



2018-2019 ENROLLMENT FORM

HOW TO SUBMIT THIS ENROLLMENT FORM: ***ENROLLMENT FORMS MUST BE RECEIVED BY MARCH 1, 2018**

SEND BY FAX or EMAIL	SEND BY MAIL or DROP-OFF	ENROLL ONLINE
-----------------------------	---------------------------------	----------------------

(215) 294-8707 or EnrollKWPP@kippphiladelphia.org	KIPP West Philadelphia Preparatory Charter School 5900 Baltimore Avenue, 2nd Floor Philadelphia, PA 19143	www.kippphiladelphia.org/enroll or prod.schoolmint.net/signin/kippphiladelphia
---	---	--

Today's Date <i>Month/Day/Year</i>	Student's Legal First Name	Student's Legal Last Name	Student's Date of Birth <i>Month/Day/Year</i>
--	-----------------------------------	----------------------------------	---

Student's Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	Parent/Guardian Name <i>(First & Last Name of one person)</i>	Relationship to Student <i>(Examples: Mother, Father)</i>
--	--	--

House Number & Street Address <i>(Example: 4780 Baltimore Avenue)</i>	Apt #	City	ZIP Code <i>(5 digits)</i>
--	--------------	-------------	-----------------------------------

Home Phone _____ - _____ - _____	Cell Phone _____ - _____ - _____	Work Phone _____ - _____ - _____
--	--	--

E-mail Address <i>(Example: p.smith@gmail.com)</i> 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.	What is the best way to contact you? <i>(Please check one box)</i> <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 THIS school year? <i>(Grade in 2017-2018 school year)</i> <input type="checkbox"/> 4th <input type="checkbox"/> 5th <input type="checkbox"/> 6th <input type="checkbox"/> 7th <input type="checkbox"/> 8th	What grade will the student be in NEXT school year? <i>(Grade in 2018-2019 school year)</i> <input type="checkbox"/> 5th <input type="checkbox"/> 6th <input type="checkbox"/> 7th <input type="checkbox"/> 8th	What school does the student currently attend?
--	--	---

Does the student have a BROTHER or SISTER (who is living in the same household) who currently attends KWPP? YES NO

If yes, write the sibling's name, date of birth, and current grade (SY 2017-18) below.

Sibling 1 _____ <i>(First and Last Name)</i> _____ <i>(Date of birth)</i> _____ <i>(Grade in SY2017-18)</i>	Sibling 2 _____ <i>(First and Last Name)</i> _____ <i>(Date of birth)</i> _____ <i>(Grade in SY2017-18)</i>	Sibling 3 _____ <i>(First and Last Name)</i> _____ <i>(Date of birth)</i> _____ <i>(Grade in SY2017-18)</i>
---	---	---

Does the student have a BROTHER or SISTER (who is living in the same household) who is also applying to KWPP? YES NO

If yes, what is the sibling's name and grade they are applying to for the 2018-2019 School Year?
 Note: You MUST complete a separate application for each student.

Sibling 1 _____ <i>(First and Last Name)</i> _____ <i>(Grade in 2018-19)</i>	Sibling 2 _____ <i>(First and Last Name)</i> _____ <i>(Grade in 2018-19)</i>	Sibling 3 _____ <i>(First and Last Name)</i> _____ <i>(Grade in 2018-19)</i>
--	--	--

Is the student the child of a KWPP Alumni? YES NO
 If **yes**, please write the **KWPP Alumni parent's name** and **graduated year**. **NOTE:** An alumni is a former student who completed 8th grade at KWPP.

_____ _____
(Parent First and Last Name) *(School attended and graduated year)*

How did you hear about us? Press TV Mail Website Friend Family Teacher Online Search Other
 If Other, please describe:

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 Preparatory Charter School (KWPP). 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.

Parent/Guardian Signature: _____ **Date:** ____ / ____ / _____

***Enrollment Forms MUST be submitted to KIPP West Philadelphia Preparatory Charter School (KWPP) by March 1, 2018.** If by March 1, 2018 KWPP 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, KWPP will continue to accept Enrollment Forms on a first-come, first-serve basis until all slots are filled.