



Hilltop Christian School

P.O. Box 9090 • Window Rock, AZ 86515-9090

Phone: 505.371.5726 • Fax: 505.371.5773 www.hilltopchristian.net

Student Enrollment Form - School Year 2023-2024

STUDENT INFORMATION – PLEASE PRINT

Student Name: _____ Age: _____ Birth Date: _____

Male or Female _____

Navajo Nation: _____ Chapter: _____

Resident of: (check one) NM AZ

Physical Address: _____

FOR OFFICE USE ONLY	
Gender	Grade
Start Date:	
Withdrawal Date:	
Returning Student?	
Photo:	
Copy of Updated Immunization	
Copy of Birth Certificate	
Copy of Certificate of Indian Blood	
Date received	

Please draw a map on the back page

REQUIRED BIRTHDAY FOR ENTERING PRESCHOOL AND KINDERGARTEN

PK3: 3 years by Sept 1, 2023

PK4: 4 years by Sept 1, 2023

Kindergarten: 5 years by Sept 1, 2023

If parents are separated or divorced, with whom does the child live?

Church family attends:

Town:

Pastor:

Please indicate tribe or ethnicity (race):

Primary language spoken in the home:

Allergies (especially include foods):

Medications:

Child's special interests or hobbies:

Attach your file & send. Send to your printer.