



## Secondary Student Background Survey

Grades 6th - 12th

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**Applicant's Name:** \_\_\_\_\_

As a part of the application process at Champions Christian Academy, each secondary student (Grades 6-12) must complete this form. It must be signed by the applicant and a parent or legal guardian. This form should be returned to the CCA Admissions Office with the *Application for Admission* and any supporting documentation (testing results, doctor's reports, etc.). All information provided will remain confidential.

Please provide explanation to any **"YES"** answers in the space provided on the back of this page.

	<b>Yes</b>	<b>No</b>
1. Has this applicant ever been suspended or expelled from any school or assigned to an alternative learning center?	<input type="checkbox"/>	<input type="checkbox"/>
2. Has this applicant been declared ineligible to re-enroll at any school he/she has attended?	<input type="checkbox"/>	<input type="checkbox"/>
3. Has this applicant ever been tested or treated for any of the following:		
Attention Deficit Disorder (ADD)	<input type="checkbox"/>	<input type="checkbox"/>
Hyperactivity Disorder (ADHD)	<input type="checkbox"/>	<input type="checkbox"/>
Speech or Language Difficulty	<input type="checkbox"/>	<input type="checkbox"/>
Emotional or Behavioral Problems	<input type="checkbox"/>	<input type="checkbox"/>
Vision Problems	<input type="checkbox"/>	<input type="checkbox"/>
Hearing Problems	<input type="checkbox"/>	<input type="checkbox"/>
Any other Learning Disability	<input type="checkbox"/>	<input type="checkbox"/>
4. Has this applicant ever been in consultation with a counselor for any reason?	<input type="checkbox"/>	<input type="checkbox"/>
5. Has this applicant ever been charged with selling, possessing, or using illegal drugs or controlled substances?	<input type="checkbox"/>	<input type="checkbox"/>
6. Has this applicant ever been involved in gang, satanic, cult-related, or inappropriate sexual activities?	<input type="checkbox"/>	<input type="checkbox"/>
7. Has this applicant ever been accused of or involved in the illegal possession of a dangerous weapon?	<input type="checkbox"/>	<input type="checkbox"/>
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?	<input type="checkbox"/>	<input type="checkbox"/>
9. Has this applicant ever been arrested or convicted by any civil authorities, including juvenile courts?	<input type="checkbox"/>	<input type="checkbox"/>
10. Has this applicant ever been married, divorced or pregnant?	<input type="checkbox"/>	<input type="checkbox"/>
11. If transferring from a private school, is the applicant's account delinquent?	<input type="checkbox"/>	<input type="checkbox"/>

**We agree to the immediate dismissal from Champions Christian Academy of the above named applicant for any misstatement or omission of information on this form.**

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Student Signature \_\_\_\_\_ Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

