



THIS IS ONLY A REQUEST FOR A STUDENT APPLICATION. SUBMITTING THIS FORM TO CPE DOES NOT GUARANTEE ENROLLMENT.

CHILD'S INFORMATION

Date: _____ **Grade entering in fall 2017-2018. Please circle one.** K 1 2 3 4 5 6

Legal Last Name: _____ Legal First Name: _____

Street: _____ Apt/Lot#: _____

City: _____ State: _____ Zip: _____

For Kindergarten Enrollment: Will the student be 5 years old by September 1 of enrollment year?

Yes No

*****When a spot is offered, CPE will then request birthdate, records and other required registration information. If you answer NO to the statement regarding age 5, the student is not eligible for open enrollment unless the student fully meets the requirements for an exception to the age requirements listed in the Kindergarten Policy.**

PARENT/LEGAL GUARDIAN

First & Last Name: _____ Relationship to Student: _____

Street: _____ Apt/Lot#: _____

City: _____ State: _____ Zip: _____

Home Phone: (____) _____ Cell Phone: (____) _____

Email: _____

Check all that applies:

- Lives with student
- Address Same as Student

Best time to call:

- Morning
- Afternoon
- Evening

I hereby verify that the above information is true and correct to the best of my knowledge.

Parent Print Name

Parent Signature

Date