



ENROLLMENT CHECKLIST

Please complete the following:

- Shadow Date completed (If applicable)
- Copy of most recent NWEA score Kg-8th students or tested on site for \$50
- Copy of most recent report card
- Completed Application
- Tuition Agreements, Payment Plan & Contract
- Home Survey
- \$150 Application Fee (**Non-refundable**)
- Completed Release of Records Document (If applicable)
- Copy of the Student's Birth Certificate/Passport
- IL Certificate of Health Examination Form (**All** new enrolled & re-enrolling Kg & 6th) must include TB test and lead screening for all students 6 years of age and under.
- IL Proof of School Dental Examination Form (**All** new enrolled (except for PK) and re-enrolling Kg, 2nd, 6th)
- IL Eye Examination Form (**All** new enrolled (except for PK) and re-enrolling K, 2nd, 6th & 8th)
- First Payment Installment

**501 Midway Drive, Suite 101
Mount Prospect, IL 60056**

Phone (847)258 5254 Fax (847)378 8242 info@saoc.org www.saoc.org