



Ozark Christian Academy Re-Enrollment Form

2020-2021

Family Last Name: _____

Family Information:

Students Re-enrolling: _____ Expected Grade to Enter _____

Students Re-enrolling: _____ Expected Grade to Enter _____

Students Re-enrolling: _____ Expected Grade to Enter _____

Students Re-enrolling: _____ Expected Grade to Enter _____

Students Re-enrolling: _____ Expected Grade to Enter _____

Any first time enrolling students need to complete a new enrollment packet.

Are there any changes to your family living situation? No: _____ Yes: _____ If yes, please explain:

Contact Information:

Has your mailing or physical address changed? No: _____ Yes: _____ If yes, please correct below:

Home Address: _____ County: _____

City: _____ State: _____ Zip Code: _____

Mailing Address (If different from home): _____

City: _____ State: _____ Zip Code: _____

Medical Information:

Have there been any changes to your child/ren's medical history that could affect them while at school?

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Church Affiliation:

Where do you presently attend church? _____

City/State: _____ Pastor: _____

Authorized Pick-ups:

Are there any changes to your current Authorized Pick-up list? No: _____ Yes: _____ See list below:

Name: _____ Relationship: _____ Phone: _____

Name: _____ Relationship: _____ Phone: _____

Name: _____ Relationship: _____ Phone: _____

Name: _____ Relationship: _____ Phone: _____

Authorization to Apply for Re-admission:

I hereby acknowledge the information in this Application for Part-time Enrollment to be truthful and accurate. I understand that this Application does not guarantee my child's acceptance of enrollment into Ozark Christian Academy. I accept that students are admitted into Ozark Christian Academy based on spiritual testimony, academic history, and administrative interviews. I further accept that each application is subject to review by the official school board.

I recognize that Ozark Christian Academy admits students regardless of race, color, national and ethnic origin to all the rights, privileges, and activities made available to the students. Ozark Christian Academy does not discriminate on the basis of race, color, national or ethnic origin in administration of its educational policies, admission policies, and other school administered programs.

Parent/Guardian's Signature: _____ **Date:** _____

Best Contact Number: _____

Parent/Guardian's Signature: _____ **Date:** _____

Best Contact Number: _____

Family Feedback:

OCA is always looking for ways to improve our school! Please, share with us any comments you may offer for consideration. We may not be able do everything that is suggested, but we will always strive to be perceptive to the needs of our families.
