

FAMILY
RE-ENROLLMENT
FORMS PACKET
2025-2026 School Year

PARENT LAST NAME _____

Last name of parent

STUDENT LAST NAME _____

*Last name of student***2025-2026****California Christian Academy, PSP****RE-ENROLLMENT Page 1**

Mother's Name _____ Father's Name _____

Or guardian or parent-approved teaching adult's name _____

Street _____ City _____ Zip _____

REQUIRED: Teacher's Phone or Cell # _____

Primary Email _____ 2nd Email _____

CHILDREN BEING ENROLLED FIRST, LAST NAMES	Birthday MONTH /DAY /YEAR	Grade Level

CCA MEMBERSHIP AGREEMENT

As a member of **California Christian Academy, PSP, (CCA)**, I agree to comply with the following as a condition of membership: I understand that once payment has been accepted, **member has 7 days to request a refund (minus a \$30.00 administrator fee). NO REFUNDS AFTER SEVEN DAYS.** I understand all communication and reporting is done by email and it is my responsibility to inform administrator of any email change. I understand **I WILL BE NOTIFIED BY EMAIL REGARDING QUARTERLY ATTENDANCE** and failure to submit attendance may result in disenrollment from California Christian Academy and late fees. I understand that **CCA PROVIDES ONLY** the following: record keeping, cum file storage, attendance tracking, annual affidavit filing and additional printing services where applicable. **All other services such as PROGRESS REPORTS, TRANSCRIPTS, DIPLOMAS, SCHOOL I.D. CARDS are paid additional services. (electronic initial here)** _____

I agree to oversee the homeschooling of my child(ren) even if someone else is teaching my child(ren). I agree to purchase required materials, appropriate curriculum at my own cost, and provide adequate instruction within the parameters of the California Department Education recommended branches of study. CCA welcomes children with special needs. Parent understands California Christian Academy, PSP **does not** provide SPECIAL NEEDS services or advice and suggest parents inquire with their local school district of residence to obtain these services. I understand I am to provide **annual earthquake and fire drill instruction as required by the CDE** for my children. SEE EARTHQUAKE link. At this link there are mainstream curriculum companies listed that may suit your family's needs. I have decision making authority regarding the education of my child(ren). **(electronic initial here)** _____

I authorize _____ to teach my child. This person's relationship to me: _____
(examples may be: a grandparent, aunt, close friend, etc.) **(electronic initial here)** _____

By signing this agreement, I acknowledge full understanding and agree to **QUARTERLY RECORD KEEPING** commitment shown in yellow box below **↓.(electronic initial here)** _____

QUARTERLY ATTENDANCE	MUST BE SUBMITTED BY DATE TO AVOID LATE FEE	LATE FEE
JUL 1 THROUGH SEP 30	OCT 10	25.00
OCT 1 THROUGH DEC 31	JAN 10	25.00
JAN 1 THROUGH MAR 31	APR 10	25.00
APR 1 THROUGH JUN 30	JUL 10	25.00

Parent/Legal Guardian _____ Signature _____ Date _____
(print name here) (type digital signature here)

