CHRISTIAN HERITAGE ACADEMY

Grade: Preschool Admission Procedures for <u>Siblings</u> of <u>Current</u> CHA Students

Preschool

To receive priority consideration, *all application materials must be submitted to the Admissions Office by January 15*, which is also the end of the current family re-enrollment period.

All sibling applications submitted after January 15 will be considered on a date-received, space-available basis along with new family applications.

To apply:

- Pick up a Preschool Sibling Application from the Admissions Office or go to <u>Parent Central</u>.
- Return the completed application with your \$80.00 application fee. Be sure to include the original birth certificate so the school can make a copy for student's file.
- A new pastor reference form is NOT necessary unless your family has changed churches since your family first applied.
- When the application is complete, your application will be reviewed by Admissions and administrators. Applicants will be notified by letter/email regarding acceptance decision.
- Upon acceptance to Christian Heritage Academy, a new student non-refundable tuition
 deposit of \$100 will be required to hold the applicant's placement. The new student tuition
 deposit must be received in the Admissions Office within three weeks of acceptance to
 guarantee placement. If the Admissions office does not receive the \$100 tuition deposit
 within the three week time frame, the class opening will become available to another
 applicant in the wait-pool.

Questions? Please contact <u>Cynthia Strull</u> or <u>Tessie Chung</u> in the Admissions Office at 847-446-5252.

CHRISTIAN HERITAGE ACADEMY



Preschool Sibling Application for Admission

simplified are not co	application to the Admi	ssions Office birth certificat	along with you e is verified by	r \$80 non- Admissior	refundable applicat	complete and return this ion fee per student. Applier's Reference ONLY if you		
Date of Ap	plication	Academic Y	Academic Year		□ Northfield Campus			
Please ind	icate the class for which ye	ou desire admis	ssion:					
Age - check one below		Day of Class - check one below		Time of Class - check one below				
□ Preschool 3		□ Tuesday & Thursday		□ Morning 8:30 AM-11:20 AM				
□ Preschool 4		□ Monday,	□ Monday, Wednesday & Friday			□ Full Day 8:30 AM-3:00 PM		
	(age as of Sept. 1, 2016)		rough Friday		Lunch Bunch, 11:30 AM-12:30 PM (occasional or regular use) will be a separate sign-up in August.			
Applicant								
Last			First			Middle		
Preferred F	First Name		Gender: □ Ma	e 🗆 Femal	e Date of Birth			
						eZip		
				Cell Phone(area code)				
	(area code)			_	(area code)			
Child's Soc	cial Security #		Pa	arent Email /	Address			
Primary La	anguage Spoken at Home_			Sec	ond Language			
Siblings	•				referred by CHA family	/, staff or alumni.)		
)		0 1		D (C.1. 1	A 1 ' OTTA		
Name		Age	Grade		Present School	Applying to CHA (yes	or no)	
Parent/0	Guardian Informati	on						
Father's I	nformation (please updat	e pertinent info	rmation)	Mother	's Information (plea	se update pertinent informati	on)	
Title/First/La	ast Name			Title/Firs	st/Last Name			
First name used				First name used				
Home Address				Home Address				
City, State, Zip				1 1	City, State, Zip			
Home Phone				Home Phone				
Relationship to applicant				Relationship to applicant				
Marital Status:				Marital Status:				
□ Married □ Separated □ Divorced □ One Parent Deceased □ Single				☐ Married ☐ Separated ☐ Divorced ☐ One Parent Deceased ☐ Single				
Does applicant live with you? Custody?				Does applicant live with you? Custody?				

What church do you attend_____

What church do you attend_____

PRESCHOOL DEVELOPMENTAL RECORD

Is this your child's first school or daycare experience? $\ \square$ Yes $\ \square$ No List all schools applicant attended (include preschool):

Name of School	Address	Reason for Leaving	
Was there any difficulty at birth? If so, pl			
Age your child began: Sitting	Crawling	Walking	
Age your child began talking			
Sentences? Yes No Does your		s? □ Yes □ No	
Completed toilet training? ☐ Yes ☐ N			
Can your child indicate his/her own bathr	room needs? ☐ Yes ☐ No		
Has your child ever been evaluated for a	ny developmental needs? ☐ Yes	□ No	
If yes, what prompted you to see an eval	uation?		
When and where was the testing done?	(Use separate sheet if needed or a	attach report)	
Please list services your child has receiv	ed or is currently receiving outside	of school	
Does your child have any physical challe	enges? Yes No		
Has your child had any group play exper	ience? ☐ Yes ☐ No Where?		
What behavior do you correct most often	?		
How does your child respond to discipline			
What are your child's favorite activities?_			
Please add anything else you think we sl	nould know about your child		
In Making Application, I/we understand a of Education of Christian Heritage Acade cooperate in having my/our child educate	emy (located on the back cover of the	his application), and will fully	
Parental Signature (s)		Date	
As a parent or guardian, I give permissio by child in order to obtain records releva			
Parental Signature (s)		Date	

Christian Heritage Academy admits students of any race, color, sex, and national or ethnic origin, to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, sex, or national or ethnic origin in administration of its educational policies, admissions policies, scholarship and loan programs, and athletic and other school-administered programs. Christian Heritage Academy does reserve the right to select students on the basis of academic performance, religious commitment, philosophical compatibility, and willingness to cooperate with the Christian Heritage Academy administration and abide by its policies. Excerpted from the Constitution of the Association of Christian Heritage Academy, adopted 1984.