



Dear Parents and Prospective Students,

On behalf of Hosanna Christian School, we welcome your interest in educating your child at our school. At Hosanna, we believe that a true education encompasses the whole child. Luke 2:52 describes the early growth of our Lord: "And Jesus increased in wisdom and stature, and in favour with God and man.." This principle guides us in promoting academic, spiritual, physical, and social development in each child that enters our doors.

Our mission at Hosanna is to be an educational institution that reflects the Body of Christ. We aim to develop academically and socially responsible individuals aware of their capabilities and contributions to their school and local community through their faith in Jesus Christ.

At Hosanna, we believe that every student has the potential to learn and grow. We aim to enhance each student's educational journey by equipping them with the tools they need to succeed. We take pride in our dedicated, professional, and caring faculty, who strive to maintain open communication among students, the school, and parents.

We understand that decisions regarding your child's education are significant and can be challenging. We pray that the Lord will guide you, as you seek the best educational experience for your child, and we hope that Hosanna Christian School will play a role in your future.

God Bless You,
Hosanna Christian School

HOSANNA CHRISTIAN SCHOOL

TUITION SCHEDULE-2026-2027

Monthly payment plans may be established. The first payment is due by the first day of school.

Tuition for Students (K-12th grade)	\$4,000.00**
Nine Month Payment Schedule:	\$445.00 per month
Twelve Month Payment Schedule:	\$335.00 per month

-There is a 10% discount if tuition is paid in full by the first day of school.

Family Discount Plan

First Student:	\$4,000.00
Second Student (10% discount):	\$3,600.00
Third Student (15% discount):	\$3,400.00
Fourth Student	FREE

FEE SCHEDULE Enrollment

Fee (K-12th grade) Curriculum Fee	\$75.00
	Varies by Grade Level

What are your goals for your child?

Are there any medical, behavioral, or other learning difficulties that should be considered in planning your child's educational program? If so, please explain.

What additional information should Hosanna Christian School know about you and/or your child?

What church do you attend? What is your Pastor's name?

By signing below, I give Hosanna Christian School permission to discuss the information contained in this application with teachers, counselors, and/or administrators at my child's previous school(s). Further, I acknowledge receipt of Hosanna Christian School's tuition and fee schedule and hereby agree to make the payments and abide by the policies specified therein.

Parent Signature: _____ **Date:** _____

Parent Signature: _____ **Date:** _____

How did you learn about Hosanna Christian School?

Please describe why you would like your child to attend Hosanna Christian School:

Please describe your child's greatest strengths and challenges:

How does your child relate with other children? With adults?

How does your child react to new situations?

What are your child's interests?



APPLICATION FOR ENROLLMENT

Date of Application: _____

Student Name: _____

Nickname: _____

Soc. Sec. Number _____

Date of Birth: _____

Grade Level for Coming Year _____

Home Address: _____

Telephone# _____

Mother / Guardian

Name: _____

Address: _____

Home Phone: _____ Cell Phone: _____

Email Address: _____

Employer: _____

Employer Address: _____

Work

Phone: _____ Occupation _____

Father /Guardian

Name: _____

Adress: _____

Home Phone: _____ Cell Phone: _____

Email Address: _____

Employer: _____

Employer Address: _____

Work
Phone: _____ Occupation: _____

Student resides with: _____

Parent w/Legal Custody: _____

☐ Parents Separated ☐ Parents Divorced ☐ Father Deceased ☐ Mother Deceased

If applicable, legal documents, i.e., a copy of any current judgment of divorce (Dissolution of Marriage) or *any* other court order that establishes custody rights, will be required for enrollment

Brothers/Sisters/Other Children in Household

Name / Age: _____

Name / Age: _____

Name / Age: _____

Name / Age: _____