

Mastery School of Independent Learning
PRIMARY LEVEL STUDENT APPLICATION FORM

Today's Date: _____

Grade child is entering: Level A (Kindergarten)

Level B (Grade 1)

Level C (Grade 2)

Name: _____ Sex: M F

Last

First

Middle

Street: _____

City: _____ State: _____ Zip Code: _____

Primary Phone Number: _____ Secondary Phone Number _____

Note: These are the numbers that will be used by the school for notifications, including school cancellations.

E-mail Address: _____

Birthdate: _____ Place of Birth: _____

Please attach birth certificate.

School Currently Attending: _____ Current Grade: _____

Father's Name: _____

Last

First

Middle

Father's Occupation: _____ Father's Cell Phone: _____

Business Name/Address/Phone: _____

Father's Religion: _____ Father's Birthplace: _____

Mother's Name: _____

Last

First

Middle

Maiden

Mother's occupation: _____ Mother's Cell Phone: _____

Business Name/Address/Phone: _____

Mother's Religion: _____ Mother's Birthplace: _____

Are the Parents:

Married Divorced Separated Never Married Remarried

How should we address your mail? _____

How many children in the family? _____

Number of brothers Older _____ Younger _____

Number of sisters Older _____ Younger _____

Why are you applying to this school? _____

Does your child have any special needs? Please specify _____

Does your child have any allergies or medical conditions that we should be aware of? If so, please specify.

Non-Discriminatory Policy

Mastery School of independent Learning admits students of any race, color, religion, national or ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. We do not discriminate on the basis of race, color, religion, national or ethnic origin in administration of our educational policies, admission policies or school-administrated programs.

OFFICE USE ONLY

Birth Certificate

Deposit: cash check # _____