

FOR OFFICE USE ONLY			
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___	SP	___	HD

ENROLLMENT APPLICATION: SCHOOL YEAR 2011-2012

PLEASE PRINT

STUDENT INFORMATION		
LEGAL NAME (LAST, FIRST, MIDDLE)		MALE OR FEMALE
STREET ADDRESS	CITY	ZIP CODE
HOME TELEPHONE NUMBER + AREA CODE	E-MAIL ADDRESS	GRADE LEVEL IN FALL 2011
STUDENT LIVES WITH: MOTHER, FATHER, BOTH, OTHER	PLACE OF BIRTH (CITY, STATE, COUNTRY)	DATE OF BIRTH (MONTH/DAY/YEAR)
PREVIOUS SCHOOL	DISTRICT OF RESIDENCE	NAMES OF OTHER SIBLINGS APPLYING

PARENT / LEGAL GUARDIAN 1		
NAME (LAST, FIRST, MIDDLE)		RELATIONSHIP TO STUDENT
STREET ADDRESS	CITY	ZIP CODE
HOME TELEPHONE NUMBER + AREA CODE	WORK TELEPHONE NUMBER + AREA CODE	CELL PHONE + AREA CODE
EMAIL ADDRESS	EMPLOYER	OCCUPATION

PARENT / LEGAL GUARDIAN 2		
NAME (LAST, FIRST, MIDDLE)		RELATIONSHIP TO STUDENT
STREET ADDRESS	CITY	ZIP CODE
HOME TELEPHONE NUMBER + AREA CODE	WORK TELEPHONE NUMBER + AREA CODE	CELL PHONE + AREA CODE
EMAIL ADDRESS	EMPLOYER	OCCUPATION



albert einstein academy
Letters, Arts and Sciences

ENROLLMENT POLICY AND PROCEDURES

ENROLLMENT POLICY

THE ACADEMY WILL BE NON-SECTARIAN IN ITS ADMISSIONS, PROGRAMS, POLICIES, EMPLOYMENT PRACTICES, AND ALL OTHER OPERATIONS, SHALL NOT CHARGE TUITION, AND SHALL NOT DISCRIMINATE AGAINST ANY STUDENT OR STAFF MEMBER ON THE BASIS OF RACE, ETHNICITY, NATIONAL ORIGIN, OR DISABILITY.

REGISTRATION PACKET

SUBMISSION OF THIS APPLICATION DOES NOT GUARANTEE ENROLLMENT TO THE ALBERT EINSTEIN ACADEMY OF LETTERS, ARTS, AND SCIENCES (THE AEA). IF YOUR CHILD IS ACCEPTED INTO THE ACADEMY, ADDITIONAL FORMS WILL BE SENT TO YOU AND MUST BE COMPLETED PRIOR TO ADMISSION. THESE FORMS WILL INCLUDE, BUT ARE NOT LIMITED TO THE FOLLOWING:

- 1. REQUEST FOR STUDENT RECORDS*
- 2. COPIES OF MOST RECENT REPORT CARD, PROGRESS REPORT, AND TESTING RESULTS*
- 3. COPY OF THE STUDENT'S BIRTH CERTIFICATE*
- 4. PROOFS OF RESIDENCY: COPY OF PARENT/GUARDIAN DRIVER'S LICENSE, COPY OF PROPERTY TAX BILL, DEED OR RENTAL AGREEMENT, UTILITY SHOWING RESIDENCY ADDRESS.*
- 5. REGISTRATION HEALTH REQUIREMENTS*

PUBLIC LOTTERY

IF THE NUMBER OF APPLICANTS EXCEEDS THE CAPACITY OF THE SCHOOL, OR A PARTICULAR GRADE LEVEL, ADMISSION TO THE ACADEMY WILL BE DETERMINED BY PUBLIC LOTTERY. ENROLLMENT PREFERENCE FOR THE AVAILABLE SPACE WILL BE GIVEN AS FOLLOWS: FOUNDING FAMILIES, CURRENT STUDENTS, SIBLINGS OF CURRENT STUDENTS, HART DISTRICT RESIDENTS, AND NEW FAMILIES. FOLLOWING THE LOTTERY, FAMILIES WILL BE NOTIFIED OF THEIR ENROLLMENT STATUS. FAMILIES WHO ARE ACCEPTED MUST ACCEPT, OR DECLINE ENROLLMENT, BY THE SPECIFIED DATE OR ENROLLMENT WILL BE FORFEITED. STUDENTS WHO ARE PLACED ON THE WAITING LIST WILL BE NOTIFIED WHEN SPACE BECOMES AVAILABLE.

PARENT / GUARDIAN SIGNATURE

I/WE HAVE REVIEWED THE THREE PAGE DOCUMENT AND TO THE BEST OF MY/OUR KNOWLEDGE, THE INFORMATION THAT HAS BEEN PROVIDED IN THIS APPLICATION IS TRUE AND COMPLETE. I UNDERSTAND THAT GIVING FALSE, OR INCOMPLETE, INFORMATION REQUESTED HEREIN WILL RISK OR DELAY IN THE PROCESSING OF THE ABOVE NAMED STUDENT APPLICATION AND MAY JEOPARDIZE ENROLLMENT AT ANYTIME IN THE ALBERT EINSTEIN ACADEMY. THE UNDERSIGNED DECLARES UNDER PENALTY OF PERJURY THAT THEY ARE THE PARENTS OR LEGAL GUARDIANS OF THE ABOVE-NAMED STUDENT.

NAME OF PARENT / GUARDIAN (PRINTED):	RELATIONSHIP TO STUDENT:
SIGNATURE OF PARENT / GUARDIAN:	DATE

APPLICATION SUBMISSION

FOLLOWING THE COMPLETION OF THIS APPLICATION, PLEASE MAIL TO THE FOLLOWING ADDRESS:

AEA ADMISSIONS
ALBERT EINSTEIN ACADEMY
28141 KELLY JOHNSON PARKWAY
SANTA CLARITA, CA 91355

E-MAIL

APPLICATION@EALAS.ORG