



Highline Academy Charter School Lottery Application 2009-2010

This application form will be used to enter your child into Highline Academy's lottery for the 2009-2010 school year. All applications must be received by February 6th to be included in the lottery. Applications received after February 6th will be added to the waitlist by the date received. If you are not offered a seat for the 2009-2010 school year, your student will be moved up one grade and entered into the lottery following school year.

PLEASE WRITE CLEARLY AND FILL OUT COMPLETELY. USE A SEPARATE FORM FOR EACH STUDENT ARE ENROLLING

Student's First Name	Student's Middle Name	Student's Last Name	Date of Birth	Gender	Current Grade	Grade Applying For
				<input type="checkbox"/> M <input type="checkbox"/> F		

This student has previously been entered into a lottery or has previously been enrolled at Highline Academy Yes or No

This student has a sibling(s) already enrolled at Highline Academy in grade(s) _____

a sibling(s) also being entered into the 2009-2010 enrollment lottery in grade(s) _____ (separate form(s) required)

Name of Mother/Guardian: _____

Address: _____ City: _____ Zip: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ E-Mail: _____

Name of Father/Guardian: _____

Address (if different from above): _____ City: _____ Zip: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ E-Mail: _____

Child resides with: Mother Father Both Other (explain) _____

Name of Home School: _____ Home District: _____ Current School: _____

How did you hear about Highline Academy?

- Word of mouth – If referred by a current Highline family, please name: _____
- Direct Mailing Website Poster – Location where you saw the poster: _____
- Ad in local publication – Please list the publication where you saw the advertisement: _____
- Denver Public Schools Colorado League of Charter Schools Other: _____

The following demographic data will not be used to determine admissions, and will be kept strictly confidential. We track demographic data only as a way to evaluate if our outreach strategies are reaching diverse populations.

- What is the primary language spoken in your home? _____
- Do you anticipate that your child will need English as a second language instruction? Yes No
- What is your child's ethnicity? African - American Asian - American Caucasian Eastern European
- Hispanic Multi-Racial Native American Other: _____
- If your child previously attended public school, did s/he qualify for the federal free and reduced lunch program? Yes No

I am interested in sending my child to Highline Academy as indicated above. I am aware that completing this form in no way guarantees my child's enrollment in this school. I understand it is my responsibility to keep Highline Academy updated if my contact information changes. I also understand that if this form is not complete or is not legible; my child's name may not be added.

Parent/Guardian Signature

Date

Please mail or fax this form to:
 Highline Academy 7808 Cherry Creek Drive South, Suite 304, Denver, CO 80231
 Ph: 720-449-0317; Fax: 720-449-0328
 Email: info@highlineacademy.org; Web: www.HighlineAcademy.org