

2024 - 2025 New Student Application

Application information (To be completed by a Parent or Guardian)

Student Legal Name:				Date of Birth:	/ /
	First Name:	Middle Name:	Last Name:		MM/DD/YYYY
Parent/Guardian Nan	ne (Living at	Address):			
Relationship to Stude	nt: 🗆 Mothe	r □Father □Ot	her (Please Sp	ecify):	
Primary Mailing Addr	ess:				
	Street:		City:	State:	•
Home Phone:			Secondary Pho	ne:	
Email:					
Secondary Contac	rt .				
Parent/Guardian Nan	ne (Living at	Address):			
Relationship to Stude	ent: Mothe	r □Father □Ot	her (Please Sp	ecify):	
Primary Mailing Addr	ess:				
	Street:		City:	State:	Zip Code:
Home Phone:			Secondary Pho	ne:	
Email:					
Additional Information					
Student Grade:	Stud	lent Age:	Gend	er:	
Previous or Current S	chool:				
Requested Date to Sta	art School: _	/ / MM/DD/YYYY			
Any additional inform	nation we sh	ould know?			
arent/Guardian Signature:				Date:	