

APPLICATION FOR ADMISSION



Please attach a recent photo

For Academy Use:
Date received _____
Fee Paid _____

Application for Admission

This form is to be completed by a parent/guardian of the applicant and returned to the school before the applicant's interview and admissions test. An application fee of \$100.00 must be attached. No part of this fee is refundable nor applicable as advance payment of tuition fees. Upon acceptance, a \$150.00 registration fee will be required to reserve a place for your child. All registration fees are non-refundable.

Applicant _____
First **Middle** **Last** **Applying for grade**

Sex _____ Date of birth _____ Age _____ Preferred name _____

Home _____
Address Street City State Zip

Mailing address (if different) _____

Applicant's Social Security Number Home Phone Parent Primary E-mail Address Secondary E-mail Address

Student lives with: Both parents _____ Mother _____ Father _____ Grandparents _____ Guardian _____

Custodial arrangements: Mother _____ Father _____ Joint _____ Grandparents _____ Guardian _____

Mother

Father

Name _____

Name _____

Street _____

Street _____

City/Zip _____

City/Zip _____

Cell Phone _____

Cell Phone _____

Employer _____

Employer _____

Position _____

Position _____

Work Phone _____

Work Phone _____

Last school attended Grade Area code/phone

Address _____
Street City State Zip

Has applicant ever skipped or repeated a grade? _____ If yes, please state grade(s) and circumstances involved.

Has applicant ever been dismissed from any school for any reason? _____ Suspended? _____ Asked to withdraw? _____
(If "yes" to any of these questions, please attach full details including name of school and year.)

Briefly describe any particular circumstances which may have adversely affected the applicant's record in school. (reading difficulties, learning styles, frequent change of schools, etc.). Please include dates wherever possible. _____

Does applicant have any diagnosed learning disabilities? _____ If yes, briefly describe. _____

Does applicant have attention deficit disorder? _____ Does applicant have a current IEP? _____

Does applicant take any regular medication? _____ If yes, describe. _____

Emergency Contact(s): _____

Siblings	Grade/Age	Presently Attending	Attending Another School	Applying at CCA	Church Membership
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Father
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Mother
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

If all children are not applying for admission, please state reason: _____

For mailing purposes only:

Maternal Grandparent(s)

Name _____

Street _____

City, State, Zip _____

Paternal Grandparent(s)

Name _____

Street _____

City, State, Zip _____

Parental Support of Philosophy and Policies

Please read the statements below concerning some of the philosophies and policies of Cornerstone Christian Academy. After carefully reviewing them, please sign below.

1. Cornerstone Christian Academy believes that learning is important for the achievement of a student; however, in addition to academics, a student's growth in areas of service, leadership, character, and a positive attitude are necessary for a well-balanced school experience.
2. Cornerstone Christian Academy believes a student's dress should be appropriate to the activity in which he/she is engaged. Students attending classes or other school events are expected to dress in accordance with a specific dress code.
3. Cornerstone Christian Academy is a family-oriented school and encourages parents to be involved in the educational process.
4. Cornerstone Christian Academy students are not permitted to use or possess alcoholic beverages, tobacco, or harmful drugs at anytime.
5. Cornerstone Christian Academy values truthfulness and integrity above strict observance of rules, and that honesty must be the basis of our working relationship with your child.
6. Cornerstone Christian Academy depends upon the generosity of parents, alumni, grandparents, friends, businesses, and corporations to help provide the opportunity to develop and implement new programs. Therefore, every parent is encouraged to support the Academy through its Annual Fund, but most especially through prayer.
7. It is understood that the school has the right to accept or reject a student as it deems advisable.
8. Cornerstone Christian Academy has a strong Christian discipline program and it is administered by the faculty and administration with close communication with the parent or guardian.

As parent/guardian of this student, I agree to cooperate with Cornerstone Christian Academy in the enforcement of the rules and regulations of the school and to meet the terms of the enrollment contract regarding expenses and business details. All withdrawals from the school will be discussed with the administrator and a withdrawal statement must be signed to facilitate release of grades and other materials.

Parent/Guardian

Parent/Guardian

Date: _____

Date: _____