

Admission Form School

Student Information

- Student's Name: _____
- Date of Birth: _____ (MM/DD/YYYY)
- Gender: ☐ Male ☐ Female ☐ Prefer not to say
- Residential Address: _____
- City: _____ State: _____ Zip: _____

Parent/Guardian Information

- Parent/Guardian Name: _____
- Relationship to Student: _____
- Contact Number: _____
- Email Address: _____
- Occupation: _____
- Residential Address (if different from student): _____

Previous School Details

- Name of Previous School: _____
- School Address: _____
- City: _____ State: _____ Zip: _____
- Dates Attended: _____ to _____
- Reason for Leaving: _____

Emergency Contact Information