



# CHRIST PRESBYTERIAN ACADEMY

## Application Update

Name \_\_\_\_\_ Grade Entering \_\_\_\_\_

1. Has your student been evaluated (at any age) by a school psychologist, speech and language pathologist, or other resource professional for learning exceptions? (i.e., academic giftedness, learning disabilities, language-processing deficits, ADHD)?

Yes  No

*If you answered yes, please provide the date and place where the testing was administered. Please submit a copy of all testing to the Office of Enrollment.*

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2. Has your student ever participated in resource, tutorial, or enrichment programs, had an IEP or a 504 Plan?  Yes  No

If so, in what setting and of what type?

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3. Is your student currently taking or has he / she taken prescription medication of any type on a regular basis?  Yes  No

If so, for what condition was this medication prescribed?

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*(Continued)*

4. Does your child have a long-term medical condition or physical handicap (i.e., asthma, hearing loss, anxiety, depression, etc.)? *(Please explain.)*

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5. Has your child ever been suspended, dismissed or asked to withdraw from another school or institution? *(Please explain.)*

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6. Has your child ever been arrested or convicted of a crime other than a minor traffic violation? *(Please explain.)*

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7. Has your child participated in a treatment program or been hospitalized for any adjustment-related issues? *(Please explain.)*

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Teacher References from your current school:

Phone

Email

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**Mission**

Christ Presbyterian Academy, an educational ministry of Christ Presbyterian Church, assists Christian families in helping students come to know God, evaluate all knowledge and all life by His truth, and live transformed by His truth for His glory.

**Motto**

*Soli Deo Gloria* — To God Alone Be the Glory