

HILL COUNTY CHRISTIAN ACADEMY
702 FM 309
Hillsboro, TX 76645
682-702-0573
Hillcochristianacademy@gmail.com



ENROLLMENT APPLICATION (PLEASE PRINT)

2024 - 2025

Student's Name _____ Gender _____

Student's Preferred Name _____ Date of Birth _____

Current Age _____ Grade _____

* Academic, disciplinary and attendance records from previous school(s) will be reviewed and an interview with the student and parents will be required before acceptance of applicant to HCCA. **(Parents are responsible for providing all records from previous schools.)**

** HCCA may not have the personnel to adequately serve students requiring special needs/attention.

Non-Refundable Enrollment/Holding Fee - \$175 (new student)
\$150 (current HCCA student)

Non-Refundable Curriculum Fee - \$350

Enroll in the following Program(s)

_____ **HCCA 4 day a week (required) - \$350 per month**
Monday – Thursday 8:00 to 3:45

_____ **Non-Academic Day (optional) - Additional \$140 per month**
Friday – 8:00 to 3:45

Mailing Address (PLEASE PRINT)

Phone Numbers

Parent's or Legal Guardian's Signature _____ **Date** _____

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Email Address _____

Parent's Name (PLEASE PRINT) _____

Student's Name _____ Grade _____

The following questions do not necessarily keep students from being accepted at HCCA, but will help HCCA better understand the needs of your child. Failure to supply accurate information may result in the rejection of application and/or dismissal from HCCA.

Does your child face any education challenges (Dyslexia, Dysgraphia, ADHD, etc?)

Has academic testing been recommended? If yes, what testing?

Has your child had behavioral problems or faced disciplinary actions in the previous years at another school? (Please explain)

If yes, which school(s) and what helped resolve the issue(s).

If your child has any IEP's, modifications or BIP from any previous school, please send copies to HCCA.

Parent's or Legal Guardian's Signature _____ Date _____

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When a student is accepted to HCCA, he/she will receive a school shirt. Additional school shirts may be purchased by contacting the school office.

Please Circle T-shirt size

YOUTH: Small Medium Large X-Large

ADULT: Small Medium Large X-Large

2X-Large 3X-Large 4X-Large 5X-Large

Parent's or Legal Guardian's Signature _____ Date _____