



2017-2018 ENROLLMENT FORM

HOW TO SUBMIT THIS ENROLLMENT FORM:		*ENROLLMENT FORMS MUST BE RECEIVED BY MARCH 1, 2017	
SEND BY FAX or EMAIL		SEND BY MAIL or DROP-OFF	
(267) 687-7295 or EnrollKPEA@kippphiladelphia.org		KIPP Philadelphia Elementary Academy (KPEA) 2409 W. Westmoreland Street Philadelphia, PA 19129	
		ENROLL ONLINE http://www.kippphiladelphia.org/enroll or prod.schoolmint.net/signin/kippphiladelphia	
Today's Date <small>Month/Day/Year</small>	Student's Legal First Name	Student's Legal Last Name	Student's Date of Birth <small>Month/Day/Year</small>
Student's Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	Parent/Guardian Name <small>(First & Last Name of one person)</small>	Relationship to Student <small>(Examples: Mother, Father)</small>	
House Number & Street Address <small>(Example: 4780 Baltimore Avenue)</small>	Apt #	City	ZIP Code <small>(5 digits)</small>
Home Phone _____ - _____ - _____	Cell Phone _____ - _____ - _____	Work Phone _____ - _____ - _____	
E-mail Address <small>(Example: p.smith@gmail.com) This email address will be used to create a login on our Online Enrollment System, you can track/update your student's enrollment information and receive notifications from the schools.</small>		What is the best way to contact you? <small>(Please check one box)</small> <input type="checkbox"/> Mail <input type="checkbox"/> E-Mail <input type="checkbox"/> Home Phone <input type="checkbox"/> Cell Phone <input type="checkbox"/> Work Phone	
What grade is the student in <u>THIS</u> school year? <small>(Grade in school year 2016-2017)</small> <input type="checkbox"/> None <input type="checkbox"/> Pre-K <input type="checkbox"/> K <input type="checkbox"/> 1st <input type="checkbox"/> 2nd <input type="checkbox"/> 3rd <input type="checkbox"/> 4th	What grade will the student be in <u>NEXT</u> school year? <small>(Grade in school year 2017-2018)</small> <input type="checkbox"/> K <input type="checkbox"/> 1st <input type="checkbox"/> 2nd <input type="checkbox"/> 3rd <input type="checkbox"/> 4th	What school does the student currently attend?	
Does the student have a BROTHER or SISTER living in the same household who <u>currently attends</u> one of the following schools? <small>(Check all that apply and if yes, write the sibling's name, date of birth, and current grade (SY 2016-17) on the lines below.)</small> <input type="checkbox"/> KIPP Philadelphia Elementary Academy (K-4) <input type="checkbox"/> KIPP Philadelphia Charter School (5-8)			
Sibling 1	Sibling 2	Sibling 3	
_____ <small>(First and Last Name)</small>	_____ <small>(First and Last Name)</small>	_____ <small>(First and Last Name)</small>	
_____ <small>(Date of birth)</small>	_____ <small>(Date of birth)</small>	_____ <small>(Date of birth)</small>	
_____ <small>(Grade in SY2016-17)</small>	_____ <small>(Grade in SY2016-17)</small>	_____ <small>(Grade in SY2016-17)</small>	
Does the student have a BROTHER or SISTER living in the same household who is also <u>applying</u> to one of the following schools? <small>(Check all that apply. If yes, write the sibling's name, date of birth, and next year grade (SY 2017-18) on the lines below. Note: You <u>MUST</u> complete a separate Enrollment Form for each student.)</small> <input type="checkbox"/> KIPP Philadelphia Elementary Academy (K-4) <input type="checkbox"/> KIPP Philadelphia Charter School (5-8)			
Sibling 1	Sibling 2	Sibling 3	
_____ <small>(First and Last Name)</small>	_____ <small>(First and Last Name)</small>	_____ <small>(First and Last Name)</small>	
_____ <small>(Grade in SY 2017-18)</small>	_____ <small>(Grade in SY 2017-18)</small>	_____ <small>(Grade in SY 2017-18)</small>	
Is the student the child of a KPCS Alumni? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes , please write the KPCS Alumni parent's name and graduating year . <small>NOTE: An alumni is a former student who completed 8th grade at KPCS.</small> _____ <small>(Parent First and Last Name)</small> <small>(Graduated year)</small>			
How did you hear about us? <input type="checkbox"/> Press <input type="checkbox"/> TV <input type="checkbox"/> Mail <input type="checkbox"/> Website <input type="checkbox"/> Friend <input type="checkbox"/> Family <input type="checkbox"/> Teacher <input type="checkbox"/> Online Search <input type="checkbox"/> Other If Other, please describe: _____			
Accurately completing this Enrollment Form means that you will be contacted if your child is selected in our lottery. Turning in this form does NOT mean your child is automatically enrolled in KIPP Philadelphia Elementary Academy (KPEA). By signing and submitting this Enrollment Form, you agree that all information on this form is true and without fraud. If your child is enrolled by using false or misleading information on this form, it may result in the discharge of your child(ren) from the school.			
Parent/Guardian Signature: _____			Date: ____ / ____ / _____
<small>*Enrollment Forms MUST be submitted to KIPP Philadelphia Elementary Academy (KPEA) by MARCH 1, 2017. If by March 1, 2017 KPEA receives more Enrollment Forms than available seats, we will hold a randomized lottery in early March to determine admission. If fewer students apply than available seats, KPEA will continue to accept Enrollment Forms on a first-come, first-serve basis until all slots are filled.</small>			