

# Charter School Student Enrollment Notification Form

For School Year 2017-2018

**Warning: A child enrolled in another public school or a nonpublic or private school cannot, at the same time, enroll in a charter school. If there are less seats available than there are applications for Baden Academy, we will hold a state mandated lottery.**

Name of Charter

School: Baden Academy Charter School

Address: 1016 State Street

Baden, PA 15005

Charter School

Contact Person: Ramona Sangermano

Telephone: 724-869-4269 Email Address: Ramona.sangermano@badenacademy.org

## I. Student Information:

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

County: \_\_\_\_\_ Telephone: \_\_\_\_\_

Mailing Address (If Different From Home Address) \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Date Of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ Ethnicity: \_\_\_\_\_

## II. School District of Residence and Former School Information

School District of Residence: \_\_\_\_\_

Former School Information (Other Than Pre-School):

Public School  Charter School  Home School  Nonpublic School

Student Not Enrolled in School Preceding Enrollment in Charter School Because:

Entering Kindergarten  Re-Enrolling Dropout  Other \_\_\_\_\_

Grade Entering August 2017: \_\_\_\_\_ Previous Grade: \_\_\_\_\_

Name of Former School: \_\_\_\_\_

Address of Former School: \_\_\_\_\_

Withdraw Date from Previous School: \_\_\_\_\_

Was Your Child Receiving Special Education Services Based On An IEP? \_\_\_\_\_ Yes \_\_\_\_\_ No

If Yes, Do You Have The Child's Special Education Records (IEP)? \_\_\_\_\_ Yes \_\_\_\_\_ No

---

### III. Parent/Guardian Information:

Child Lives With: \_\_\_\_\_ Both Parents \_\_\_\_\_ Both Parents Alternately \_\_\_\_\_ Mother Only \_\_\_\_\_ Father Only  
\_\_\_\_\_ Legal Guardian \_\_\_\_\_ Foster Parents \_\_\_\_\_ Other Adult \_\_\_\_\_

Special Custodial Court Instructions:  
(If Yes, Please Provide a Copy of Court Order.) \_\_\_\_\_ Yes \_\_\_\_\_ No

---

#### Complete Parent/Guardian Name and Address Information As Applicable

Father's Name \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Home Telephone: \_\_\_\_\_ Work Telephone: \_\_\_\_\_  
Email: \_\_\_\_\_

Mother's Name \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Home Telephone: \_\_\_\_\_ Work Telephone: \_\_\_\_\_  
Email: \_\_\_\_\_

---

#### If The Student Is Not Living With Parents, Please Complete This Section.

\_\_\_\_\_ Guardian's Name Or \_\_\_\_\_ Foster Parent's Name Or \_\_\_\_\_ Other Adult Name  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Email: \_\_\_\_\_

---

My signature on this form indicates my decision to have my child attend the charter school named on page 1 of this form and signifies my request that appropriate school records be forwarded from the school district to the charter school. **My signature also certifies that my child is not, and will not be, enrolled in another public school, a nonpublic school or a private school at the same time he or she is enrolled in this charter school.**

**Signature of Parent/Guardian:** \_\_\_\_\_ **Date:** \_\_\_\_\_

---

### IV. To Be Completed By Charter School:

Verification of Date of Birth: \_\_\_\_\_ Birth Certificate \_\_\_\_\_ Other \_\_\_\_\_  
Proof of \_\_\_\_\_ Mortgage \_\_\_\_\_ Utility \_\_\_\_\_  
Residency \_\_\_\_\_ Statement \_\_\_\_\_ Lease \_\_\_\_\_ Bill \_\_\_\_\_ Other \_\_\_\_\_  
Official Enrollment Date: \_\_\_\_\_ Anticipated Date of Attendance: \_\_\_\_\_ Grade \_\_\_\_\_  
Student Is Entering: \_\_\_\_\_

**Signature of Charter School Representative:** \_\_\_\_\_