



Below is a list of what to bring to your enrollment appointment. **Any forms requiring signatures must be notarized IF they are not signed in front of a CVA administrator as witness.**

All enrolling students and at least one parent/guardian are required to attend the enrollment appointment. CVA recommends all parents/guardians attend. If a form requires signatures from all parents/guardians and one is absent, then that form should be signed and notarized with that parent's/guardian's signature **BEFORE** the enrollment appointment.

What to bring:

- Student Report Card (1<sup>st</sup>– 8<sup>th</sup> Grade) or Transcripts (High School) from last school attended
- Student Birth Certificate (copy that CVA can retain)
- Legal Guardianship Documentation (only required in custody cases, such as adoption, divorce, etc.)
- Up to date Florida Certificate of Immunization DH 680. Grades K-6 the doctor must indicate CODE 1. Grades 7-12 the doctor must indicate CODE 8. Permanent Medical Exemptions must be officially marked on the DH 680 form. OR DH 681 (religious exemption).
- School Entry Health form DH 3040 or private physician's examination (the physician must fill out the second page of DH 3040. This form may also include the Scoliosis Screening for 6<sup>th</sup> grade and up).
- Scoliosis Screening (incoming 6<sup>th</sup> graders) may be marked on the DH 3040 as "postural assessment" or, if not marked, any written form that is signed by a registered nurse or doctor.
- All scholarship recipients must bring their Scholarship Award Letter, and AAA scholarship recipients must bring their School Commitment Form as well.
- All applicable forms in this packet must be filled out. Each signature must be signed in front of a CVA administrator as witness OR notarized.

\$250 per student for the registration fee (payable by cash, check, money order, or online with a convenience fee)

Students should also be prepared to take placement testing (as needed based on administrative recommendation). Placement testing costs \$25 per test.



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P.O. Box 721436 | Orlando, FL 32872-1436  
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## Student Information

Date: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Name: (Last, First, Middle): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_ County: \_\_\_\_\_

Grade: \_\_\_\_ Date of Birth: \_\_\_\_\_ Sex: \_\_\_\_ Race: \_\_\_\_\_ Ethnicity: Hispanic/Latino

## Parent Information

Father's Name (Last, First): \_\_\_\_\_

Place of Employment: \_\_\_\_\_

Cell phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Driver's License#: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Mother's Name (Last, First): \_\_\_\_\_

Place of Employment: \_\_\_\_\_

Cell phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Driver's License#: \_\_\_\_\_

E-mail Address: \_\_\_\_\_



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# School Transfer Request

The enrolling student does not have any previous school records to transfer because he/she:

is just beginning school in kindergarten.

has been registered as a home school student with a government entity or organization that does not retain student records.  
(There is a fee for each year of verification if not official public or private school transcript is rendered.)

other, please explain: \_\_\_\_\_

Full Legal Name of Student: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Grade: \_\_\_\_\_

Name of Last School Attended: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

I, as the above student's parent/legal guardian, give permission to release all school records including medical, testing, special education, psychological, and a complete copy of the cumulative folder.

\_\_\_\_\_  
Parent/Legal Guardian Signature

\_\_\_\_\_  
Date

### To Be Completed by Student's Last School

Please provide copies of all school records for the student mentioned (including, but not limited to, attendance, medical, testing, special education, psychological, and a complete copy of the student's cumulative folder).

Has the student ever been suspended? Yes No How many days has the student completed this year? \_\_\_\_\_

Mail Student Records to: Office of the Registrar | Christian Victory Academy | P.O. Box 721436 | Orlando, FL 32872

### For Internal Use Only

Date Sent by CVA: \_\_\_\_\_ Date Records Received by CVA: \_\_\_\_\_



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## Vision, Mission, & Statement of Faith Agreement

### Vision Statement

It is the Vision of CVA to equip each student with a quality Christian education firmly based in the Word of God so that they are fully prepared to take the love of God into all the earth.

### Mission Statement

It is the Mission of CVA to educate our students using biblically sound teachings in order that they may impact their world for Christ. We do this by utilizing our hybrid program to make individualized education plans. This is accomplished through on-campus, online, and home-education programs.

### Statement of Faith

We believe that "All Scripture is God-breathed and is useful for teaching, rebuking, correcting, and training in righteousness, so that the man of God may be thoroughly equipped for every good work." -2 Timothy 3:16

We believe that the Bible is the inspired, inerrant, infallible Word of God.

We believe in God, the Father; God, the Son Jesus; and God, the Holy Spirit.

