FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| | Wash | hington, D.C. 20 | 0549 | | |
|------------------|----------|------------------|----------|---------|----|
| | | | | | |
| STATEMENT | OF CHANG | ES IN BE | NEFICIAL | OWNERSH | ΗP |

| OMB APPROVAL | | | | | | | | | | |
|---------------------|----------|--|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-028 | | | | | | | | | |
| Estimated average b | urdon | | | | | | | | | |

37 hours per response: 0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

| | | | | | 01.5 | ecuo | 11 30(11) | or the r | nvesun | eni Co | тірапу Асі | OI TS | 940 | | | | | | |
|---|---|----------------------------|--|--|--|---|-----------|----------|--|----------------------------|---|---|---|----------------------|-----------|-------------------------|---|---|--|
| 1. Name and Address of Reporting Person* Player Kathy | | | | 2. Issuer Name and Ticker or Trading Symbol Grand Canyon Education, Inc. [LOPE] | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | | | | |
| | | | | | | | | | | | | | | | Direc | | | Owner | |
| (Last) | st) (First) (Middle) | | | | 3. Da | Date of Earliest Transaction (Month/Day/Year) | | | | | | | | X | Office | er (give title v) | Other below | (specify y) | |
| 3300 W. CAMELBACK ROAD | | | | 11/1 | 11/19/2009 | | | | | | | | | University President | | | | | |
| (Street) | | | | | 4. If | Ame | ndment, | Date o | of Origin | al File | d (Month/D | ay/Ye | ear) | | . Indivio | dual o | r Joint/Group | Filing (Check A | Applicable |
| PHOENI | X AZ | Z 8 | 35017 | | | | | | | | | | | | X | | , | e Reporting Per | |
| (City) | (St | ate) (| Zip) | | | | | | | | | | | | | Form Pers | | e than One Rep | oorting |
| | | Tabl | e I - Noi | n-Deriva | ative | Sec | curitie | s Acc | quirec | l, Dis | sposed o | of, o | r Ben | efici | ally C |)wne | ed | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | Execution Date, | | 3. Transaction Code (Instr. 8) 4. Securities Acqui Disposed Of (D) (In 5) | | | | nd : | Securities Beneficially | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | | | | |
| | | | | | | | | Code | v | Amount | | (A) or (D) | Price | Trar | | action(s) 3 and 4) | | (111501.4) | |
| Common Stock 11/1 | | | 11/19/ | /2009 | | S | | 1,000 | 1,000 D \$ | | \$19 | .37 | 0 | | D | | | | |
| | | Та | | | | | | | | | osed of, onvertil | | | | y Ow | ned | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | Date (Month/Day/Year) i | 3A. Deem Execution if any (Month/Da | Date, | 4. Transaction Code (Instr. 8) | | n of | | 6. Date Exercisab Expiration Date (Month/Day/Year) | | te | Am Sec Un De Sec | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | | vative durity Str. 5) B | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | 0-4- | ., | | (5) | Date | | Expiration | | or | nount | | | | | |

Explanation of Responses:

Remarks:

/s/Lyn Bickle, Attorney-in-Fact 12/03/2009

** Signature of Reporting Person

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.