

# **Admission Packet**



# **APPLICATION INFORMATION**

# **APPLICATION PROCEDURES**

All Students, PreK4-12

Complete an Application for Enrollment. Return it to the Admissions Office with a check for \$75 per student. This Registration Fee is non-refundable. The application and fee should be accompanied by report cards (previous two years plus current grades), immunization records, birth certificate and standardized test scores, if available.

**2** All Students, PreK4-12
Complete a Student Background Survey Form. This document should be returned to the Admissions Office with the application. Schedule a time and date for diagnostic entrance testing.

Grades 2-12
Give Confidential Character Reference Form to a non relative who has known you for at least one year. (Be sure to complete the applicant's section of the form). These recommendations must be mailed directly to CCA by the person completing the form or faxed to the CCA Office of Admissions at (903) 796-4350.

Admission Decision
Acceptance into Champions Christian
Academy will be based upon the entrance
interview (if required), testing results,
references, behavioral history and academic
profile.

#### **ADMISSION POLICIES**

Applicants for admission to Champions Christian Academy must furnish evidence that they are physically and emotionally fit, of good moral character, and academically capable. All applicants must:

- complete all of the application procedures detailed in this document;
- · be eligible for re-enrollment in all schools previously attended;
- have not been suspended or expelled from school within the past twelve months;
- have acceptable conduct grades and work habits;
- be free of severe learning or behavioral problems;
- must not be coming directly from any type of rehabilitation program (i.e., drug, alcohol, behavioral, mental, etc.);
- agree to comply with all policies in the **Parent-Student Handbook.**All new students will be accepted on probation for a period of 9 weeks. During this period, conduct and academic status will be monitored closely. Continued enrollment is dependent upon acceptable levels of attendance, behavior, psychological maturity and academic

#### **DIAGNOSTIC ENTRANCE TESTING**

Entrance testing is an important tool used in the admission process. This vehicle is used to ensure each applicant's potential for success. All testing is administered by our professional staff. These tests are designed to measure academic ability and current skills levels. The results are used as a part of each applicant's profile in determining placement.

## LEARNING CHALLENGES

achievement.

Champions Christian Academy is a college-preparatory school with extremely high academic standards. Consequently, it is very difficult for students who have severe learning challenges to function academically at CCA. We realize that the name Christian does not necessitate that we become all things to all people any more than a doctor who specializes in one type of surgery is expected to perform surgery for which she/he has not been trained. Therefore, it is our goal as a Christian school to ensure that every student who qualifies for admission will be successful. To accomplish this goal with students who have mild learning disabilities, CCA reserves the right to require parents to arrange and fund remediation services to supplement classroom instruction when the need is identified by our professional staff.

## **NOTICE OF NON-DISCRIMINATION**

Champions Christian Academy does not discriminate on the basis of religion, race, color, national or ethnic origin regarding its policies, educational offerings, financial assistance programs, athletic programs, or other school-sponsored activities.



# **Application for Admission**

# **APPLICANT INFORMATION** Applicant Name: (First) Preferred Name: \_\_\_\_\_ (Middle) Home Address:\_\_\_ City:\_\_\_\_\_\_State:\_\_\_\_\_Zip:\_\_\_\_\_ Home Phone #:\_\_\_\_\_\_ Student Cell Phone #:\_\_\_\_\_ First and Last Name(s) of any siblings who attend or have attended CCA:\_\_\_\_\_\_ Applying for Grade: \_\_\_\_\_ Applying for School Year: \_\_\_\_ Attended CCA in the past? Yes No What public school would applicant attend? District:\_\_\_\_ \_\_\_\_School:\_\_\_\_ Current School Name: \_\_\_\_ Current School Address: \_\_\_\_ \_\_\_\_\_ Phone #: \_\_\_\_\_ Religious Denomination: \_\_\_\_\_\_ Church attending: \_\_\_\_\_ Church activity involvement: List medications taken, dosage and frequency: NAME OF MEDICATION DOSAGE **FREQUENCY** Please check all that apply: Asthma 🖵 Diabetes High Blood Pressure ☐ Past Surgery ☐ Food Medicines □ Insects Plants Other 🗖 Allergies to: Please explain in detail anything checked above: \_\_\_\_ For Office Use: \_\_\_\_\_ Application Fee: \_\_\_\_\_ Date Application Rcvd: \_\_\_\_\_

