The Kindezi School

An Atlanta Public Charter School

Application for Enrollment Form

Kindergarten through 3rd grade

Academic Year 2010-2011

Student Name:_____Date:_____

Age:_____ Date of Birth:_____

Circle the grade in school during the 2010-2011 academic year: pre-k kindergarten first second third

Current District: _____Current School:_____

Name of Parent/Guardian: _____

Address:_____Appt #:_____City:_____Zip:_____

Primary Phone #:_____ Alternate Phone #:_____

E-mail address: (please print clearly in the boxes below)

Please Initial the following statements

- I understand that this application for enrollment does not guarantee admission and that if there are too many applicants there will be a random lottery to determine enrollment._____
- I understand that if my contact information changes, I must notify The Kindezi School staff or my enrollment application may be discarded._____
- I understand that at The Kindezi School my child will learn all core subjects in classes of 6 students for roughly 70% of instructional time and in classes of 24 students for 30% of instructional time._____

I hereby certify that I am the parent/guardian of _____, that all of the information I have provided
(child's name)
in this form is accurate and complete, and that my child lives within the Atlanta Public Schools district.

Signature of Parent/Guardian:_____Date:_____

We understand that choosing the right school for your child is a very important decision. If you have questions please contact Dean Leeper (Founding Principal) at **404-668-8534**. Or e-mail questions to deanleeper@kindezi.org.

Mail forms to:
98 Anderson Ave. NW
Atlanta GA 30314
or
Fax forms to:
(404) 671-4901

LOTTERY ENROLLMENT DEADLINE: April 3rd, 2010

If there are still slots available for students after April 3rd, they will be enrolled on a first-come, first-serve basis