



BhuTAH SuNAH Academy

Building Your Totem

ENROLLMENT FORM

Parent/Caretaker(s) _____ Date _____

Address _____ State/Zip _____

Phone _____ Email _____

Emergency Contact #1 _____

Emergency Contact #2 _____

Current School District, Address, Contact Information

Child #1 _____ DOB _____ Age _____ LGC _____

Allergies/Medical Alerts _____

Child #2 _____ DOB _____ Age _____ LGC _____

Allergies/Medical Alerts _____

Child #3 _____ DOB _____ Age _____ LGC _____

Allergies/Medical Alerts _____

***LGC= Last grade completed**

Please submit (if applicable):

- Last report card
- Current State testing scores
- Current IEP
- Current Psychological

Office Only Section

CNNA Registry #	Enrolled?
Special Education?	Previous Homeschool?
Documents Submitted:	
<ol style="list-style-type: none"> 1. 2. 3. 4. 	



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PARENT/FAMILY NARRATIVE

***Please use this section for additional information and please share why you chose Budding Star Seed Academy.**