APPLICANT IN	IFORMATIC	ON CONTINU	ED	
Doctor Name:				Phone #:
Dentist Name:				Phone #:
Name of Insurance Co	ompany:			Phone #:
Policy #:		Group #:		ID #:
Name of Insured:			Employe	er:
FAMILY INFOR				
Please check the follo		ble:		
Father Decea	sed 🗖 Moth	ner Deceased 🗖	Parents Separate	ed 🗖 Parents Divorced 🗖
Father Remar	ried 🗖 Moth	ner Remarried 🗖		
Applicant Lives With:	Both Parents	<b>I</b> Mother Only □	Father Only 🗖	Mother & Stepfather □
	Father & Stepi	mother 🗖 Guard	ian 🗖 Other 🗖 -	
dismissal authorit 3. Please also provid Emergency Contact Parent/Guardian #1	de Grandparent ct or Dismissal		tion if they are no	ot listed as a Parent/Guardian,
Dr/Mr/Mrs/Ms First N	ame:		MI:	Last Name:
Home Address:				—— Home Phone #:
City:		State:	Zip:	Cell Phone #:
Preferred communication	ation email addr	ess:		
Secondary communi	cation email add	dress:		
Driver's License #:				
Employer:		Occupation:_		
Employer Address:				
Employer City:		State:	Zip:	Work Phone #:
Religion:		Church atten	ding:	
Please check all that	apply to this per	son: Custodial Par	ent  Financial	Responsibility Grandparent G
Receive Report Car	rd 🗖 Emergen	cy Contact 🗖 Di	smissal Authority	

# Parent/Guardian #2

Dr/Mr/Mrs/Ms First Name:		_MI:	Last Name:			
Home Address:			Home Phone #	;		
City:	_State:	Zip:	Cell Phone #:_			
Preferred communication email address:						
Secondary communication email addres	S:					
Driver's License #:						
Employer:	_Occupation:					
Employer Address:						
Employer City:	_State:	_Zip:	Work Phone #:			
Religion:	_Church attendi	ng:				
Please check all that apply to this person	: Custodial Parei	nt 🗖 Financial	Responsibility	Grandparent		
Receive Report Card   Emerg	jency Contact 🗖	Dismissal Autl	nority <b></b>			
Grandparent/Emergency Contact/Dis		-				
Dr/Mr/Mrs/Ms First Name:		_MI:	Last Name:			
Home Address:			Home Phone #	:		
City:	_State:	Zip:	Cell Phone #:_			
Preferred communication email address:						
Secondary communication email addres	S:					
Driver's License #:						
Employer:	_Occupation:					
Employer Address:						
Employer City:	_State:	_Zip:	Work Phone #:			
Religion:	_Church attendi	ng:				
Please check all that apply to this person	: Custodial Parer	nt 🗖 Financial	Responsibility <b></b>	Grandparent		
Receive Report Card   Emerg	jency Contact 🗖	Dismissal Autl	nority 🗖			
Guardian/Emergency Contact/Dismissal Authority (continued on next page)						
Dr/Mr/Mrs/Ms First Name:	<u> </u>	•				
Home Address:						
City:						
Preferred communication email address:		Διρ	Cell r llolle #			

# Guardian/Emergency Contact/Dismissal Authority (continued from previous page) Secondary communication email address: Driver's License #: Employer: Coccupation: Employer Address: Employer City: State: Church attending: Please check all that apply to this person: Custodial Parent Receive Report Card Emergency Contact Dismissal Authority TOTAL FEES In addition to the \$75.00 Registration fee, please select one of the following methods for paying tuition. All tuition payments will be made to Champions Christian Academy by either check, cash or credit cards with a 2% transaction fee. There will be a \$20.00 charge for all NSF checks.

