



Hillsdale Christian Academy & Preschool

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Preschool Admission Application

School Term 20____ -20____		Application for Grade _____	
Student Information			
Name _____ Last First Middle Nickname			
Birth date:		Birth City and State:	
Sex:		Age:	Social Security Number:
School attended last year:			
Complete address of school:			
Has applicant attended HCA previously:		If so, list grades previously attended:	
Applicant's church _____ <input type="checkbox"/> Church Member <input type="checkbox"/> Regularly Attend		Pay plan (Only one pay plan per family may be chosen) Circle One: 1 Payment 2 Payments 10 Payments	
Parent or Guardian Information			
Father		Mother	
Full Name _____ Home Address _____ City _____ State _____ Zip _____ Home Phone _____ Cell Phone _____ Occupation _____ Place of Employment _____ Work Phone _____ Church _____ Pastor _____ Member? _____ Attend Regularly? _____ Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Widowed <input type="checkbox"/> Single <input type="checkbox"/> Divorced		Full Name _____ Home Address _____ City _____ State _____ Zip _____ Home Phone _____ Cell Phone _____ Occupation _____ Place of Employment _____ Work Phone _____ Church _____ Pastor _____ Member? _____ Attend Regularly? _____ Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Widowed <input type="checkbox"/> Single <input type="checkbox"/> Divorced	
Family E-mail address:			
Who has legal custody of the child for whom application is made?			
A current copy of any legal documents must be kept on file in the office. It is the sole responsibility of the parent to provide the school with any changes or updates to legal documents.			
K3 & K4	How many days will your child be attending? <input type="checkbox"/> 2 days <input type="checkbox"/> 3 days <input type="checkbox"/> 5 days		
K3 & K4	Will your child be attending: <input type="checkbox"/> Full-day (until 2:05pm) <input type="checkbox"/> Half-day (until 12:30pm)		
How did you learn about Hillsdale Preschool & Academy? _____			

All Students

Has applicant ever changed schools? _____ If so, at what grade levels? _____
 List names and ages of brothers and sisters living at home. _____

Are you applying for the admission of all your children currently of school age? _____ If not, please explain.

Give the reason(s) you desire for this student to be in Hillsdale Preschool. _____

Has your child ever been or is he currently being seen by a doctor or specialist for needs related to his emotional or mental well being? _____ If yes, please give details. _____

Has your child ever received any tutoring or therapy? _____ Explain: _____

List any unusual factors in applicant's life (i.e., absence of parent, invalidism of parent, unusual accidents). _____

Personal Skills

Is your child completely potty trained?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is your child able to feed himself?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is your child able to speak their name clearly?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is your child able to take care of personal needs (Use restroom without assistance)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Acceptance Policy

HPA reserves the right to accept or deny admission based on the information provided in the completed application packet. Notification of acceptance will be made within 10 working days after application process is complete. All additional paper work and forms must be completed and received before the student will be admitted to class.

Enrollment Agreement

In making this application, I understand and agree with the following:

1. I intend for my child to complete the school year at Hillsdale Preschool.
2. My child will attend scheduled events and other related school activities.
3. My cooperation is expected in (a) honoring all financial obligations (b) practical help, and (c) faithful prayer.
4. The teacher has full discretion in the classroom discipline of my child.
5. The administration has full responsibility for placing my child in the proper class.
6. The school reserves the right to dismiss any student who does not respect its spiritual standards or cooperate in the educational process.
7. At least one parent of students must attend an orientation meeting before the beginning of the school year.
8. No refunds are made on any fees including the registration fee. In the event of withdrawal, transfer, or expulsion, I am responsible for immediate, full payment of all tuition and fees incurred through the last date of enrollment to include any and all late fees on past due amounts.
9. I am willing to abide by the specific provisions and principles stated in the Parent-Student Handbook and cooperate with decisions made by the school administration.

Signature of both parents preferred; one will be accepted.

Father	Date
Mother	Date

For Office Use Only

Date Application Received	Interview
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