

Texas School of the Arts

ENROLLMENT FORM FOR RETURNING STUDENTS

Due: February 15, 2019

Today's Date _____

For Grade _____

School Year _____

Texas School of the Arts, will not discriminate in admissions based on gender, national origin, ethnicity, religion, disability, academic ability, athletic ability or artistic ability or the district the child would otherwise attend.

Student Information (To be completed by Parent or Guardian)

Be assured that the information you provide will be kept confidential and will not be used inappropriately.

Student's Full Name _____ Age _____ Birthdate _____

Preferred First Name _____

Home Address _____

_____ Telephone (____) _____ - _____
City State Zip Please include area code with all phone numbers

County _____ Ethnicity _____ Sex: _____ Male _____ Female

Home School District _____

Neighborhood Public School child would attend _____

Family

Mother

Father

Name _____

Name _____

Address _____

Address _____

Home Telephone (____) _____

Home Telephone (____) _____

Work Telephone (____) _____

Work Telephone (____) _____

Cell Phone (____) _____

Cell Phone (____) _____

Fax _____ Email _____

Fax _____ Email _____

Parent Signature _____ Date _____

My child will return _____ will not return _____.