3 P	ayment options:
	One (1) full year tuition payment made by the first class day:  1 Child: PreK-K = \$3400/year; 1st-12th= \$2500/year  2 Children: PreK-K = \$6550/year; 1st-12th= \$4750/year  3+ Children: PreK-K= \$8700/year; 1st-12th=\$6000/year; add (PreK-K) \$1700/year & (1st-12th) \$1250/year for each additional child
	<b>Two (2) equal tuition payments paid: (1) by the first class day and, (2) by the first class day in February</b> 1 Child: PreK-K = \$1750/twice a year; 1st-12th= \$1275/twice a year 2 Children: PreK-K = \$3300/twice a year; 1st-12th= \$2400/twice a year 3 Children PreK-K = \$4375/twice a year; 1st-12th= \$3025/twice a year
	Nine (9) equal tuition payments:  1 Child: PreK-K=\$385; 1st-12th=\$285 paid by the 1st class day of the mo. 2 Children: PreK-K=\$735; 1st-12th=\$535 paid by the 1st class day of the mo. 3 Children: PreK-K=\$985; 1st-12th=\$684 paid by the 1st class day of the mo.

Annual curriculumcosts vary based on the age and rate of accelerated learning per child. We do not mark-up curriculum and therefore you will only be charged actual cost. A curriculum fee of \$125 per child for PreK and Kindergarten, and \$250 per child for levels 1-12 is due by the first day of class. You will be notified if your child will require additional curriculum fees. If the child doesn't use all of the curriculum deposit by the end of the school year, it can be carried over to the next year or refunded to you. Monthly payments not received by the 5th of the month will incur a late fee of \$5.00 per day until payment is recieved. This amount will be deducted from the curriculum account. If more than one payment is delinquent and arrangements have not been made with the Administrator, the student may not be allowed to attend school until the account has been made current.

There will be an annual computer lab fee of \$20 that will be deducted from each student's curriculum account. This covers the annual license for your student ti use ReadMasterPlus, an A.C.E. computer based enrichment program than supplement the A.CE. curriculum.

There will be an annual P.E. fee of \$20 that will be deducted from each students curriculum account. This fee allows for necessary repair and upgrade of P.E. equipment.

# **CERTIFICATION**

As Parent or Legal Guardian, I authorize a Champions Christian Academy Administrator, or staff to have the above named student examined by a qualified physician or dentist, and in the event of injury to administer any emergency care he deems necessary to ensure proper treatment. Every effort will be made to contact parent or guardian to explain the nature of the problem prior to any involved treatment. In signing this form as a parent or guardian, I hereby agree to relieve the school and/or its officers of any liability for injury or accident occurring on the school premises, while on a field trip or athletic competition trip. I give my permission for my child to take field trips, accompanied by school personnel, as a part of the school's activities.

activities.	
Parent/Guardian Signature	Date
Champions Christian academy was founded on Chrimembers. We understand that all students will partiassemblies. We agree to support and follow all rules that failure to do so will result in disciplinary action (Furthermore, we understand that all students new to probation for a period of 9 weeks. By our signatures policies and that all information provided on this apknowledge.	icipate in daily Bible study and regular chapel and regulations of the school and understand (which may include suspension or expulsion). O CCA are accepted on academic and behavioral shereon, we certify that we understand these
Parent/Guardian Signature	Date
Student Signature	Date
<b>Web site Waiver:</b> Champion Christian Academy may use web sites or in promotional materials without permission	
<b>Medical Certification:</b> I acknowledge that my child has be professional and is able to participate in all school activities.	• • • •
Application Checklist:	
Please use this checklist to ensure all information ne Academy is completed in a timely manner.	eded for application to Champions Christian
<ul><li>□ Completed Application</li><li>□ Copy of Birth Certificate</li></ul>	<ul><li>Paid Registration Fee of \$75 per child</li><li>Copy of Social Security Card</li></ul>
<ul><li>Completed Character Reference Form</li><li>Completed Elementary or Secondary Background</li><li>Vision/Hearing Screening per State of Texas requ</li></ul>	•
ACREMENT	

