

Enrollment Application



Today's date _____

How did you hear about us? _____

Student Information:

Last name First name date of birth

Allergies: _____

Schedule Request:

	Mon	Tues	Wed	Thurs	Fri
Half-day (8:30 am- 11:30am)					
Academic day (8:30 am - 3:30 pm)					
Extended Day (7:30 am- 5 pm)					

Scheduling notes:

Parent information: ☐ mother ☐ father ☐ guardian

Name (last, first) _____

Address: _____

City, State, Zip _____

Email address _____

Phone _____
Home cell

Parent information: ☐ mother ☐ father ☐ guardian

Name (last, first) _____

Address: _____

City, State, Zip _____

Email address _____

Phone _____
Home cell