



## 2017-2018 ENROLLMENT FORM

<b>HOW TO SUBMIT THIS ENROLLMENT FORM:</b>		<b>*ENROLLMENT FORMS MUST BE RECEIVED BY <u>MARCH 1, 2017</u></b>		
<b>SEND BY FAX or EMAIL</b>		<b>SEND BY MAIL or DROP-OFF</b>		<b>ENROLL ONLINE</b>
(215) 252-7792 or EnrollKWPEA@kippphiladelphia.org		KIPP West Philadelphia Elementary Academy 5900 Baltimore Avenue, Floor 1 Philadelphia, PA 19143		<a href="http://www.kippphiladelphia.org/enroll">www.kippphiladelphia.org/enroll</a> or <a href="http://prod.schoolmint.net/signin/kippphiladelphia">prod.schoolmint.net/signin/kippphiladelphia</a>
<b>Today's Date</b> <small>Month/Day/Year</small>	<b>Student's Legal First Name</b>	<b>Student's Legal Last Name</b>		<b>Student's Date of Birth</b> <small>Month/Day/Year</small>
<b>Student's Gender</b> <input type="checkbox"/> Male <input type="checkbox"/> Female	<b>Parent/Guardian Name</b> <small>(First &amp; Last Name of one person)</small>	<b>Relationship to Student</b> <small>(Examples: Mother, Father)</small>		
<b>House Number &amp; Street Address</b> <small>(Example: 4780 Baltimore Avenue)</small>		<b>Apt #</b>	<b>City</b>	<b>ZIP Code</b> <small>(5 digits)</small>
<b>Home Phone</b> _____ - _____		<b>Cell Phone</b> _____ - _____		<b>Work Phone</b> _____ - _____
<b>E-mail Address</b> <small>(Example: p.smith@gmail.com) This email address will be used to create a login on our Online Enrollment System, where you can track/update your student's enrollment information and receive notifications from the schools.</small>		<b>What is the best way to contact you?</b> <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		
<b>What grade is the student in THIS school year?</b> <small>(Grade in 2016-2017 school year)</small> <input type="checkbox"/> None <input type="checkbox"/> Pre-K <input type="checkbox"/> K	<b>What grade will the student be in NEXT school year?</b> <small>(Grade in 2017-2018 school year)</small> <input type="checkbox"/> K <input type="checkbox"/> 1st		<b>What school does the student currently attend?</b>	
<b>Does the student have a BROTHER or SISTER (who is living in the same household) who <u>currently attends</u> KWPEA?</b> <input type="checkbox"/> YES <input type="checkbox"/> NO				
<b>If yes, write the sibling's name, date of birth, and current grade (SY 2016-17) below</b>				
<b>Sibling 1</b> <small>(First and Last Name)</small> _____ <small>(Date of birth)</small> _____ <small>(Grade in SY2016-17)</small> _____		<b>Sibling 2</b> <small>(First and Last Name)</small> _____ <small>(Date of birth)</small> _____ <small>(Grade in SY2016-17)</small> _____		<b>Sibling 3</b> <small>(First and Last Name)</small> _____ <small>(Date of birth)</small> _____ <small>(First)</small> <small>(Grade in SY2016-17)</small> _____
<b>Does the student have a BROTHER or SISTER (who is living in the same household) who is also <u>applying</u> to KWPEA?</b> <input type="checkbox"/> YES <input type="checkbox"/> NO				
<b>If yes, what is the sibling's name and grade they are applying to for the 2017-2018 School Year?</b> <small>Note: You <u>MUST</u> complete a separate application for each student.</small>				
<b>Sibling 1</b> <small>(First and Last Name)</small> _____ <small>(Grade in 2017-18)</small> _____		<b>Sibling 2</b> <small>(First and Last Name)</small> _____ <small>(Grade in 2017-18)</small> _____		<b>Sibling 3</b> <small>(First and Last Name)</small> _____ <small>(Grade in 2017-18)</small> _____
<b>How did you hear about us?</b> <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: _____				
<b>Accurately completing this 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 West Philadelphia Elementary Academy (KWPEA). By signing and submitting this 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.</b>				
<b>Parent/Guardian Signature:</b> _____				<b>Date:</b> ____ / ____ / _____
<b>*Enrollment Forms MUST be submitted to KIPP West Philadelphia Elementary Academy (KWPEA) by March 1, 2017.</b> If by March 1, 2017 KWPEA 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, KWPEA will continue to accept Enrollment Forms on a first-come, first-serve basis until all slots are filled.				