



Pre-Enrollment Application Form

Student Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Current Grade \_\_\_\_\_

Parent Name \_\_\_\_\_ Phone # \_\_\_\_\_

Address \_\_\_\_\_

Email Address \_\_\_\_\_

1. Why are you interested in attending a private Christian school?

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2. Do you have any concerns for you child in the following areas? Please circle any that apply.

Academic

Emotional

Behavioral

Please explain any circled answers.

Academic

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Emotional

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Behavioral

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Does your child require any special accommodations? If so, please explain.

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Does your Student have: (please circle)

IEP            504            MET

3. Schedule a Tour

[compassionchristianaz@gmail.com](mailto:compassionchristianaz@gmail.com)

602-472-2814

4. Submit any IEP, 504 or MET documents for your child to Compassion Christian Academy at [compassionchristianaz@gmail.com](mailto:compassionchristianaz@gmail.com). Documents must be submitted within one week following the date of your tour.



## Enrollment Process

Student Name \_\_\_\_\_

Date of Birth \_\_\_\_\_

Current Grade \_\_\_\_\_

Parent Name \_\_\_\_\_

Phone # \_\_\_\_\_

Address \_\_\_\_\_

Email Address \_\_\_\_\_

- Application form
- Schedule Tour
- Submit IEP, 504, MET documents for review
- Testing Appointment
- Interview with Enrollment Committee
- Complete Enrollment Packet
- Pay Registration Fee