LAST NAME OF PARENT

2025-2026 RE-ENROLLMENT California Christian Academy, PSP OPTIONAL SERVICES PAGE

REQUIRED - CELL#: _____

REQUIRED - EMAIL: _____

REQUIRED ITEM		
EARLY RE-ENROLLMENT BEFORE AUGUST 1	205.00	
REGULAR RE-ENROLLMENT BY JULY 31	290.00	
OPTIONAL ITEMS (NOT A REQUIRMENT)		
STUDENT AND FACULTY ID CARDS	ITEM	
S/F Print Name on Card _____ _____ _____ _____	<u>SEE SAMPLE</u> STUDENT ID CARD # _____ x \$14.00 FACULTY ID CARD # _____ x \$14.00	
GRADE TRACKING OPTIONS		
CCA NO LONGER OFFERS QUARTERLY PROGRESS REPORTS BUT INSTEAD BELOW ARE TWO GRADE TRACKING OPTIONS: 1. REPORT CARDS: LEAST EXPENSIVE: GRADES K-6 SELF-MONITORING (<i>NOT FOR HIGHER GRADES</i>) OR 2. END-OF-THE-YEAR TRANSCRIPTS: MORE PROFESSIONAL LOOKING: GRADES K-12 (*ABLE TO ISSUE EARLY IF STUDENT TRANSFERS OUT DURING THE SCHOOLYEAR)		
REPORT CARDS—SELF TRACKING Student Name/Grade: _____ / _____ Student Name/Grade: _____ / _____ Student Name/Grade: _____ / _____ Student Name/Grade: _____ / _____	GRADE TRACKING: K-6TH REPORT CARD (This is self-tracking at home, Administrator will pre-sign but parent completes the report quarterly) <u>SEE SAMPLE</u> Per Student Each Year: # _____ X 12.00	
NOTE TO PURCHASERS OF TRANSCRIPTS BELOW ↓: It is the responsibility of teaching adult to submit grade report when requested at end of year. GPA calculations are based upon the earned letter grades of: A, A-, B+, B, B-, C+, C, C-, D+, D, D- for 2 semesters for each course taken (F grades cannot be awarded value) We do not award value to A+ as that is considered advanced placement. Advanced Placement is usually taken through a public high school or an outside official Advance Placement provider.		
END-OF-YEAR TRANSCRIPT Student Name/Grade: _____ / _____ Student Name/Grade: : _____ / _____ Student Name/Grade:: _____ / _____ Student Name/Grade:: _____ / _____ Student Name/Grade: : _____ / _____	GRADE TRACKING: END-OF-YEAR TRANSCRIPT Per student, per year, 1 GPA calculation, parent receives 3 copies, 1 copy retained in file. THREE CATEGORIES OFFERED K-6 Transcript # _____ X \$90.00 7-8 Transcript # _____ X \$90.00 9-12 Transcript # _____ X \$90.00 <u>SEE SAMPLE</u>	
DIPLOMAS		
KINDERGARTEN DIPLOMA Name on Diploma: _____	DIPLOMA: KINDERGARTEN (no folder, includes shipping—sent at end of Kindergarten) # _____ X 11.00	
JUNIOR/SENIOR HIGH DIPLOMAS 8th / 12th grade Diploma—Type Name and Grade: _____ / _____ _____ / _____ _____ / _____	DIPLOMA: 8TH/12TH GRADE DIPLOMA (with cardstock folder, includes shipping) # _____ X 42.00 <u>SEE SAMPLE</u>	
ENTER AMOUNT ABOVE FROM EITHER EARLY OR REGULAR ENROLLMENT		
ADD ANY OPTIONAL SERVICES ABOVE		+
TOTAL DUE		=

LAST NAME OF PARENT
_____**2025 - 2026**
CCA PROPOSED COURSE OF STUDY
K - 6th Grades

STUDENT NAME: _____

AGE: _____ GRADE: _____ DOB: _____

***© 5-Core Subjects suggested**—not all subjects are used each year. Grades K-3, heavy focus should be Language Arts and Math. Check out [CDE K-6 guidelines here](#) **CURRICULUM IDEAS [HERE](#)**

SUBJECT*	CURRICULUM OR BOOKS USED	GOALS THIS YEAR Example: aim for 90% curriculum completion	GRADE LEVEL
©BIBLE OR ANOTHER CORE SUBJECT OF PARENTS CHOICE			
©LANGUAGE ARTS Reading Penmanship Literature Spelling Composition			
©MATH			
©SOCIAL SCIENCE History State History Geography			
©SCIENCE Life Science Physical Science Earth Science			
OPTIONAL SUBJECTS BELOW ↓			
FINE ARTS/ FOREIGN LANGUAGE			
PHYSICAL EDUCATION			
HEALTH			
ELECTIVE			

LAST NAME OF PARENT

2025 - 2026
CCA PROPOSED COURSE OF STUDY
7—12 Grades

STUDENT NAME: _____

AGE: _____ GRADE: _____ DOB: _____

2.5 CREDITS 1/4 SCHOOL YEAR
 5 CREDITS 1/2 SCHOOL YEAR
 10 CREDITS 1 SCHOOL YEAR

***© 5-Core Subjects suggested**—not all subjects are used each year. Check out [CDE 7-12 guidelines here](#) **CURRICULUM IDEAS [HERE](#)** *Parents should encourage older students to participate in choosing high school electives.

SUBJECT	BOOK TITLE	GOALS THIS YEAR Example: aim for 90%	SEMESTER 1 5.0 CREDITS	SEMESTER 2 5.0 CREDITS
©BIBLE Or any other subject* of parent's choice				
©MATH General Math Pre-algebra Algebra 1 & 2 Geometry Calculus				
©ENGLISH General English Comp/Grammar Literature English-related				
©SCIENCE General Science Life Science, Geology, Biology Physics				
©SOCIAL SCIENCES US History, World History, Ancient History, Civics, Government/ Economics				
DRIVER'S ED 1 semester course—5.0 credits				
FOREIGN LANGUAGE/ FINE ARTS				
PHYSICAL EDUCATION (2 year min.)				
ELECTIVE				
ELECTIVE				

SUBMISSION INSTRUCTIONS

Once online re-enrollment fee has been paid,
please email all forms by your chosen enrollment deadline.

EARLY RE-ENROLLMENT DEADLINE BY **July 31** or
REGULAR RE-ENROLLMENT DEADLINE **AFTER July 31**

If not re-enrolled by September 15, your file will be closed.*

**I am willing to make exceptions, please communicate with me
about your family's situation.*

EMAILING INSTRUCTIONS:

Please label your forms like these examples:

Yourlastname_Re-enrollment_2025-2026.pdf

Yourlastname_Optional_2025-2026.pdf

Yourlastname,studentfirstCOS.pdf

Karon Ruiz

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