



# AmeriSchools Academy

|                                  |
|----------------------------------|
| Administrative Use Only          |
| Intake Initial and Date Received |
| _____                            |

**PART ONE- INTEREST LIST APPLICATION**  
PLEASE PRINT INFORMATION IS REQUIRED FOR ELIGIBILITY.

How did you hear about us? \_\_\_ Website: \_\_\_\_\_ \_\_\_ Driving By \_\_\_ Word of Mouth \_\_\_ Other: \_\_\_\_\_

**STUDENT INFORMATION**     ENROLLING FOR FIRST TIME     RE-ENROLLING

Admission for Grade Level \_\_\_\_\_  
 Last Name \_\_\_\_\_ First Name \_\_\_\_\_  
 Legal Last Name (if different) \_\_\_\_\_ Date of Birth \_\_\_\_\_  
 City/State of Birth \_\_\_\_\_ Current Age \_\_\_\_\_ IEP YES NO    504 PLAN YES NO  
 Home Address \_\_\_\_\_  
*Siblings applying? Please provide names and grade levels:* \_\_\_\_\_  
*Siblings already attending? Please provide names and grade levels:* \_\_\_\_\_

**PARENT / GUARDIAN INFORMATION**

Parent/Guardian Name \_\_\_\_\_ Email \_\_\_\_\_  
 Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

**DISCIPLINARY INFORMATION**

Has your child ever been    Suspended                          Expelled      
 If yes to any above questions please provide dates, school names and circumstances below:

**SCHOOL INFORMATION**

Please indicate last school your child has attended

| School's Name | City and State | Dates attended | Withdrawal Reason |
|---------------|----------------|----------------|-------------------|
|               |                |                |                   |

**STATEMENT OF DISCLOSURE**

- I/We have truthfully answered all questions on this form.
- I/We understand that student grade level placement is based upon his/her previous grades, recommendations, and test scores.
- I/We understand that any false information on the application will be grounds for immediate non-admission to this school.
- I/We understand that this application does not guarantee enrollment, but is only the first step of the eligibility process.

Parent/Guardian Signature(s):  
 Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

**ADMINISTRATIVE USE ONLY**

Approval Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Date Entered into SMS: \_\_\_\_\_  
 Priority Level: \_\_\_\_\_ (Staff:1, Sibling:2, Rollover App:3, New Enrollment:4)

Registration Packet Delivered \_\_\_\_\_ Returned \_\_\_\_\_ Complete \_\_\_\_\_