



## 2016-2017 Student Pre-Application Form

Please note: This form is valid for the 2016-2017 school year; you must submit a new application for the 2017-2018 year. For more information, call or email us: (503) 925-8007/office@sherwoodcharterschool.org. Mail or hand-deliver this completed form to: PO Box 1342, 23264 SW Main Street, Sherwood, OR 97140, or fax it to us at: (503) 925-8172.

Date: \_\_\_\_\_ Primary Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

Student's Legal Name: \_\_\_\_\_  
Last First Middle Preferred

Student's Address: \_\_\_\_\_  
Street Apt. #  
City State Zip

Date of Birth: \_\_\_\_\_ Grade in 2016-2017 School Year: \_\_\_\_\_

Is this student a sibling of a currently enrolled SCS student? Please indicate:  NO  YES

If yes, please provide name and current grade of enrolled student: \_\_\_\_\_

Student's current school: \_\_\_\_\_

What school district do you live in based on your address? \_\_\_\_\_

What county do you live in based on your address? \_\_\_\_\_

Student is living with (please circle) Mother Father Both Other: \_\_\_\_\_  
Designate

Mother/Guardian's Name: \_\_\_\_\_

Address (If different from student): \_\_\_\_\_  
Street Apt. #  
City State Zip

Email: \_\_\_\_\_ Home Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

Cell Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_ Work Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

Father/Guardian's Name: \_\_\_\_\_

Address (If different from student): \_\_\_\_\_  
Street Apt. #  
City State Zip

Email: \_\_\_\_\_ Home Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

Cell Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_ Work Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

Sherwood Charter School does not limit student enrollment based on race, religion, sex, sexual orientation, ethnicity, national origin, disability, the terms of an individualized education program, income level, proficiency in the English language or athletic ability.

Office use only: Date Rcvd: _____ Time: _____		SS <input type="checkbox"/>	Grade <input type="checkbox"/>	Email: Ltr <input type="checkbox"/>	Proc <input type="checkbox"/>	Dstrct: IN	OUT
Sib Enrolled <input type="checkbox"/>	Grade: _____	Sib Enrolled <input type="checkbox"/>	Grade: _____	Sib Enrolled <input type="checkbox"/>	Grade: _____		
Sib Applying <input type="checkbox"/>	Grade: _____	Sib Applying <input type="checkbox"/>	Grade: _____	Sib Applying <input type="checkbox"/>	Grade: _____		
Waitlist Contact- Date: _____	Time: _____	Phone: Prsn	Msg	Email:	Accept	Decline	