



1125 N. Dobson Road, Chandler, AZ 85224
 (480) 722-1445

For Office Use Only		
Date Application Received:	Tour Date:	
Committee Notes:		
Date of Admission:	Registration Fee Rec'd	<input type="checkbox"/>
Check #	<input type="checkbox"/> Cash	Amount \$

Please return your Request for Admission with your Tuition Agreement to the school office as PDF attachments by email to lpitt@hope-eagles.com or as hard copies by US mail or in person (during our business hours) for review by our Admission Committee. The Admissions Committee will only review applicants with these completed documents. The two Personal Reference Forms can be included with these documents or may be sent by US Mail directly by your reference to arrive separately. The completed Personal Reference Forms will be part of the consideration by the committee, but the delay of one will not prevent an application from being reviewed.

NEW PRESCHOOL STUDENT – REQUEST FOR ADMISSION

HOPE Christian Academy admits students of any race, color, and national or ethnic origin. *This application is considered a confidential document and your responses will be shared only with the Admissions Committee and administration approved school employees.*

A \$300 non-refundable registration fee per student (family maximum of \$900) will be required to complete this application upon approved enrollment.

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Student Information

If you need more space please attach a separate document with corresponding numbered answers.

Name _____ Sex _____ Age _____
 Last First Middle

Home Address _____

_____ City State Zip

Date of Birth _____

- Student is applying for 3's Preschool 2025-26 school year.
- Student is is applying for Pre-Kindergarten 2025-26 school year.

Are you thinking of applying at any other schools? No Yes _____

Parents' Marital Status: Married ____ Single ____ Divorced ____ Widowed ____

Father's Name _____ Phone _____

Email _____ Father's Occupation _____

Mother's Name _____ Phone _____

Email _____ Mother's Occupation _____

1. How did you hear about HOPE Christian Academy (HCA)?

Internet Search Former or Current HCA family _____

Other (please specify) _____

2. Are you applying for admission to all of your children who are eligible to attend HCA? _____

If not, why not? _____

3. From what you have heard, read, and observed about HCA, share why you feel it is a good fit for your child and your family. _____

4. What do you want us to know about your child? (academic and/or personal strengths/challenges, interests, extracurricular activities, etc.)

5. What is your availability during our school days (Tuesdays & Thursdays) to fulfill the required service hours on-campus each month?

6. Is this your child's first preschool experience? Yes or No

7. Is your child in any type of developmental program(ex. Speech, Occupational therapy)

Yes or No If so, what type of program? _____

7. Do you have a church home? Yes or No

8. PRIMARY Language spoken in the home _____

9. Is your child potty trained? Yes or No

PLEASE REVIEW AND CHECK THE FOLLOWING ITEMS AND SIGN BELOW:

- I have read and understand this Request for Admission, and also the HCA Statement of Faith and Family Covenant available on the "About Us" page of the school website (www.hope-eagles.com). In making this request for admission, I accept, on behalf of the student, the principles of the school and I further understand that:
- The teacher has discretion in the classroom discipline of my child.
- We commit to agree with any policy or policy implementation. Furthermore, we accept the Biblical instruction of:
 - a) unity among the brethren as talked about in I Peter 3:8, Ephesians 4:4-6, Acts 2:42-47, and I Corinthians 12:25
 - b) the teaching of correct behavior as a follower of Christ found in 2 Timothy 2:23, Ephesians 4:32, Philippians 2:4, and James 3:5-8
 - c) HOPE Christian Academy encourages a Biblical approach to any differences or misunderstandings by promptly bringing your concern to the appropriate teacher, staff member or administrator. An explanation of the Matthew 18 principle for conflict resolution as it applies to our school community can be found online at <http://peacemaker.net/project/acsi-the-matthew-18-principle-for-solving-school-problems/>
- My cooperation is expected in:
 - a) the regular tuition payments
 - b) fulfillment of HCA campus/classroom service hours and
 - c) upholding of the HCA Family Covenant
- The school reserves the right to dismiss my student if he/she does not respect its spiritual standards or cooperate in the educational program or if I (we) the parent(s) do not support school policies.
- I understand that refunds cannot be issued for student absences due to sickness, vacations, closures due to weather or circumstances beyond our control.
- I will provide updated IMMUNIZATION records for my child by the start of school year.

Parent Signature _____ Date _____

Parent Signature _____ Date _____