#### . . . . . .

In signing this form, I hereby agree to relieve Champion Christian Academy, its officers, and its directors of any liability for injury or accident occurring on the school premises or while on a field trip. I have read and understand the school policies of Champions Christian Academy and agree to support them. I also understand that all registration fees are non-refundable.



# **Elementary Student Background Survey**

Grades K - 5th

Applicant's Name:			
As a part of the application process at Champions complete this form. It must be signed by the application the CCA Admissions Office with the <i>Application</i> results, doctor's reports, etc.). All information proving	icant and a parent or legal guardian. This for for Admission and any supporting document	m should be ret	
Please provide explanation to any "YES" answers	in the space provided on the back of this page	-	NI -
Has this applicant ever been suspended or explearning center?	elled from any school or assigned to an altern	Yes native	No 🗆
2. Has this applicant been declared ineligible to re	e-enroll at any school he/she has attended?		
3. Has this applicant ever been tested or treated f	or any of the following:		
Attention Deficit Disorder (ADD)			
Hyperactivity Disorder (ADHD)			
Speech or Language Difficulty			
Emotional or Behavioral Problems			
Vision Problems			
Hearing Problems			
Any other Learning Disability			
4. Has this applicant ever been in consultation wi	th a counselor for any reason?		
5. If transferring from a private school, is the appli	cant's account delinquent?		
We agree to the immediate dismissal from	n Champions Christian Academy of tl	ne above nan	ned
applicant for any misstatement or omissi	on of information on this form.		
Student Signature Pa	rent/Guardian Signature D	ate	

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Elementary Student Background Survey Grades K - 5th continued

Please explain here any "Yes" answers from the front:			



# Secondary Student Background Survey

Grades 6th - 12th

Applicant's Name:		
As a part of the application process at Champions Christian Academy, each secondary student (Grades 6 complete this form. It must be signed by the applicant and a parent or legal guardian. This form should to the CCA Admissions Office with the <i>Application for Admission</i> and any supporting documentation (test results, doctor's reports, etc.). All information provided will remain confidential.	be ret	
Please provide explanation to any "YES" answers in the space provided on the back of this page.	Yes	No
1. Has this applicant ever been suspended or expelled from any school or assigned to an alternative learning center?		
2. Has this applicant been declared ineligible to re-enroll at any school he/she has attended?		
3. Has this applicant ever been tested or treated for any of the following:		
Attention Deficit Disorder (ADD)		
Hyperactivity Disorder (ADHD)		
Speech or Language Difficulty		
Emotional or Behavioral Problems		
Vision Problems		
Hearing Problems		
Any other Learning Disability		
4. Has this applicant ever been in consultation with a counselor for any reason?		
5. Has this applicant ever been charged with selling, possessing, or using illegal drugs or controlled substances?		
6. Has this applicant ever been involved in gang, satanic, cult-related, or inappropriate sexual activities?		
7. Has this applicant ever been accused of or involved in the illegal possession of a dangerous weapon?		
8. Has this applicant ever had his/her driver's license suspended or revoked or been charged with Driving While Intoxicated, Driving Under the Influence or Minor in Possession?		
9. Has this applicant ever been arrested or convicted by any civil authorities, including juvenile courts?		
10. Has this applicant ever been married, divorced or pregnant?		
11. If transferring from a private school, is the applicant's account delinquent?		
We agree to the immediate dismissal from Champions Christian Academy of the above na applicant for any misstatement or omission of information on this form.	med	
Student Signature Parent/Guardian Signature Date		

Secondary Student Background Survey Grades 6th - 12th continued

Please explain here any "Yes" answers from the front:		



