Atlncs.org atlncs.org

ATLANTA NEIGHBORHOOD CHARTER SCHOOL

Helping students learn to use their minds well

APPLICATION FOR ENROLLMENT for 2016-17 School Year

PLEASE PRINT CLEARLY WITH INK PEN. CIRCLE CHOICES THAT APPLY.

GRADE LEVEL ENTERING:	KINDERGARTEN		FIRST	SECOND	THIR	THIRD								
	FOURTH	FIFTH	SIXTH	SEVENT	'H	EIGHTH	I							
*IF ENTERING KINDERGARTEN, STUDENT MUST BE FIVE YEARS OLD BEFORE SEPTEMBER 1 ST OF THE CURRENT SCHOOL YEAR FOR ENROLLMENT/IF ENTERING FIRST GRADE, STUDENT MUST BE SIX YEARS OLD BEFORE SEPTEMBER 1 ST OF THE CURRENT SCHOOL YEAR.														
STUDENT'S LEGAL NAME:	LAST	AST F				MIDDLE								
NAME USED:	STUD	ENT'S DATE	OF BIRTH (MM	M/DD/YYYY):										
NAME OF PARENT/GUARDIAN: _														
** CURRENT ADDRESS:									_					
CITY:			ZIP:						_					
PRIMARY #:		ALTEF	RNATE PHONE	#:										
E-MAIL ADDRESS (Please print cle	early in the boxes	below)												
PLEASE LIST SIBLINGS AND OTH	HER CHILDREN II	N THE HOUS	SEHOLD:											
NAME:		GRADE	:S	CHOOL:										
NAME:		GRADE	: S0	CHOOL:										

** This address will need to be verified upon offer of enrollment. If you move after turning in this application and you are awarded a spot, you will need to verify that you resided at this location during the registration/lottery process. If you are unable to do so, your application will be placed at the bottom of the waitlist.



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PLEASE INITIAL THE FOLLOWING STATEMENTS

•	 I understand that this application for enrollment does not guarantee admission and that if there are more applicants than spaces available at a grade level there will be a random lottery to determine enrollment for that grade level 								
•	I understand that if my contact information changes, I must notify Atlanta Neighborhood Charter School offices or may risk the loss of my student's placement								
I understand that if I am unable to provide proof of residency for the address listed on this application when offered spot, my application will be placed on the bottom of the waitlist									
		REQUIRED PARENT/GUA	RDIAN RESIDENCY I	NOTICE					
their natural p full-time City of policy, a resid City of Atlan	parent(s), legal guardia of Atlanta residents for the lent is defined as an ind nta School) and who, owns property in the Ci	n(s), or legal custodian(s). the entire period of enrollme lividual who is a full-time occon any given school day, is	Students and their pa int in Atlanta Neighbo supant of a dwelling lo likely to be at their s	nust reside full-time in the City of Atlanta with arent(s)/guardian(s)/custodian(s) must remain rhood Charter School. For the purpose of this cated in the City of Atlanta (and zoned for a stated address when not at work or school. A Atlanta, is not considered a resident for the					
		PARENT/GUARD	DIAN SIGNATURES						
	HOOD CHARTER SCH		THE INFORMATION I	NTA OR I AM AN EMPLOYEE OF ATLANTA I HAVE GIVEN IN THIS DOCUMENT IS, TO ORRECT.					
Parent/Legal Guardian Signature		ature	-	Parent/Legal Guardian Signature					
	Date		_	Date					
		DO NOT W	RITE BELOW						
		FOR SCHOOL OF	FICIAL USE ONLY						
TIME AND DA	ATE STAMP:								
Location Submitted:		Grade Entering:	Registration Zone:	Sibling:]				
	School Official Sig	nature		Date					