University Preparation Charter School at CSU Channel Islands

CHARTER SCHOOL ENROLLMENT APPLICATION FOR 2024-2025 SCHOOL YEAR

| 1. Pupil's Name: _ | | | Birthdate:Male/Female (09-01-2019 example) | | | /Female |
|--|-------------------------------------|----------------------------|---|---------------------------------------|----------------|---------|
| Please Circle Pup | First Name pil's <u>CURRENT</u> | | 024 school year: 7 | · · · · · · · · · · · · · · · · · · · | 1 / | 67 |
| Please Circle the gra | ade in which the Puj | pil will be <u>ENTERI</u> | <u>NG</u> in the year <u>202</u> 4 | <u>4-2025</u> : TK | K 1 2 3 4 | 5678 |
| If you are applying fo | or Kindergarte | n. please check "ei | ther" Dual Languag | e or Langua | age Enrichment | |
| Dual Language | | uage Enrichment | | 2 | 2 | - |
| Child's First Languaş | ge: English | Spanish | _Other | _ | | |
| 2. Residential Addr | 'ess | | | | | |
| Mailing Address – If | Street different from reside | nce | City | State | Zip | |
| Email Address | | | | | | |
| Parent's/Guardian School Currently A | First and La | st name | Phone Home | | Work/Cell | |
| 5. School District Nov | w Attending: (if application | able) | | | | |
| 6. Sibling's applying for same school year: Name(s) One application is needed for | | | | | | |
| • •• • | oplication is |) IIEEUEU IV. | i vacn stuu | | | |

In signing this form, I understand: (1) Acceptance is subject to availability of space. 2. <u>Parent is</u> <u>responsible for pupil transportation.</u> (3) If no space is available at this time, I will be placed on a waiting list through a random selection procedure and contacted when my name comes up.

| Parent's /Guardian's Signature | | Date | |
|-----------------------------------|---------------|--|--|
| For School Use Only Accepted Date | Declined Date | Date Received w/Initials UPCS/CSUCI Agent | |