

## **APPLICATION FOR ADMISSION**

Full Name	e						
Address	Last		First				M.I.
Address	Number	Street					
	City or Town					Zip Code	 e
Mailing A	address (if different fr	om above)					
	Number	Street					
Home Ph	City or Town		Other I	Phone(s)		Zip Code	
Sex	Male [	Female	Date of Birth				
Place of E	Birth						
	thnicity (optional) African American		Asian/Pacific Islander			American Indian	
,	White		Hispanic/Latino			Other	
Full Name	e of parent(s)/guardia	an(s) that stud	ent lives with:			RELATIONSHIP	
In case of	NAME f emergency, contact:					RELATIONSHIP	
	NAME				PHONE	E NUMBER	
	NAME			PHONE NUMBER			
	need translation and/ Yes (language)			No			
Do you currently have an Individualized Educational Plan (IEP) Are you currently receiving ELL services?					Yes Yes	No.	
What sch	ool are you currently	attending?					
If you are	e not currently attend	ing school, wh	nat school were you atter	nding last	?		
What gra	de are you in?						