



Christian Life Academy

1150 SW 20th Avenue, Cape Coral, Florida 33991
(239) 283-1022 FAX: (239) 283-3430

Dear Applicant:

Thank you for considering Christian Life Academy for your child. Christian Life Academy believes parents and teachers should work hand in hand to educate children spiritually and academically. Our program centers on how God affects all areas of our lives. We provide a high quality Christian education for an affordable price to our community.

Please visit Christian Life Academy and decide if this is where you feel God would want your child.

Please return the following items to enroll your child:

- Complete the enclosed *Application for Admission* form
- Submit the registration/curriculum & testing fee of \$400 (non-refundable)
Due by: _____
- Submit last report card and records from any schools previously attended.
- Submit an original Florida Certificate of Immunization, a physical examination performed within one year prior to entrance in Florida school, and a copy of the child's birth certificate. This must be submitted before the student can begin school.



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Application for Admission

Student Information

Student's Name _____
(Last) (First) (Middle)

Birthdate: _____ Grade Entering: _____

Address: _____ City _____

State _____ Zip _____ Phone Number _____ Sex: _____

Starting Date: _____

Family Background

Father's Name _____

Address _____

Phone _____

Employer _____

Occupation _____

Business Phone _____

E-Mail Address: _____

(please make sure the email address is legible. This is your way to access your child's grades.)

Mother's Name _____

Address _____

Phone _____

Employer _____

Occupation _____

Business Phone _____

E-Mail Address: _____

(please make sure the email address is legible. This is your way to access your child's grades.)

Natural parents are: together at home separated divorced widow

If parents are divorced or separated, who has legal custody?

Name of guardian if other than parent _____ Relationship _____

Academic Information

Previous school attended: _____
Name of School

Grades attended: _____ Dates: _____

Reason for leaving: _____

Has student ever repeated a grade? _____ Which grade(s)? _____

Any physical or emotional problems?

Describe the student's interests, talents, abilities:

Where did you receive information about Christian Life Academy?

Church Website Other _____

Friend (If the friend who recommended the school is already a Christian Life Academy family, please give us their name

Spiritual Information

Does your family attend church? Yes ____ No ____

Church _____ Regular Attendance? _____

Please explain your reasons for desiring to enroll your child at Christian Life Academy.

Parents' (or legal guardians') Statement

In making application for my child to attend Christian Life Academy:

- I agree to support the spiritual, moral, dress, and disciplinary standards of the school as outlined in the Parent Handbook.
- I agree to assume the responsibility for my child's education by supervising homework and keeping in regular contact with my child's teachers.
- I understand that until such time as CLA has adequate facilities and staffing to service students with learning disabilities or special physical/emotional needs, the school reserves the right to refuse admission for such students. Upon screening and detection of such needs in any enrolled student, CLA will evaluate on an individual basis its ability to provide adequate instruction for that student.
- I agree to support to the best of my ability, through attendance and participation, the various activities of the school.
- I agree to allow my child to go on scheduled field trips and other school activities.
- I agree to support, to the best of my ability, the school's entire program through prayer, time, and financial gifts.
- I understand that 10 hours of volunteer work per student is required yearly by parent for Christian Life Academy.
- I understand that this application cannot be considered without the Registration Fee and that I agree to the payment and/or refund policies listed on the school's tuition worksheet.
- I will attend meetings and parent functions of the school regularly.
- I understand that Christian Life Academy reserves the right to refuse any application, or dismiss any student, at any time, for unacceptable work or conduct, or any other reason it deems necessary. Neither this application nor payment of fees is considered to be binding upon Christian Life Academy. If a student is dismissed from the school, the parents are still responsible to pay the full tuition for that month.

Father's Signature

Date

Mother's Signature

Date

Christian Life Academy admits students of any race, color, national and ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to the students of the school. Christian Life Academy does not discriminate on the basis of race, color, national and ethnic origin in the administration of its educational policies, admission policies, athletics, or any other school administered programs.

STUDENT RECORDS RELEASE

Christian Life Academy

1150 SW 20th Avenue, Cape Coral, FL 33991

239-283-1022 FAX: 239-283-3430

Email: Lpeers@clawarriors.com (preferred)

**Parents: Please complete this form including the complete address of previous school.
Return the completed form to Christian Life Academy with application.**

Student's Name: _____ Birth Date: _____
Last First Middle

School: _____

Mailing Address: _____
Street/PO Box City State Zip

I give my permission for the release of the following records concerning my child to Christian Life Academy.

Parent Signature: _____ Date: _____

FOR OFFICE USE ONLY

Attention Student Records Administrator:

The student listed above is enrolled in grade ____ at CHRISTIAN LIFE ACADEMY, as of _____.
Please send the following information as soon as possible.

1. Transcript—listing all subjects taken and grade received (including summer school).
2. Withdrawal Grades—if any.
3. Standardized test scores.
4. Psychological reports and discipline/conduct records, including any suspensions.
5. Copy of Birth Certificate.
6. Immunization and Health Records.

Thank you!

Student Records, Christian Life Academy