



LAKE WALES
CHARTER SCHOOLS

LWCharterSchools.com

Hillcrest Elementary School
Charter School
TRANSFER APPLICATION
2021-2022 School Year

****Enrollment may be delayed until the most recent copy of the student's I.E.P. has been reviewed by the ESE Administration Team. Some placement options are not available at all Lake Wales Charter Schools. ****

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| <ul style="list-style-type: none"> You must complete one application for each child you wish to enroll (front and back) To be valid, the request must be complete, signed by a parent or guardian, and dated Incomplete applications will be returned, if possible | <ul style="list-style-type: none"> All Lake Wales Charter Schools will give preference to students in their current school attendance zone Enrollments are set by grade level, racial balance, and physical space Preference on the waiting list is given to those who currently have a sibling enrolled in K-4 |
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CURRENTLY ZONED SCHOOL:

REQUESTED SCHOOL:

STUDENT INFORMATION

Student ID #	Student Social Security #	Gender	Date of Birth (MM/DD/YYYY)	Current Grade	Applying for Grade
5300 <input style="width: 40px;" type="text"/>	<input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/>	M <input type="checkbox"/> F <input type="checkbox"/>	<input style="width: 40px;" type="text"/>	<input style="width: 40px;" type="text"/>	<input style="width: 40px;" type="text"/>

STUDENT'S LEGAL NAME

Last Name	First Name	Middle Name
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>

Ethnic Code – Choose only one code from the list and write that number in the box below

1. Multiracial Black	2. African American
3. White	4. Hispanic
5. Indian	6. Asian
7. Multiracial Non-black	<input style="width: 40px;" type="text"/>

Check ALL that apply

<input type="checkbox"/> Regular Education Student	<input type="checkbox"/> Alpha/Gifted Student
<input type="checkbox"/> School Employee's Child	<input type="checkbox"/> ESE Student
<input type="checkbox"/> Board Member's Child	<input type="checkbox"/> ESOL Student
<input type="checkbox"/> Other: _____	

HOME ADDRESS

Street Address (If applicable, include Apartment #)

City	State	Zip Code
<input style="width: 100%;" type="text"/>	<input style="width: 40px;" type="text"/>	<input style="width: 100%;" type="text"/>

MAILING ADDRESS – IF DIFFERENT FROM STREET ADDRESS

Street Address (If applicable, include Apartment #)

City	State	Zip Code
<input style="width: 100%;" type="text"/>	<input style="width: 40px;" type="text"/>	<input style="width: 100%;" type="text"/>

FAMILY INFORMATION – Parent/Guardian living in the same household as the student)

Last Name	First Name
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Home Telephone Number	Work Telephone Number
<input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/>	<input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/>

For Office Use Only!

Date Received