We believe in the deity of our Lord Jesus Christ and His virgin birth, His sinless life, His miracles, His atoning death through His shed blood, His bodily resurrection, His ascension to the right hand of the Father, and in His person returning in power and glory.

We believe that man was created in the image of God but fell into sin and is therefore lost, except through the repentance of sins and the acceptance of Jesus Christ as their personal Savior.

We believe that the ministry of the Holy Spirit is to convict men of their sin, indwell, guide, instruct, and empower the believer for godly living for service.

We believe in the bodily resurrection at the end time. At that time the saved will have eternal life with God and the lost will face judgment and everlasting punishment.

*I have read, believe in, and agree with the above Mission Statement, Vision Statement, and Statement of Faith. I willingly partner with Christian Victory Academy for the purpose of education and proclaiming the Good News of Jesus as defined above in both word and deed.*

Father/Guardian: \_\_\_\_\_  
Print Name Sign Date

Mother/Guardian: \_\_\_\_\_  
Print Name Sign Date

CVA Administrator or notary: \_\_\_\_\_  
Sign Date



## Dress Code Agreement

All CVA families, staff, students, siblings, parents, guests, etc. are expected to dress appropriately and modestly on CVA's campus, and while attending any CVA event.

*Student Dress Code:* To be applied to all CVA events, field trips, and on-campus:

- Students may only wear jeans, black or khaki slacks, or shorts (no shorter than 2 inches above the knee).
- Leggings may not be worn as pants. Sweat pants, joggers, basketball shorts, or other lounge pants/shorts are not allowed.
- On-campus students must wear the CVA Polo shirt the entire time they are on-campus.
- Female students may wear skirts or dresses (no shorter than 2 inches above the knee).
- CVA hoodies may be worn in place of the CVA polo. Students may not put their hoodie over their head while inside the building.
- Vests/pullover sweaters/non-CVA hoodies are not allowed to be worn over the school polo shirt.
- Open front cardigans, sweaters, and jackets may be worn open with the CVA shirt visible underneath.
- All clothing items must be conservative, clean, and in good repair with no holes, obvious stains, buttons missing, etc.
- All clothing must fit the student appropriately. This means no baggy pants, exposed undergarments, exposed midriff, etc.
- Pants cannot have writing on them.
- Students may wear t-shirts (clean with no writing), dress shirts, or blouses to CVA events or field trips only.
- Shoes must be worn at all times.
- No offensive shirts, hats, jewelry, etc. No excessive or large jewelry.
- Hats, beanies, and sunglasses are not to be worn indoors.
- Hair must be clean, neat, and of a natural color (black, blonde, brown, red). No off-color streaking or distracting hairstyles will be allowed.
- Any tattoos must be covered at all times.
- Girls may have up to two earrings, 20-24 gauge (standard earrings), per ear. All other pierced jewelry must be removed before attending any CVA event or classes.
- All clothing, jewelry, hair, and general appearance shall not disrupt the classroom atmosphere, shall not be provocative and/or violate health and safety rules of the school. Male students must remove all pierced jewelry before arriving on-campus.

*Violations will be addressed, and at the discretion of a CVA administrator. If CVA members/students are not dressed according to the dress code, CVA will call the parent to bring appropriate clothing to their student or CVA will provide an approved uniform shirt for the day for a rental fee of \$10 per day. Repeat dress code violations may result in suspension or expulsion.*

Father/Guardian:	_____	_____	_____
	Print Name	Signature	Date

Mother/Guardian:	_____	_____	_____
	Print Name	Signature	Date

Notary/CVA Admin:	_____	_____	_____
	Print Name	Signature	Date



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## Code of Conduct Agreement

*All CVA families, staff, students, siblings, parents, and guests:*

- Please act appropriately with kindness and respect while on CVA's campus, and while attending any CVA event.
- No running or horse play will be tolerated.
- Smoking will not be allowed on campus or at any school function.
- Derogatory speech or words, inappropriate physical contact and/or bullying will not be allowed.
- Inappropriate physical conduct should be reported to an instructor, staff member, or administrator. CVA students will respect their fellow students, staff, and faculty members. Inappropriate language, such as swearing, name calling, talking back to adults, etc., will not be tolerated.
- CVA is located on Dover Shores Baptist Church property and each student should be mindful of that. If CVA or church property is damaged or destroyed by students, siblings, guests, parents, etc. then then the parents/guardian/overseeing adult of the person responsible will be required to pay CVA the replacement cost of that item.

