</sup> Grades	<input type="checkbox"/> Middle School 6 <sup>th</sup> -8 <sup>th</sup> Grades	<input type="checkbox"/> High School 9 <sup>th</sup> -12 <sup>th</sup> Grades	<input type="checkbox"/> Home School 2 <sup>nd</sup> -12 <sup>th</sup> Grades
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**Student Profile** (to be completed by parent or guardian)

Why do you desire for your child to attend Calvary Christian Academy?

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What phrases come to mind when describing your child?

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Please describe your child's greatest strengths, both cognitive and social:

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Please describe any behavioral, social and/or cognitive special needs of your child:

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Does your child have any diagnosed learning disabilities? Yes \_\_\_ No \_\_\_

Has your child been enrolled in a special education program? Yes \_\_\_ No \_\_\_

If so, do they have an Individual Education Plan? Yes \_\_\_ No \_\_\_

Describe the remedial program/actions being taken:

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Has your child ever been suspended from school or subject to any other serious disciplinary actions?

No \_\_\_\_\_ Yes \_\_\_\_\_ If yes, please explain: \_\_\_\_\_

Please describe your child's interests, including extra-curricular activities:

Does your family attend Calvary Chapel San Jose? Yes \_\_\_\_\_ No \_\_\_\_\_

Please describe your family's church affiliation/involvement:

Please share any major events that have occurred during your child's life that Calvary Christian Academy should be aware of (relocation, death in the family, major illness, divorce, etc.):

Calvary Christian Academy is a Christ-centered, non-denominational school that encourages and prepares its students to grow in their personal faith in Jesus Christ, to pursue higher education, and to serve the Lord, their families, and their community. Calvary Christian Academy believes that the spiritual growth of its students gives meaning to all their intellectual and physical endeavors. By signing below, I fully acknowledge and understand that my child will be taught spiritual truths in accordance with Scripture at Calvary Christian Academy.

**All applications must be accompanied by a non-refundable check, payable to Calvary Christian Academy.** Upon receipt of this application, all materials, documents, and files comprising the applicant folder become the property of Calvary Christian Academy. I understand that submitting this application does not guarantee my child's admission to Calvary Christian Academy. I understand that enrollment in Calvary Christian Academy Preschool Program does not in any way promise or guarantee admission to Calvary Christian Academy Grades K-12.

Parent's Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent's Signature \_\_\_\_\_ Date \_\_\_\_\_

