



SAN TAN CHARTER SCHOOL
STUDENT APPLICATION

Grade Entering _____ ☐ Returning Student ☐ New Student ☐ Mainstream ☐ Gifted*
Kindergarten ☐ Half Day ☐ Full Day

San Tan Charter School does not discriminate regarding color, race, religion, national and ethnic origin, special needs, or language proficiency of students regarding policies, admission and school-administered programs.

STUDENT BIOGRAPHICAL INFORMATION

Student First Name _____ Last Name _____ Name Used _____

Address (Street) _____ City _____ Zip _____

Home Phone (_____) _____ Birthdate ____/____/____ ☐ Male ☐ Female

Ethnicity ☐ Asian ☐ African American ☐ Hispanic ☐ Indian ☐ Caucasian ☐ Other _____

Place of Birth City _____ State _____

Mother's Name _____ Cell Phone _____

Mother's Email Address _____

Father's Name _____ Cell Phone _____

Father's Email Address _____

Are you living in temporary housing? (circle) Yes No If so, is this due to hardship? (circle) Yes No

Does your child currently have a 504 or IEP plan? (circle) Yes No

These questions are in compliance with Arizona Administrative Code, R7-2-306(B)(1), (2)(a-c)

Responses to these statements will be used to determine whether the student will be assessed for English Language Proficiency.

1. What is the primary language used in the home regardless of the language spoken by the student?

2. What is the language most often spoken by the student?

3. What is the language that the student first acquired?

I, the parent of _____, agree to:

- ☐ Provide a lunch daily for my child.
- ☐ Provide transportation to and from school every day.
- ☐ Provide prompt and timely drop-off and pick-up of my child daily.
- ☐ Provide student pick-up within 30 minutes of illness or severe behavior notification.
- ☐ Give my permission to have photographs of my child published in articles and media viewed by the general public.

Mother's Signature

Father's Signature

Date

Applications for STCS's Gifted School must include a copy of the child's most recent gifted testing scores.

For Office Use Only: ☐ FRONT OFFICE ☐ ACCOUNTING ☐ REGISTRAR Teacher _____

Date App. Received _____ Start Date _____ Year Entering _____

Paid \$ _____ ☐ Cash ☐ Check # _____ ☐ Credit Card