

SAN TAN CHARTER SCHOOL 2019-20 STUDENT APPLICATION

| San Tan Charter School does not discriminate regarding color, race, religion, national and ethnic origin, special in or language proficiency of students regarding policies, admission and school-administered programs. Student First Name | • | CHARTER SCHOOL PEOPLE + PROCESS + POSSIBILITIES | | Grade Entering Gifted* OElem. Mon | | _ | _ | New Student OFull Day |
|--|------------------------|---|---|---|---|---|--------------------|--------------------------|
| Address (Street) | Sa | | | | | | _ | |
| Home Phone (| Stı | dent First Name | | Last Name | | Name U | sed | |
| Caucasian African American Asian Am. Indian/Alaskan Native Hawaiian/Pacific Islander OHispania OHisp | Ad | dress (Street) | | | City | zi | р | |
| Mother's Name | Но | me Phone (Caucasian OAfric | _) can American OAsi | OMale O an OAm. Indian/Ala | Female skan Native | Birthdate OHawaiian/Pac | / ific Islander | OHispanic |
| Father's Email Address Father's Name | Pla | ce of Birth City | | | Sta | te | | |
| Father's Name | М | other's Name | | | Cell Phone | | | |
| Student lives with (check all that apply) Both Parents Mother Father Stepmother Other Are you living in temporary housing? Yes No No If so, is this due to hardship? Yes No Does your child currently have a 504 or IEP plan? 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? Previous School State Previde a lunch daily for my child. Provide a lunch daily for my child. Provide a rong trand timely drop-off and pick-up of my child daily. Provide student pick-up within 30 minutes of illness or severe behavior notification. Permission for my student to be contacted on their personal cell phone. Provide # Give my permission to have photographs of my child published in articles and media viewed by the general public. If entering Full Day Kindergarten, I understand and agree to pay the \$300 Registration Fee. 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.* | M | other's Email Addr | 'ess | | | | | |
| Are you living in temporary housing? Yes No If so, is this due to hardship? Yes No Does your child currently have a 504 or IEP plan? 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. What is the primary language used in the home regardless of the language spoken by the student? What is the language most often spoken by the student? What is the language most often spoken by the student? What is the language that the student first acquired? Previous School State I, the parent of Agree of the provide a lunch daily for my child. Provide a lunch daily for my child. 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. Permission for my student to be contacted on their personal cell phone. Provide # Give my permission to have photographs of my child published in articles and media viewed by the general public. If entering Full Day Kindergarten, I understand and agree to pay the \$300 Registration Fee. Mother'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: PRONT OFFICE ACCOUNTING REGISTRAR Siblings Year Entering 2019-202 | Fa | ther's Name | | | Cell Phone_ | | | |
| Are you living in temporary housing? | Fat | ther's Email Addre | ess | | | | | |
| I, the parent of | Do The Res 1. | es your child curren ese questions are in co sponses to these state What is the primal What is the langua | ompliance with Arizona Aments will be used to detry language used in the | dministrative Code, R7-2-3 termine whether the stude home regardless of the by the student? | o 06(B)(1), (2)(a-c nt will be assess e language spo |) sed for English Langu sken by the studeni | age Proficiency. | |
| □ 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. □ Permission for my student to be contacted on their personal cell phone. Provide # □ Give my permission to have photographs of my child published in articles and media viewed by the general public. □ If entering Full Day Kindergarten, I understand and agree to pay the \$300 Registration Fee. Mother's Signature | Pre | vious School | | | | Sta | te | |
| *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 | I, ti | □ Provide a lunch □ Provide transpo □ Provide prompt □ Provide student □ Permission for n □ Give my permiss | daily for my child. rtation to and from sch and timely drop-off ar pick-up within 30 min ny student to be conta sion to have photograp | nool every day. Id pick-up of my child da utes of illness or severe cted on their personal co ohs of my child published | ily. behavior notif ell phone. Pro I in articles an | ication. vide # d media viewed by | the general p | ublic. |
| For Office Use Only: FRONT OFFICE ACCOUNTING REGISTRAR Siblings Date App. Received Start Date Year Entering 2019-2020 | Mo | ther's Signature | | Father's Signature | | | Date | |
| Date App. Received Start Date Year Entering 2019-202 | г | *Applications | for STCS's Gifted Sci | hool must include a co | py of the chi | ild's most recent | gifted testin | g scores.* |
| Date i did | | Date App. Receive | d | Start Date | | | Year Entering | · I |