

Student Application Form for School

1. Student Information

- Full Name: _____
- Date of Birth: _____
- Gender: Male Female Other
- Home Address: _____
- City: _____
- State: _____
- Zip Code: _____
- Parent/Guardian Name: _____
- Parent/Guardian Phone Number: _____
- Parent/Guardian Email: _____

2. Previous Education

- Last School Attended: _____
- Grade Completed: _____
- Academic Achievements: _____

3. Enrollment Details

- Desired Grade Level: _____
- Preferred Start Date: _____

4. Activities and Interests

- Sports: _____
- Arts: _____
- Clubs: _____

5. Emergency Contact Information

Name	Relationship	Phone Number	Email Address
_____	_____	_____	_____
_____	_____	_____	_____

6. Medical Information

- Allergies: _____
- Medications: _____
- Doctor's Name: _____
- Doctor's Phone Number: _____

7. Agreement and Signature

- I confirm that the information provided is accurate.
- Parent/Guardian Signature: _____
- Date: _____