



ADMISSION APPLICATION

To be completed by the parent/guardian of the candidate.
Please print or type and fill in completely.

APPLICANT
INFORMATION

Student name _____
First Middle Last

Date of birth _____ Gender _____ Place of birth _____

Home address _____
Street City

State Zip Telephone _____

Present grade _____ Applying for grade _____ for September, 20_____

Name of current school _____

Address _____

Teacher's name _____ School telephone _____

Parent/guardian legal name _____ Parent/guardian legal name _____

Parent/guardian nickname _____ Parent/guardian nickname _____

Home address _____ Home address _____
If different from applicant

Home telephone _____ Home telephone _____

Email address _____ Email address _____

Occupation/professional expertise _____ Occupation/professional expertise _____

Employer _____ Employer _____

Work address _____ Work address _____

Work telephone _____ Work telephone _____

Cell telephone _____ Cell telephone _____

Stepparent's name _____ Stepparent's name _____

Home address _____ Home address _____

Home telephone _____ Home telephone _____

Work telephone _____ Work telephone _____

PARENT/
GUARDIAN
INFORMATION

