



Kids' Zone Christian Academy

104 Copper Lane Jarrell, Tx 76537

512-595-1080

Thank you for your interest in enrolling your child at Kids' Zone Christian Academy for the 2023-2024 school year. Below are the steps to apply. All materials must be submitted for your student to be considered for enrollment.

- 1: Complete the following application and submit to Kids' Zone Christian Academy's Head of School or email to admin@kidszonechristianacademy.com
- 2: Pay the application fee of \$50.00 by check or money order to address above or through our website portal at www.kidszonelearningcenter.org
- 3: Request academic records/ report cards from previous year be submitted to Kids' Zone Christian Academy from your child's previous school
- 4: Submit at least one letter of recommendation/ referral to admin@kidszonechristianacademy.com from a previous teacher or pastor for your child

Once you have completed the admission steps above, a Kids' Zone Christian Academy staff member will be in contact to answer any questions and notify you of your child's status within the admission process. Acceptance, waitlist, or denial will also be emailed to the parent/guardian of the student.

Upon acceptance, the registration fee will need to be paid in full using the school's parent portal. Information regarding the parent portal will be attached to the acceptance email.



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2023-2024 APPLICATION

Student's Information

Date: / / Grade Applying for: School Year: 2022-2023 2023-2024

Student's Name(Last, First, MI):

Student's Date of Birth: / / Male Female

Street Address:

City: State: Zip:

Student's Current School:

Does the applicant have a sibling currently enrolled in Kids' Zone Christian Academy?:

Does the applicant have any 504 modifications/IEP/Special Ed?: No Yes, I will submit a copy

Parent/ Guardian Information

Name of Parent/Guardian 1: Relationship to Student:

Street Address (if different from Student):

City: State: Zip:

Parent/ Guardian's Phone Number: Cell Home

Parent/ Guardian's Email Address:

Parent/ Guardian's Preferred method of contact: Call Text Email

Name of Parent/Guardian 2: Relationship to Student:

Street Address (if different from Student):

City: State: Zip:

Parent/ Guardian's Phone Number: Cell Home

Parent/ Guardian's Email Address:

Parent/ Guardian's Preferred method of contact: Call Text Email

The Student Resides With: Both Parents/ Guardian's Parent/ Guardian 1

Parent/ Guardian 2 Other (Please Specify)