

Charter School Student Enrollment Notification Form

For School Year:

Warning: A child enrolled in another public school, or a nonpublic or private school cannot, at the same time, enroll in a charter school.

| Name of Charter School: | | |
|---|------------------------|------|
| Address: | | |
| Charter School Contact Person: | | |
| Telephone: | Email: | |
| Student Information | | |
| Last Name: | First Name: | MI: |
| Home Address: | | |
| City: | State: | Zip: |
| County: | Telephone: | |
| Mailing Address (if different from home address): | | |
| City: | State: | Zip: |
| Date of Birth: | Age: | |
| School District of Residence and Form | mer School Information | |
| School District of Residence: | | |
| Former School Information (Other Than Pre-School | I): | |

Public SchoolCharter SchoolHome SchoolNonpublic/Private SchoolStudent Not Enrolled in School Preceding Enrollment in Charter School Because:

Entering Kindergarten Re-Enrolling Dropout Other:

Name of Former School:

Address of Former School:

| Previous Grade: | Withdrawal Date from Former school: | | |
|-------------------------------------|-------------------------------------|-----|----|
| Was your Child receiving Special E | Education Services Based on an IEP? | Yes | No |
| If yes, do you have the Child's Spe | cial Education Records (IEP)? | Yes | No |

Parent/Guardian Information

| Child Lives with: | Both Parents | Both Pa | rents Alternately | Parent #1 Only | Parent #2 Only |
|---------------------|--------------------|----------|-------------------|----------------|----------------|
| | Legal Guardian | Foster F | Parents | Other Adult | |
| Special Custodial C | ourt Instructions: | Yes | No | | |

(If Yes, please provide a copy of the court order)

Complete Parent/Guardian Name and Address Information as Applicable:

| State: | Zip: |
|---------------------------|---|
| Email Address: | |
| | |
| | |
| State: | Zip: |
| Email Address: | |
| its, please complete this | section: |
| Other Adult | |
| | Email Address: State: Email Address: Its, please complete this |

Name:

Address:

City:

State:

Zip:

My signature on this form indicates my decision to have my child attend the charter school named on page 1 of this form and signifies my request that appropriate school records be forwarded from the school district to the charter school. *My signature also certifies that my child is not, and will not be, enrolled in another public school, a nonpublic school or a private school at the same time he or she is enrolled in this charter school.*

| Signature of Parent/G | uardiar | ו | | | |
|---------------------------|---------|-------------------|-------------|---------------|--------|
| To Be Completed | by C | harter School: | | | |
| Verification of Date of E | Birth: | Birth Certificate | Oth | er: | |
| Proof of Residency: | Morte | gage Statement | Lease | Utility Bill | Other: |
| Official Enrollment Date | e: | | Anticipated | Date of Atten | dance: |
| Grade Student is Enter | ng: | | | | |
| | | | | | |

Signature of Charter School Representative