



**Applicant Information:**

Last Name \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

Date of Birth \_\_\_\_\_ Male/Female \_\_\_\_\_

Mailing Address \_\_\_\_\_

Date of Application \_\_\_\_\_ Start Date \_\_\_\_\_

**Family Information:**

Name of Parent/Guardian \_\_\_\_\_ Relation to Student \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ zip \_\_\_\_\_

Home/cell phone \_\_\_\_\_ Email \_\_\_\_\_

Business \_\_\_\_\_ Position \_\_\_\_\_ Work Phone \_\_\_\_\_

Name of Parent/Guardian \_\_\_\_\_ Relation to Student \_\_\_\_\_

Home Address *(if different)* \_\_\_\_\_

Home/cell phone \_\_\_\_\_ Email \_\_\_\_\_

Business \_\_\_\_\_ Position \_\_\_\_\_ Work Phone \_\_\_\_\_

Does your Kindergarten or elementary child require bus transportation from your home School District?  
If yes, please list your home school district. \_\_\_\_\_

If you were referred by someone, please let us know who \_\_\_\_\_

Does your child have any academic, physical, or emotional needs? If so, please explain. \_\_\_\_\_  
\_\_\_\_\_

Does your child have an IEP or IFSP? \_\_\_\_\_ If yes, please provide the necessary paperwork.

Please list 6 adjectives that best describe your child. \_\_\_\_\_

***A seventy five dollar (\$75) non-refundable processing fee is required for each application.***

***(Parent or Guardian)*** \_\_\_\_\_ ***(Date)*** \_\_\_\_\_