



# The Learning Community

## Re-enrollment Form 2021-2022

Date received: \_\_\_\_\_  
FOR OFFICE USE ONLY

Please return this form to the school by **Friday, February 26** to secure a space for your child next year. Thank you.

### To re-enroll a **CURRENT** student, complete the top portion of this form.

Current Student's Name: \_\_\_\_\_ Current Grade: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Please **check**  **one** of the following:

- Yes, I would like to re-enroll child for the 2021-2022 school year at the Learning Community.
- No, I do not want to re-enroll my child for the 2021-2022 school year at the Learning Community.

Parent Signature: \_\_\_\_\_

### To enroll a **SIBLING** of a current student, complete the bottom portion of this form.

**Siblings** of current, re-enrolling students will be given preference for acceptance into the school. The preference period will last through the month of February only.

Child's name: \_\_\_\_\_ Birth Date: \_\_\_\_\_ Male / Female (circle one)

Street address: \_\_\_\_\_ City: \_\_\_\_\_

Zip code: \_\_\_\_\_

Home phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

Entering grade: \_\_\_\_\_ School last attended: \_\_\_\_\_

Student lives with (circle all that apply): Mother / Father / Guardian / Other

Mother's name: \_\_\_\_\_

Father's name: \_\_\_\_\_

Guardian's name: \_\_\_\_\_

Ethnic background (optional):    American Indian    Asian / Pacific Islander / Filipino    Latino  
   Cape Verdean    African American    White    Other

Language(s) spoken at home: \_\_\_\_\_

Parent Signature: \_\_\_\_\_