

Englewood on the Palisades Charter School

Application 2024-2025

Student's Name: _____
(Last) (First) (Middle)

Gender: _____ Age: _____ Date of Birth: ____/____/____

Grade this Student attends in the current 2023-2024 School Year: _____

For which Grade is this Student applying in the 2024-2025 School year? _____

Address: _____
(Number/Name of Street) (Apt. #) (City/State) (Zip Code)

Mailing Address: _____
(If different from above) (P.O. Box # or Number/Name of Street) (City/State) (Zip Code)

Home Phone #: _____ Alternate Phone #: _____

FAMILY INFORMATION:

Check One:

☐ Mother ☐ Father ☐ Step-Parent ☐ Legal Guardian

Check One:

☐ Mother ☐ Father ☐ Step-Parent ☐ Legal Guardian

Full Name: _____

Full Name: _____

Home Phone: _____

Home Phone: _____

Work Phone: _____

Work Phone: _____

Cell Phone: _____

Cell Phone: _____

Email Address: _____

Email Address: _____

Sibling Policy: Preference may be given to siblings of enrolled students, depending on space available (N.J.A 36A-8c). Please list any siblings (Brothers/Sisters applying for, or currently enrolled at, Englewood on the Palisades Charter School.

Sibling 1 Name: _____ Grade in 2024-2025: _____

Sibling 2 Name: _____ Grade in 2024-2025: _____

Sibling 3 Name: _____ Grade in 2024-2025: _____

(Signature of Parent/Guardian)

_____/_____/_____
(Date)

Charter Schools are free, open-enrollment public schools that are required by law to serve all students. Charter school shall be open to all students on a space available basis and shall not discriminate in its admission policies or practices on the basis of intellectual or athletic ability, measures of achievement or aptitude, status as a handicapped person, proficiency in the English language, or any other basis that would be illegal if used by a school district.