



*4660 Eastus Dr.
San Jose, CA 95129*

Admission Application 2009 – 2010

Student Information

Application Date _____

Name First Middle Last Nickname

Home Address Street City State Zip

Male Female Date of Birth _____ Home Phone _____ Social Security No. _____

Current or Most Recent School School Address

Parent Information

Mother's Name First Middle Last Soc. Security No.

Home Address Street (If different from applicant) City State Zip

Home Phone Work Phone Cell/ Pager Email

Employer Name Occupation Position Address

Father's Name First Middle Last Soc. Security No.

Home Address Street (If different from applicant) City State Zip

Home Phone Work Phone Cell/ Pager Email

Employer Name Occupation Position Address

Applicant Lives With:

Both Parents: _____ Mother: _____ Father: _____ Legal Guardian (Please Explain): _____

Who is/are the applicant's legal guardian(s): _____

Who is the person responsible for all tuition and fees: _____

Applicant's Siblings:

Sibling Name _____ Age _____ Current Grade _____ Current School _____

Sibling Name _____ Age _____ Current Grade _____ Current School _____

Additional information:

How did you hear of Champion School: _____

Were you referred by: A Parent _____ Name: _____

A Teacher _____ Name: _____

Other _____ Name: _____

Name of the school applicant currently attends: _____ Grade _____

School Address Street _____ City _____ State _____ Zip _____

Name of the school applicant previously attended: _____ Grades _____

Is there any medical or any other condition that we need to be aware of _____

What else should we know about the applicant, or his or her family (art, music, sports, hobbies, second languages, special interests, etc.): _____

Program Selection:

Preschool / Kindergarten

All Day 2 Days (T, Th)
 Morning Half Day 3 Days (M,W, F)
 Afternoon Half Day 4 Days (*,T, Th,*)
 Potty Trained (Y/N) 5 Days (M-F)

First – 8th Grade

1st Gr. 5th Gr.
 2nd Gr. 6th Gr.
 3rd Gr. 7th Gr.
 4th Gr. 8th Gr.

Extended Care (All):

Morning
 Afternoon

If you want to enroll your child in the Toddler Option, please indicate here and sign next to it below:

Yes No Signature: _____

I have read, understand and agree to abide by Champion School Policies. I agree to pay tuition, all emergency medical, dental, and emergency evacuation costs for my child.

Please include
a photo of the
applicant

Signature of parent/guardian _____ Date _____

Signature of person responsible for payment and debt _____ Date _____

Signature of facility representative _____ Date _____

Please enclose the \$75.00 non-refundable application fee