

Columbus Collegiate Academy
New Student Application Form, 2009-2010 School Year

Columbus Collegiate Academy will only be accepting application for the 2008-2009 6th grade class. The school will not be accepting applications for any other grade.

Please note: the following information is not used for selection purposes. Columbus Collegiate Academy does not discriminate on the basis of race, creed, national origin, ethnicity, religion, gender, sexual orientation, mental or physical disability, special needs, English language proficiency, athletic ability, or academic achievement. When there are more applicants than seats available, Columbus Collegiate selects its students through a random lottery.

Student Information

Student Name: _____
First Middle Last

Date of Birth: _____ / _____ / _____ Gender: Male Female
Month Day Year

Primary Language Spoken at Home: _____

Secondary Language Spoken at Home (if any): _____

Home Address: _____
Street Number Street Name Apartment/Unit #

City State / Zip Code

Telephone Number: (_____) _____

Name of Current School: _____ School Location: _____
City/State

Is the child a brother or sister of a student currently attending Columbus Collegiate? yes no

Is the student currently eligible for free or reduced-price lunch at school? yes no

Is the student currently in an English immersion or bilingual classroom? yes no

Does the student currently receive Special Education services under an Individualized Education Plan (IEP)? yes no

Please return completed form to:
Student Enrollment
Columbus Collegiate Academy
P.O. Box 411
Columbus, OH 43216

Family Information

Name of Parent/Guardian: _____
First Middle Last

Relationship to Applicant: _____

Home Address: _____
Street Number Street Name Apartment/Unit #

City State / Zip Code

Home Telephone: (____) _____ Work Telephone: (____) _____

Cell Telephone: (____) _____

Name of Other Parent/Guardian: _____
First Middle Last

Relationship to Applicant: _____

Home Address: _____
(if different) *Street Number Street Name Apartment/Unit #*

City State / Zip Code

Home Telephone: (____) _____ Work Telephone: (____) _____
(if different)

Cell Telephone: (____) _____
(if different)

How did you learn about Columbus Collegiate Academy?

Flyer Internet Newspaper: _____

Friend/Family: _____

Other: _____

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