



Ocala Christian Academy

Exceptional Student Program Registration

Elementary/Middle School

2024-2025

Additional Tuition \$1,450

Please check ESP course below:

Math _____ (Grades K-6)

Reading: _____ (Grades K-5)

Student Name: _____ Grade Entering: _____

Address: _____

Student lives with: _____ DOB: _____

Parent Name _____

Phone: _____

Guardian Name (if applicable): _____ Phone: _____

The application for a new ESP student must have the following documents attached: IEP or 504 Plan, Educational Psychological Exam. If there is no 504 Plan or IEP, You will need a letter from a physician stating the learning disability/diagnosis to determine if the student is eligible for a 504 Plan. There will be four (4) students in each class.

Current student at OCA? Yes No

Scholarship Name: _____

Please sign, date, and return to the Bettye Liberty .

Classes will fill up quickly.

I acknowledge that I am responsible for the additional tuition fee of \$1,450. If my child has a scholarship that discontinues payment, I will be responsible for the balance of the unpaid ESP bill.

Parent (Guardian) Signature

Date