



## Kindergarten Application

### Applicant Information

Student Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
*Last First M.I.*

Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*

\_\_\_\_\_

*City State ZIP Code*

Place of Birth: \_\_\_\_\_ DOB: \_\_\_\_\_ Race: \_\_\_\_\_ Sex: \_\_\_\_\_

Birth Certificate Present: yes / No

Last Know School: \_\_\_\_\_

Date last school Enrolled: \_\_\_\_\_

Number Days Attended: \_\_\_\_\_

Days Absent: \_\_\_\_\_

Date withdrawn: \_\_\_\_\_

Course and record of achievement: \_\_\_\_\_

Program Achievement: \_\_\_\_\_

Date of Graduation: \_\_\_\_\_

School Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*

\_\_\_\_\_

*City State ZIP Code*

Parent Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
*Last First M.I.*

Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*

\_\_\_\_\_

*City State ZIP Code*

Phone: \_\_\_\_\_ Email \_\_\_\_\_

Signature: \_\_\_\_\_