*CVA students:*

- Follow the Dress Code.
- During all school functions, students will not be allowed to leave the group without appropriate adult supervision, this includes going outside for any reason.
- Walk, not run, inside CVA's campus buildings.
- Arrive on time.
- Keep their hands to themselves.
- Have all assignments completed when due.
- Respect their fellow classmates, faculty, and staff.
- Be prepared to participate in class.
- Not swear, name call, or talk back to adults.
- Remain in their classroom with the instructor until the end of the class (on-campus students only).
- Cell phones, I-pods, AirPods, smart watches, and other electronic devices will only be permitted at school functions at the discretion of school officials. If students are required to have cell phones they may be retained by CVA staff and given to the students, when necessary.

Father/Guardian: \_\_\_\_\_  
Print Name Sign Date

Mother/Guardian: \_\_\_\_\_  
Print Name Sign Date

CVA Administrator or notary: \_\_\_\_\_  
Sign Date



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## Anti-Bullying Policy

A biblical illustration of relationships: | *John 15:12- "My command is this: Love each other as I have loved you."*

Rationale: In an effort to instill biblical values and to create a safe, loving environment in our school, we have adopted this policy.

Definition: Bullying occurs when a person or group is intentionally intimidated, frightened, excluded, or hurt by a pattern or behaviors directed at them by others. (Griffiths, "Bullying in Schools-2003).

**Two important things will be considered when assessing behavior:** Is there a pattern to the behavior? Is the behavior intentionally meant to intimidate, frighten, exclude, hurt, or harm the other students?

The following patterns of actions may be forms of bullying:

- Teasing or verbal abuse-including putdowns, insults, name-calling, or racial/sexual remarks.
- Intentional exclusion from activities or friendship groups.
- The setting up of humiliating experiences.
- Damaging a person's property/possessions or taking them without permission.
- Threatening gestures, actions, or words.
- Written/verbal/electronic messages that contain threats, putdowns, gossip, or slander.
- Cyberbullying through Facebook or other social media sources.

CVA's Discipline policies will be in effect for any previously defined bullying that takes place on the CVA campus. Student behavior off campus (including field trips) are the responsibility of the student's parents. Off-campus behavior may be addressed by CVA administrators on a case-by-case basis at CVA's Administrator's discretion. It is the responsibility of all staff and instructors to report all occurrences of bullying behaviors as outlined in this policy.

Each suspected bullying offense will be assessed by the instructor or administration. Even if not deemed as a bullying behavior, instructors must still follow the disciplinary policy outlined in the CVA handbook, refer to school administrators for a disciplinary response, and parents will be notified immediately. This policy will be enforced while on campus. CVA will not tolerate this behavior in our students. Depending on the details of the incident, and if it is deemed there has been a pattern of bullying or bullying behaviors, the administration will determine whether the behavior is the Level two (moderate) offense or a Level three (severe) offense.

Parents and students who have knowledge of such behaviors are encouraged to report this information and may do so without fear of consequences. Additionally, students who feel that they have been or are becoming the victims of bullying behaviors should notify the school administrator, an instructor, or parent. Those parents or students who report such behaviors will not be the target of retaliation or reprisal by CVA in any way. Any such behavior is taken very seriously.

Father/Guardian: \_\_\_\_\_  
Print Name Sign Date

Mother/Guardian: \_\_\_\_\_  
Print Name Sign Date

CVA Administrator or notary: \_\_\_\_\_  
Sign Date



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## Affirmation of Commitment and Disclaimer

We (hereafter referred to as "We" and "Our") hereby certify that the answers on this application are true and correct. We understand that **Christian Victory Academy of Central Florida, Inc. (CVA)** is a Christian organization, as put forth in CVA's doctrinal statements. We are in agreement to have our child(ren) attend on-campus/online courses or to teach our child(ren) at home via CVA's Journey Program, and agree to the following:

### *Journey Families*

- CVA, its directors, staff, or members, shall NOT be responsible for the education of our child(ren); rather, we are solely responsible for their education.
- Upon enrollment, CVA will partner with parents as needed for advice on curriculum choice.
- We are responsible to choose and maintain our own curriculum. All curriculum costs are our responsibility. Due to Florida Department of Education and accreditation requirements, CVA reserves the right to approve or reject any curriculum selections to ensure fulfillment of minimum standards.
- We agree that we are in partnership with CVA, and will take responsibility to ensure that we abide by all CVA Policies and Procedures.

