

# Church School Enrollment Form

*PARENTS: Please be sure to sign in BOTH places on this form. Otherwise, we cannot process it for your local Board of Education.*

## I. TO BE COMPLETED BY PARENT OR GUARDIAN

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

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

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

Address: \_\_\_\_\_

City: \_\_\_\_\_ County: \_\_\_\_\_

Zip: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**LAST SCHOOL ATTENDED, INCLUDING DATES:**

\_\_\_\_\_

**Signature of Parent**

**Date**

## COMPLETED BY ADMINISTRATOR

Church School of Enrollment: **New Hope Academy**

Address: **301 Water St., Prattville, AL 36067**

**Signature of Administrator**

**Date**

## II. CONSENT FOR NOTIFICATION OF STUDENT WITHDRAWAL TO BE COMPLETED BY PARENT

I hereby give prior consent to the administrator of New Hope Academy to notify the public school superintendent should the above named student cease attendance at New Hope Academy.

**Parent Signature**

**Date**

**Completed and signed copies will be sent to the local Board of Education and to the parents by New Hope Academy. Copies will be kept on file at New Hope Academy.**