# **Confidential Character Recommendation Form**

Grades 2nd - 12th

Parent or Guardian	า
Please write your child's name in the space above and read and	sign the following before giving this
form to someone who has known your child for at least one yea	r. This can be someone such as a pastor,
youth minister, scout leader, tutor, sponsor, coach, or neighbor.	
I understand that the information furnished by the reference na	med below is confidential and will
become the property of Champions Christian Academy. Furthe	rmore, I waive all rights to examine the
responses given.	
	Signature of Parent or Guardian

# **Character Reference**

Thank you for your time and care in completing this recommendation for the applicant named above. Your observations are held in complete confidence. Please check the appropriate boxes, include comments if you wish, sign, date and provide contact information on the back. Return the completed form directly to CCA by fax 903-796-4350 or mail (fax is preferred), **Attention: Admissions**.

Is the applicant:	Yes	No	N/A
Active in attending church?			
Active in attending Sunday School/Bible Class?			
Good at relating to peers?			
Emotionally and psychologically balanced?			
Self disciplined?			
Responds appropriately to successes and failures?			
Is the family:			
Supportive of their child?			
Of good standing in the community?			
If "no" to any of the above questions please elaborate:			
Length of acquaintance with the applicant?ye	ears		
Relationship to applicant:			

# Confidential Character Recommendation Form continued

Please list any suggestions you can give us to help this student be successful in our school (family difficulties o			
challenges, finances, personal traits, streng	gths and weaknesses etc):		
Γ			
Name and Title:	•		
Name of School:	•		
Signature:	Date:		

# PLEASE SIGN AND RETURN THIS PAGE TO CHAMPIONS CHRISTIAN ACADEMY OFFICE

#### PARTNERSHIP AGREEMENT

Champions Christian Academy's educational mission involves working with the home in the overall Christian education of students. As a family:

**We understand** that Champions Christian Academy is a ministry of Christ Centered Homes, Inc. and accepts interdenominational students and people from all racial backgrounds who desire a quality Christian education.

**We agree** to comply with the parental responsibilities including paying tuition payments on time and regularly.

**We agree** to support the school with our prayers and with a positive attitude. Complaints or negative comments will be shared only with the CCA staff administrator, or person involved, and <u>not</u> with our children or others. This follows the Biblical principle given in Matthew 18.

We understand that if at any time the Academy determines in its sole discretion, that our actions do not support the school's ministry, or they reflect a lack of cooperation and commitment to the home and school working together; it has the right to request the withdrawal of our student(s).

#### HANDBOOK AGREEMENT

We have read the entire Student/Parent Handbook and agree to support the policies and procedures during this school year and as long as our child/children attend Champions Christian Academy.

