

STUDENT INFORMATION AND TRANSFER OF RECORDS

Please list all students you are enrolling in CMCA this year. If your child has previously attended another school, we will send for his/her cumulative record file. If you home schooled on your own you will need to bring the cumulative file to the enrollment interview. Please fill in the information **COMPLETELY** for the last school attended. **Do not forget to include the full address and phone number.**

First and Last Name _____ Gender _____ Age _____ Birth Date _____ Social Security # _____ Grade Enrolling _____

Relationship to "Husband" _____ Relationship to "Wife" _____

Last School Attended: _____

_____ (____) _____
Name Address State Zip Code Phone Number

I hold this student's cumulative file: Yes No

First and Last Name _____ Gender _____ Age _____ Birth Date _____ Social Security # _____ Grade Enrolling _____

Relationship to "Husband" _____ Relationship to "Wife" _____

Last School Attended: _____

_____ (____) _____
Name Address State Zip Code Phone Number

I hold this student's cumulative file: Yes No

First and Last Name _____ Gender _____ Age _____ Birth Date _____ Social Security # _____ Grade Enrolling _____

Relationship to "Husband" _____ Relationship to "Wife" _____

Last School Attended: _____

_____ (____) _____
Name Address State Zip Code Phone Number

I hold this student's cumulative file: Yes No

First and Last Name _____ Gender _____ Age _____ Birth Date _____ Social Security # _____ Grade Enrolling _____

Relationship to "Husband" _____ Relationship to "Wife" _____

Last School Attended: _____

_____ (____) _____
Name Address State Zip Code Phone Number

I hold this student's cumulative file: Yes No

Did you have a student(s) enrolled in Calvary Murrieta Christian School last year? Yes No

If Yes, please list:

Please list below all other children who reside in your home:

<u>First and Last Names</u>	<u>Age</u>	<u>Grade</u>	<u>School They Will Be Attending</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

DEMOGRAPHIC INFORMATION FOR NEW STUDENTS

Use additional paper if needed. Please check one:

First and Last Name	African American	American Indian	Asian	Caucasian "White"	Hispanic	Native Hawaiian/Pacific Islander	Other/Specify

SPECIAL CIRCUMSTANCES

Have any of your students ever skipped or repeated a grade? Yes No If Yes, list student's name(s) and grades they skipped or repeated. Briefly describe the circumstances.

Do any of your students have an IEP or a 504? Yes No If Yes, list student's name(s). Please explain.

Have your students ever received any special tutoring? Yes No If Yes, list student's name(s). Please explain.

DISCIPLINARY PROBLEMS

Have any of your students ever been suspended, expelled or asked to withdraw from a school? Yes No
If Yes, list student's name(s). Please comment on circumstances.

Have any of your students had any problems with any type of drugs, alcohol, or tobacco? Yes No
If Yes, list student's name(s). Please comment on circumstances.

HOME SCHOOL LEGAL DEFENSE ASSOCIATION

Are you currently a member? Yes No If so, what is your renewal date? _____

What is your HSLDA #? _____ (Please submit a **COPY** of your membership card.)

You are required to join HSLDA. The only exceptions are families whose enrolled children are under 6 years of age or have reached age 18.

I promise to pay any HSLDA renewal fee by the first of the month in which it is due. I realize that failure to do so, terminates my enrollment at CMCA retroactive to the HSLDA expiration date.

Signed _____ Date _____