

MARSTONS MILLS EAST HORACE MANN CHARTER
PUBLIC SCHOOL
SCHOOL CHOICE APPLICATION FORM
2009-2010 SCHOOL YEAR

*This application must be accompanied by a copy of the
child's birth certificate and Proof of Residence*

*Please return this application on or between March 16, 2009 through April 16, 2009.
If necessary, a lottery will be held on April 27, 2009.*

CHILD'S NAME **DOB** **PLACE OF BIRTH**

LAST **FIRST** **MIDDLE**
GENDER M/F

CHILD'S ADDRESS: _____

GRADE APPLYING FOR: _____

PRESENT SCHOOL: _____ **PRESENT GRADE:** _____

CHILD'S PRIMARY LANGUAGE _____

PARENT'S PRIMARY LANGUAGE _____

MOTHER'S NAME _____

MOTHERS' ADDRESS _____

MOTHER'S HOME PHONE: () _____

MOTHER'S WORK PHONE: () _____

MOTHER'S CELL PHONE: () _____

FATHER'S NAME _____

FATHER'S ADDRESS _____

FATHER'S HOME PHONE: () _____

FATHER'S WORK PHONE: () _____

FATHER'S CELL PHONE: () _____

OTHER CHILDREN IN FAMILY date of birth check if sibling at MMEHMCPS

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

OPTIONAL: PLEASE CHECK ETHNIC GROUP:

1. American Indian 2. Asian 3. Black/Non-Hispanic
4. Hispanic 5. White/Non-Hispanic

Please list below the name (s) and address(es) of any school (s) attended by your child beginning with the name of the school which your child currently attends as of the date of this application:

NAME OF SCHOOL	SCHOOL ADDRESS
_____	_____
_____	_____
_____	_____

DOES YOUR CHILD HAVE ANY MEDICAL, LEARNING OR SPECIAL NEEDS OF WHICH WE SHOULD BE AWARE? YES NO

IF YES, PLEASE EXPLAIN IN DETAIL (ATTACH ADDITIONAL PAGES IF NECESSARY)

IS YOUR CHILD CURRENTLY ON AN IEP? YES NO

IS YOUR CHILD RECEIVING ANY SPECIAL SERVICES YES NO

IF YES, PLEASE EXPLAIN IN DETAIL (ATTACH ADDITIONAL PAGES IF NECESSARY)

HAS YOUR CHILD REPEATED A GRADE? YES NO
IF YES, PLEASE EXPLAIN IN DETAIL (ATTACH ADDITIONAL PAGES IF NECESSARY)

ARE YOU INTERESTED IN BEFORE SCHOOL CARE? YES NO

ARE YOU INTERESTED IN AFTER SCHOOL CARE? YES NO
(DAY CARE WILL BE OFFERED ON A FIRST COME, FIRST SERVED BASIS, AND THERE IS A FEE FOR THIS SERVICE.)

HAS YOUR CHILD EVER BEEN SUSPENDED OR EXPELLED FROM SCHOOL? YES NO
IF YES, PLEASE DESCRIBE THE INCIDENT(S) IN DETAIL INCLUDING THE REASON (S) FOR SUSPENSION OR EXPULSION.
