

TRACY LEARNING CENTER TRANSITIONAL KINDERGARTEN APPLICATION



Transitional Kindergarten is for students born between September 2 and December 2. Students that opted out for Kindergarten born before September 2 will be enrolled on individual basis.

The Tracy Learning Center admits students of any race, color, or ethnic origin, and from any geographical region, to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. The Tracy Learning Center does

Not discriminate on the basis of race, color, or ethnic origin in the administration of its educational policies or in other school administered programs.

Student Information (Please Print)

_____ | _____ | _____ | _____
 Student's Legal Last Name Student's Legal First Name MI Gender

____/____/____ | _____ | _____ | _____
 Birth Date Birth City Birth State Birth Country

_____ | _____ @ _____ | ____/____/____
 Current School Attended Student e-mail Address Date of Application

Parent/Guardian Information (Please Print)

_____ | _____ | _____
 Parent/Guardian #1 Name Home Phone Number Cellular Phone Number

_____ | _____ @ _____
 Relationship to Student e-mail Address

_____ | _____ | _____ | _____
 Home Address City State Zip Code

_____ | _____ | _____ | _____
 Parent/Guardian #2 Name Home Phone Number Cellular Phone Number

_____ | _____ @ _____
 Relationship to Student e-mail Address

_____ | _____ | _____ | _____
 Home Address City State Zip Code

Please list ALL of the students' siblings that currently attend Primary Charter, Discovery Charter, and/or Millennium High School

<u>Name</u>	<u>Current School/Grade</u>	<u>Name</u>	<u>Current School/Grade</u>
_____	_____	_____	_____
_____	_____	_____	_____

Has your child ever been referred and/or evaluated to receive special education services such as Speech, RSP, SDC, or a 504 Plan? No Yes

I certify that all information provided in this application is true, accurate, and complete. I understand that if my child is enrolled, my having given false or misleading information in of my application form or having omitted significant information may result in the discharge of my child from the school.

_____ | ____/____/____
 Parent/Guardian Signature Date