



SAN TAN CHARTER SCHOOL
2019-20 STUDENT APPLICATION

Recker Campus Grade Entering _____

☐ Mainstream ☐ Gifted* ☐ Elem. Montessori (K-3) **Kindergarten** ☐ Returning Student ☐ New Student ☐ 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 First Name _____ Last Name _____ Name Used _____

Address (Street) _____ City _____ Zip _____

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

☐ Caucasian ☐ African American ☐ Asian ☐ Am. Indian/Alaskan Native ☐ Hawaiian/Pacific Islander ☐ Hispanic

Place of Birth City _____ State _____

Mother's Name _____ Cell Phone _____

Mother's Email Address _____

Father's Name _____ Cell Phone _____

Father's Email Address _____

Student lives with (check all that apply) ☐ Both Parents ☐ Mother ☐ Father ☐ Stepmother ☐ Stepfather ☐ Other _____

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.

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 _____

I, the parent of _____, agree to (please read and check each):

- ☐ 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 _____ 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 Siblings _____

Date App. Received _____ Start Date _____ Year Entering **2019-2020**

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