



APPLICATION FOR ENROLLMENT

[Complete Both Sides]

APPLICATION STATEMENT

I hereby make application for my child _____
(first name) (last name)

For grade _____ in the school beginning _____
(month) (school year)

(Signature of parent or guardian)

(date)

Parent/Guardian Email Address _____
Parent/Guardian Email Address _____

PUPIL INFORMATION

Birthdate _____ (Kindergarten students must be 5 yrs old by Sept. 1) Sex _____
MM/DD/YEAR

Address _____
Street Address City Zip

Primary Phone () _____

FAMILY INFORMATION

Child resides with: _____ Both Parents (same house)
_____ Both Parents (separate houses)
_____ Other (please explain) _____

Parent/Guardian Name _____
Home Address _____
Street Address City Zip

Occupation _____ Place of Employment _____
Business Phone () _____ Cell Phone () _____

Parent/Guardian Name _____
Home Address _____
Street Address City Zip

Occupation _____ Place of Employment _____
Business Phone () _____ Cell Phone () _____

Siblings (please list below)

Name	Age	School Presently Attending
_____	_____	_____
_____	_____	_____
_____	_____	_____