### *On-Campus Class & Online Families*

- We choose to enroll our child(ren) in on-campus classes or online courses.
- We agree that we are in partnership with CVA and will take responsibility to ensure that we abide by all CVA On-Campus Class or Online Course Policies and Procedures.
- We understand it is our responsibility to ensure assignments are completed and turned in on time.

Negligence of these responsibilities may result in a dismissal from CVA without refund. Reinstatement is not guaranteed. Reinstatement is conditional upon reaffirmation of these standards, a favorable decision by the CVA Board of Directors, and payment or repayment of applicable fees.

We release and hold harmless CVA, its directors, staff, and members from any and all claims for loss, damage, and/or injury of any nature, resulting from CVA programs or activities. By signing we agree with CVA's Philosophy of Education. We will, to the best of our ability, uphold the principles of CVA's Vision, Mission, Statement of Faith, and Philosophy of Education in our child(ren)'s schooling.

**We hereby acknowledge and understand that Christian Victory Academy of Central Florida, Inc. is in no way part of, nor are we sponsored by, Dover Shores Baptist Church. We hold harmless Dover Shores Baptist Church, its members, or staff from any responsibility between Christian Victory Academy of Central Florida, Inc. and us.**

Signature of the father/guardian and mother/guardian of the student(s) is required upon enrollment. In the case of a single parent, only the custodial parent is required to sign. This form must be notarized or signed with a CVA administrator as witness by both parents. We will meet and maintain all requirements of, and abide by, the policies and procedures of CVA.

Father/Guardian: \_\_\_\_\_  
Print Name Sign Date

Mother/Guardian: \_\_\_\_\_  
Print Name Sign Date

CVA Administrator as witness: \_\_\_\_\_  
Sign Date





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## Likeness Release Form

We (hereafter referred to as "We" and "Our") hereby grant Christian Victory Academy (CVA) permission to use my child's likeness in a visual image, including but not limited to: still photography, video, electronic and print publications and websites. This likeness may be used in any and all of CVA's publications, including website entries, etc. without payment or any other consideration.

I understand and agree that the likeness will become the property of Christian Victory Academy.

I hereby irrevocably authorize Christian Victory Academy to edit, alter, copy, exhibit, publish or distribute a photo/video/likeness of my child for purposes of publicizing Christian Victory Academy's programs or for any other lawful purpose. In addition, I waive the right to inspect or approve the finished product, including written or electronic copy, wherein my child's likeness appears. Additionally, I waive any right to royalties or other compensation arising or related to the use of the likeness.

I hereby hold harmless, release, and forever discharge Christian Victory Academy from all claims, demands, and causes of action which I, my heirs, representatives, executors, administrators, or any other persons acting on my behalf or on behalf of my estate have or may have by reason of this authorization.

I have read this release before signing below and I fully understand the contents, meaning, and impact of this release.

I hereby certify that I am the parent or guardian of \_\_\_\_\_, and do hereby give my consent without reservation to the foregoing on behalf of this person.

Father/Guardian: \_\_\_\_\_  
Print Name Sign Date

Mother/Guardian: \_\_\_\_\_  
Print Name Sign Date

CVA Administrator or notary \_\_\_\_\_  
Sign Date



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## Emergency Medical Authorization and Liability Release

Student Name (last, first): \_\_\_\_\_ Parent(s) Name(s): \_\_\_\_\_

Father/Guardian Contact: \_\_\_\_\_  
Work Phone Cell Phone Other Contact

Mother/Guardian Contact: \_\_\_\_\_  
Work Phone Cell Phone Other Contact

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_

Student Date of Birth: \_\_\_\_\_ Student Social Security No: \_\_\_\_\_

The above named student is presently attending Christian Victory Academy. He/She has the following physical or medical limitations, including allergies, prohibited medications, etc.:

*VERIFICATION OF HOSPITALIZATION INSURANCE FOR CHILD:*

Company: \_\_\_\_\_ Policy ID #: \_\_\_\_\_

I hereby authorize and consent for the officials of Christian Victory Academy to employ on my behalf a licensed physician for the emergency treatment of my child, in connection with any injury, accident, or illness suffered or sustained while involved with a school activity. Said authorization and consent for emergency treatment includes hospitalization and surgical as recommended by said physician.

I understand that every reasonable effort will be made to notify me of said emergency.

I do hereby release Christian Victory Academy, it's teachers, officers, directors, volunteers, and employees, from any and all liability and absolve the same from any and all claims of loss, damage, or injuries of any nature to any person or property resulting or arising out of a school activity or function, whether or not such activities or function was endorsed or authorized by the school.

