Date	
Grade Applying For	
Referred by	

ADMISSIONS FORM

Office Use: Payment Plan

| Monthly | Reg. Fee
| Bi-weekly | Book/Materials Fee

STUDENT INFORMATION					
Student's Legal Name			Preferred	Name	
Last	First	Middle Initial			
AddressStreet		City	Zip		
Home Phone ()	Da	•		Sex □Male □Female	
Is the student a United States Citizen? □Yes	□No	Email Address:	-		
Please provide a Security Code Word					
FAMILY INFORMATION					
Father/Guardian full name			Home Phon	ne ()	
Employer			Date of Birth		
Social Security # Work F	Phone (Beeper/Cell Pho	ne ()	
Home address (if other than student's)					
Mother/Guardian full name					
Employer			Date of Birth	1	
Social Security # Work F	Phone (Beeper/Cell Pho	ne ()	
Home address (if other than student's)		×			
Family/Marital relationships (check all that a	pply): Natur	ral parents are:			
□Together at home □Separated □Legally	/ divorced	□Natural mother de	ceased □Nat	ural father deceased	
If parents are divorced or separated, who has	legal custoo	ly of the child?			
Is either parent forbidden by court order from h (Attach a copy of court documents)	naving equa	I access to the child or	the school reco	ords? □Yes □No	
Has any member of your family attended SRC	A in the pas	t? □Yes □No If ye	s, why did he/sh	ne leave?	
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