



Hillsdale Christian Academy & Preschool

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ACADEMY APPLICATION

School Term 20____ -20____	Application for Grade _____
Student Information	
Name _____ <div style="display: flex; justify-content: space-between; font-size: small;"> Last First Middle Nickname </div>	
Birth date: _____	Birth City and State: _____
Sex: _____	Age: _____
School attended last year: _____	
Complete address of previous 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 _____ Is this the student's primary address? <input type="checkbox"/> Yes <input type="checkbox"/> No 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 _____ Is this the student's primary address? <input type="checkbox"/> Yes <input type="checkbox"/> No 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 Email Address: _____	
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. Who has legal custody of the child for whom application is made? _____	
Early Care	Will your child need early care? _____ If yes, how often? _____
Aftercare	Will your child need aftercare? _____ If yes, how often? _____
Our billing process requires that credit card information be submitted. This card will only be charged if payment is not made by the 5th day following the tuition due date; all unpaid annual fees will be charged upon the day of Parent Orientation (or enrollment if thereafter). A convenience fee of 2.75% is added to all credit card transactions. <div style="text-align: right;"> Parent Initial: _____ Parent Initial: _____ </div>	
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 Academy. _____

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: _____

Has your child been issued an IEP (Individual Education Plan)? _____ If yes, please **submit a copy** and explain.

Has your child ever repeated a grade? _____ If yes, which grade(s)? _____

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

Financial Information

Name of person responsible for paying the student tuition/fees for this account? _____

If different from parents: Phone: _____ Email: _____

Scholarship Information (circle all that apply): Step Up for Students, McKay, Family Empowerment, HBC Assist
Please circle the one that applies: I am already approved I am awaiting approval I have not applied

Acceptance Policy

HCA 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 paperwork 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 Academy.
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

Registration Fee Paid

Transcript Requested