In the event CVA is unable to reach you during the emergency, please provide the names and telephone numbers of two adults we may contact on your child's behalf.

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Relationship to Student: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Relationship to Student: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

CVA Administrator or notary: \_\_\_\_\_  
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## Curriculum List: K – 8<sup>th</sup> Grades

Journey parents should fill this form out and bring it to their enrollment appointment. All other programs, please bring a blank copy to your appointment.

Student's Name \_\_\_\_\_ Grade Level \_\_\_\_\_

This section is designed to provide information to assist you in charting your student's course plan. If there is more than one subject listed with a slash mark (/), please circle the subject that is pertaining to your child.

Subject Area	Curriculum/Publisher (If not a CVA class)	Source of instruction (one source per subject)				
		Parent Instruction (Check if yes)	CVA Class (Check if yes)	Video/Computer (Indicate Source)	Private Tutor (Name of Tutor)	Other (Indicate Source)
Bible						
Math						
Spelling						
Science						
Reading						
English						
Handwriting						
Geography/History						
Foreign Language						
Unit Studies						
Other						

**Note:** CVA reserves the right to check any work at any time. If anyone other than the legal guardian is teaching the student, i.e. a co-op, tutor, etc. then our accrediting agency required an Articulation Agreement be filled out and returned to a CVA administrator for approval.



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## Curriculum List: High School

Journey parents should fill this form out and bring it to their enrollment appointment. All other programs, please bring a blank copy to your appointment.

Student's Name \_\_\_\_\_ Grade Level \_\_\_\_\_

This section is designed to provide information to assist you in charting your student's course plan. If there is more than one subject listed with a slash (/), please circle the subject that is pertaining to your child.

Subject Area	Curriculum/Publisher (If not a CVA class)	Source of instruction (one source per subject)					Dual Enrollment (Specify College)
		Parent Instruction (Check if yes)	CVA Class (Check if yes)	Video/Computer (Indicate Source)	Private Tutor (Name of Tutor)	Other (Indicate Source)	
Bible Curriculum							
Math							
English I, II, III, IV							
Science							
World/American History							
American Govt./Econ.							
Practical Arts							
Performing Arts							
Foreign Language							
P.E. (including Health)							
Personal Fitness							
Other							

**NOTE:** No more than nine credits per year will be granted. A student cannot work more than 20 hours per week at an outside job. CVA reserves the right to check any work at any time. CVA reserves the right to check any work at any time. If anyone other than the legal guardian is teaching the student, i.e. a co-op, tutor, etc. then our accrediting agency required an Articulation Agreement be filled out and returned to a CVA administrator for approval.



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## Scholarship Agreement

Parents are required to bring the Scholarship Award Letter to the enrollment appointment as proof of scholarship.

CVA will not assist, complete, or submit any part of the application for a student to receive a scholarship. The application is the responsibility of the parent for all scholarships.

CVA will never ask for parent information to access the student's scholarship account for any reason. It is the responsibility of the parent to provide CVA with all the necessary paperwork pertaining to the scholarship, including the award letter.

Parents are required to endorse scholarship checks. CVA will not endorse the checks on behalf of the parents. Refusal to endorse checks means that parent is assuming the responsibility of all fees. Checks that are not endorsed by parents will be returned to Step Up for Students or AAA and fee responsibilities will revert to the parents.

**Parents are responsible for fees not covered by the scholarship. If a student withdraws before the end of the enrolled school year, the parents are responsible to pay the balance of the school tuition. Any balance not paid in full will be sent to collections after 90 days of withdrawal.**

Checks are mailed to CVA. Parents must come to the school office to endorse checks. CVA will not mail checks to parents for endorsement.

Neither AAA or Step Up for Students will mediate outstanding balances. An outstanding balance and the collection of the debt is between the school and the parent.

Scholarship students are required to attend 180 school days. Students are permitted 10 days for sickness.

Loss of scholarship for any reason does not negate parent responsibility for all school fees.

Scholarship students must abide by all behavioral and disciplinary policies of the school. Failure to do so may result in the loss of scholarship.

CVA will abide by all rules and procedures laid down by Florida Statute, Step up for Students, and AAA. For more information please visit [www.stepupforstudents.org](http://www.stepupforstudents.org) or [www.aaascholarships.org](http://www.aaascholarships.org).

Father/Guardian: \_\_\_\_\_  
Print Name Sign Date

Mother/Guardian: \_\_\_\_\_  
Print Name Sign Date

CVA Administrator or Notary: \_\_\_\_\_  
Sign Date