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“Home of the Panthers”

CONFIRMATION STUDENT ENROLLMENT 2024 – 2025

TODAY'S DATE: _____ STATE UIC #: _____ CURRENT GRADE LEVEL: _____
CCDA STUDENT I. D. #: _____ CCDA ENTRY DATES: _____ GRADE LEVEL: _____

STUDENT NAME: _____

STUDENT PERMANENT ADDRESS: _____
(COMPLETE ADDRESS & CITY, ST, ZIP CODE)

_____ FEMALE _____ MALE DATE OF BIRTH: ____/____/____ AGE: _____

RACIAL ETHNICITY

Black not of Hispanic Origin American Indian or Alaskan Native White, not of Hispanic Origin
 Hispanic Asian or Pacific Islander Other

EMERGENCY CONTACT PERSON: _____ RELATIONSHIP: _____

EMERGENCY CONTACT NUMBER: _____ ALTERNATIVE NUMBER: _____

ALTERNATIVE

EMERGENCY CONTACT PERSON: _____ RELATIONSHIP: _____

EMERGENCY NUMBER: _____

GRADE COMPLETED JUNE 2024: _____

Does your child have any special needs? If so, please explain _____

Did your child have an I.E.P.C. assessment completed (Special Education)? Yes or No
If so, please submit a copy of the report.

Has your child ever received a Support Team Intervention plan? Yes or No

Did your child have the chicken pox? Yes or No

Are there any family members in the United States Military? Yes or No
If yes, who is the person _____ Relationship: _____

The following items are necessary to process your application for enrollment:

- A. Birth Certificate
- B. Immunization Record [all shots must be up-to-date]
- C. June 2024 Report Card
- D. Any child age 6 and under must have a vision screening, hearing test, and blood lead level drawn, before school starts. Health appraisal forms are available to be completed by your child's Physician.
- E. All 7th graders must have up to date immunizations.

Parent Signature: _____ Date: _____