Parent Signature	Date	
3		
Student Signature	Date	
Student Signature	Date	



PO Box 777 • 702 Holly Street Suite D • Atlanta, TX • 75551 • 903-796-1805

	101	TION AGRE	EMENI				
Ch	ild's Name				_Grade		
TO	TAL FEES						
<b>In a</b> All t	ase select one of the following method ddition to the \$75.00 Registration fee, puition payments will be made to Champid transaction fee. There will be a \$20.00 char	please select or ons Christian Aca	ne of the followin demy by either ch	•			
3 P	ayment options:						
	One (1) full year tuition payment mad	de by the first cla	ıss day:				
	1 Child \$2500.ºº/year						
	2 Children \$4750.ºº/year						
	3+ Children \$6000.00/year; add \$1250.00	<sup>00</sup> /year for each a	additional child				
Two (2) equal tuition payments paid: (1) by the first class day and, (2) by the first class day in February							
	1 Child \$1275.00/twice a year	•	•				
	2 Children \$2400.ºº/twice a year						
	3 Children \$3025.00/twice a year						
	Nine (9) equal tuition payments of:	\$535.00 for 2 ch	nildren paid by th	rst class day of the e first class day of e first class day of	f the month.		
and the and \$ and \$ and it is an because will in accordance and in	al curriculum costs vary based on the ag herefore you will only be charged actua 250.00 per child for levels 1-12 is due by ional curriculum fees. If the child doesn' e carried over to the next year or refund ocur a late fee of \$5.00 per day until payn ant. If more than one payment is delinquadent may not be allowed to attend scl	I cost. A curricul the first day of c 't use all of the co ded to you. Mont nent is recieved. uent and arrange	um fee of \$150.00 class. You will be r urriculum deposit thly payments no This amount will ements have not	per child for Prek notified if your ch t by the end of the t received by the be deducted fron been made with t	and Kindergarte ild will require e school year, it 5th of the montl n the curriculum		
his c	e will be an annual computer lab fee of \$ sovers the annual license for your studer ram than supplement the A.CE. curriculu	nt ti use ReadMa					
	will be an annual P.E. fee of \$20 that was for necessary repair and upgrade of P.		rom each studen	ts curriculum acco	ount. This fee		
Tuitio	on Fee(s) Curruculu	ım Fee(s)		Total Fee(s)			
	RENT'S SIGNATURE						
PA "I agre need i child if ee of payme		selected above ar or. I understand fa Monthly payments s will be deducted not been made wi	nd understand if pa ailure to abide by t s not received by to I from the curricul	ayment is late more his agreement will he 5th of the montl m account. If more	e than once, l result in my h will incur a late than one		

Parent's Signature Date Updated: 7/07/13



TO: Parent/Guardian FROM: **Administrator Beth Hill** SUBJECT: Photograph/Name Release for School Website/Facebook/Local Newspaper Champions Christian Academy is striving to maintain a high level of security for your child(ren) regarding our school website/Facebook/Local Newspaper. The following is a request for your permission to use your child's photo and/or full name. Please complete the appropriate blank(s), sign and have your child return it to the designated staff member at his/her school. Student's Name: (No personal information such as home address or phone numbers will be displayed online or in newsprint.) **NAME RELEASE:** I give permission for my child's full name to be featured on: ☐ CCA websites ☐ Facebook ☐ Local Newspapers No. I do not give permission for my child's full name to be featured on: ☐ CCA websites **□** Facebook ☐ Local Newspapers PHOTO RELEASE: I give permission for my child's photo or illustrating materials to be featured on: ☐ CCA websites ☐ Facebook ☐ Local Newspapers No. I do not give permission for my child's photo or illustrating materials to be featured on: ☐ CCA websites ☐ Facebook ☐ Local Newspapers Parent/Guardian Signature Date



	PICK-UP PERI	MISSION FOR	MI.	
Name of Child:				
I give permission for my child responsibility of the parents to				
Name	Phone Number		Relationship	
	must be made as to who	picks up child at a	urt injunction must be provided in case all times. If there is a separation, divorce,	
Name of person(s) who may no	ot pick up the child:	I		
Name		Relationship		
	SIGNA	TURE		
Signature of parent or guardiar	ո։		Date:	



## Grades 1-5 Students:

Solid color Bible, King James Version only

- 1 Box colored pencils
- 4 large brown envelopes appx. 9x11
- 1 small spiral notebook (solid colors)
- 1 large 5 subject spiral notebook (solid colors)
- 2 pkgs. of YELLOW #2 pencils
- 5 black or blue ink pens
- 2 large pink erasers
- 12-inch ruler
- 3 large boxes of Kleenex
- 1 large bottle of GermX hand sanitizer
- 1 ream multipurpose copy paper
- 4 pkgs. of wide ruled notebook paper Small plastic school box (solid colors)
- 1 box pencil top erasers

# Sixth - Eleventh Levels, additional supplies:

Personal Dictionary

Calculator

Protractor

Compass

1 pack blank white index cards (art supplies if Elective is chosen)

# Twelfth Levels, additional supplies:

Graphing Calculator TI-83 Plus or TI-84 Plus