

KINDERGARTEN

2021-2022 Enrollment Lottery

(Attach a copy of the child's birth certificate, social security card & immunization records)

STUDENT: (PLEASE PRINT: FIRST LAST)		Date of Birth: (MM/DD/YYYY) *must be 5 by Sept. 30th of 2021		Race: Hispanic __ Non Hispanic __	
Social Security #:		Student Lives With:		Relation to Student:	
Mailing Street:		City:		State:	
				Zip Code:	
Special Services Currently Received: (circle all that apply) Special Ed 504 Speech Homeless LEP Migrant				Primary Language Spoken in the home:	
Does your child participate in LaChip? (circle one) Yes No If yes, case # _____ Does your family receive SNAP Benefits? (circle one) Yes No If yes, case # _____			Where is your child currently enrolled : _____ Headstart _____ Public Pre-K _____ Non-Public Pre-K _____ Licensed Daycare _____ In-Home Daycare _____ Kept Home		
Email:					

***student must be 5 years old by September 30 of 2021 in order to attend APCS for 2021-2022 school year.**

Parent Phone Numbers: Please make sure all phone numbers are correct. If we call and you do not have a valid number, we will go to the next child on the list.

Name:	Home:	Work:	Cell:
Name:	Home:	Work:	Cell:

Other siblings you would like for us to consider should this child be enrolled in APCS?

Name:	Current Grade:
Name:	Current Grade:
Name:	Current Grade:

Filling out these forms only ensures that your child will be placed into the lottery system for enrollment in the upcoming school year. It in no way guarantees acceptance into APCS.

APCS is free public school, open to all children regardless of race, color, religion, sex, national origin, language, or disability. Listing sibling does not guarantee that he/she will be accepted should the Kindergarten child be accepted.

OFFICE USE ONLY					
Shot Record _____	Birth Certificate _____	Social Sec. _____	LaCHIP _____	Lunch _____	