## **2025-26 ENROLLMENT FORM**



WAVE OF HOPE @ WELD 2025-26 HOMESCHOOL **ENRICHMENT PROGRAM ENROLLMENT FORM** 8AM-4PM

**Enrichment on FRIDAYS** 

### LEGAL NAME (as stated on Birth Certificate):

First	Middle	Last	
<b>DATE OF BIRTH:</b> Kindergarten	// By Law Stude	nts Must Be Age 5 by October 1	st To Enroll In
GRADE LEVEL FOR	THE 2025-26 SCHOOL YEAR:		
LEGAL GENDER:	Male Female		
ETHNICITY: Is the S	tudent of Hispanic/Latino origin	YesN	0
	White *American Indian Black or African American * _ Student resides most of the time:		
Street	City	Zip	
	OF RESIDENCE: blease check here: https://www.nic		,
	~1111 6th St. Crooloy CO 9062		

Address~1111 6th St., Greeley, CO 80631 Phone ~ (720) 340-2552 WWW.WAVEOFHOPEHSE.ORG

IF YOUR STUDENT WAS PREVIOUSLY REGISTERED IN A PUBLIC SCHOOL, HAVE YOU NOTIFIED THAT DISTRICT OF THEIR WITHDRAWAL? Yes No

WHAT EDUCATIONAL SETTING IS YOUR STUDENT COMING FROM PRIOR TO ENROLLING?

- \_\_\_\_\_ A COLORADO PUBLIC SCHOOL
- \_\_\_\_\_ A SCHOOL LOCATED IN A DIFFERENT STATE
- HOME BASED EDUCATION (HOMESCHOOLING)
- \_\_\_\_\_ A SCHOOL LOCATED IN A DIFFERENT COUNTRY
- \_\_\_\_\_ NEW TO EDUCATIONAL SYSTEM (KINDERGARTEN STUDENTS ONLY)
- \_\_\_\_\_ A PRIVATE SCHOOL

#### **PARENT/GUARDIAN INFORMATION**

PARENT/GUARDIAN NAME:			
First	 Middle	Last	
PARENT/GUARDIAN ADDRESS:			
Street		City	Zip
PARENT/GUARDIAN PHONE NU	IMBER:		
PARENT/GUARDIAN EMAIL ADI	DRESS:		
DOES THE PARENT/GUARDIAN GUARD):yes- <i>lf yes, WE W</i>			(ACTIVE DUTY/NATIONAL

**IS THE ENROLLING STUDENT CONSIDERED HOMELESS:** (A homeless individual is one who lacks a fixed, regular and adequate primary nighttime residence)

\_\_\_\_\_No \_\_\_\_Yes and is in the physical custody of a parent or guardian \_\_\_\_\_Yes and is not in the physical custody of a parent or guardian (unaccompanied youth)

> Address~1111 6th St., Greeley, CO 80631 \* Phone ~ (720) 340-2552 WWW.WAVEOFHOPEHSE.ORG

# IF THE STUDENT IS CONSIDERED HOMELESS, INDICATE WHICH OF THE FOLLOWING DESCRIBES THE STUDENT'S CURRENT LIVING SITUATION:

- \_\_\_\_\_ N/A Not Applicable
- \_\_\_\_\_ Shelters/Transitional Living
  - \_\_\_\_\_ Doubled Up Due To Economic Hardship
  - \_\_\_\_\_ Unsheltered (Cars, Parks, Campgrounds)
- \_\_\_\_\_ Hotels/Motels

### **BY SIGNING BELOW YOU:**

1. Understand you are Enrolling In The Wave of Hope Homeschool

Enrichment Program @ Weld For The 2025-26 School Year. You Will Be Contacted By The School Or Program for optional parent meetings prior to program start date. The signing of a STUDENT CONTRACT AND HANDBOOK is a commitment to participate in required hours (one day a week or 90 hours per semester). Enrichment year is from 8/15/25-5/15/26 (includes Thanksgiving 1 week break, Christmas/New Years-2 week break and 1 week of Spring Break, all other days are in session).

- 2. Acknowledge that you live in Colorado and that your child attends homeschool or private school.
- 3. Understand that proof of birth certificate is required for financial transparency for Grant Fulfillment.
- 4. Understand that you will concede attendance/funding to Wave of Hope @ Weld Enrichment FIRST on all documentation if you choose to attend any other BOCES ENRICHMENT FUNDED PROGRAM EITHER BEFORE OR AFTER ATTENDING Wave of Hope @ Weld Homeschool Enrichment.

### Please Sign As The Parent/Guardian Completing The Registration:

PARENT/GUARDIAN PRINT:

SIGNATURE:		
Date of Signature:	_//	
OFFICE USE ONLY:	ate Enrollment Completed. This Date Will Be Used To Determine Priority	
Should Cla	es Fill As They Will Be Offered On A First Come, First Serve Basis:	
	Date//	
Address~1	11 6th St., Greeley, CO 80631 * Phone ~ (720) 340-2552 WWW.WAVEOFHOPEHSE.ORG	



4

When TWO referrals from a Wave of Hope Learning Centers attendee joins our Enrichment Program, that family will receive a commemorative plaque that honors their commitment to the Wave of Hope Family and its mission, to support Home School Families in the State of Colorado.



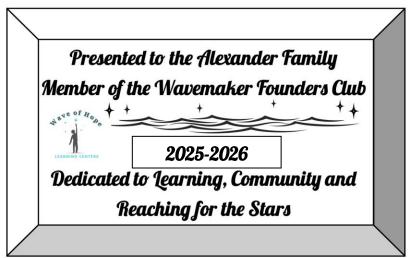
Who will you ask to join Wave of Hope

Learning Centers so we can support their homeschool needs? Name\_\_\_\_\_

Phone #

Please let them know we'll reach out, we don't want to surprise

anyone!



Address~1111 6th St., Greeley, CO 80631 \* Phone ~ (720) 340-2552 WWW.WAVEOFHOPEHSE.ORG