

Request for Student Enrollment - School Year 2020-2021



1601 L. St. San Miguel, CA 93451 ~ Phone (805) 467-2095 ~ Fax: (805) 467-2098
 Email: info@almondacres.com

Student Last First Middle _____ Grade Entering in 2020/2021 _____

Date of birth (MM/DD/YYYY) _____ Age _____ Current School Attending _____

Home Address _____ Primary Phone _____

City/Zip Code _____ Alternate Phone _____

Mailing Address (if different from above) _____ Primary Email _____

Father/Guardian Name (Print) _____ Mother/Guardian Name (Print) _____

o Additional sibling(s) applying: Name & Grade(s) entering _____

Name of public school child would attend based on home address _____

Parent/Guardian Signature _____ Date _____

Check all that apply:

<input type="checkbox"/>	Prefer At Home Academy (homeschool-style program)	<input type="checkbox"/>	Resident of SMJUSD
<input type="checkbox"/>	Sibling of existing student Name of sibling: _____	<input type="checkbox"/>	Special consideration (see below)
<input type="checkbox"/>	Child of founder or employee	<input type="checkbox"/>	Public School Choice

** Special consideration is granted only when necessary for Almond Acres Charter Academy to comply with Title VI of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, Section 504 of the Rehabilitation Act of 1973, the Equal Protection Clause of the Constitution, or applicable State law. Special consideration options will be determined on an annual basis by the Almond Acres Charter Academy Board.*

Completion of this form indicates a request to enroll a student at AACAC, but does not guarantee admission. Capacity is a function of the number of openings available in the requested grade level. If the requested grade level is oversubscribed, a public, random lottery will be conducted **to determine admission to AACAC.**

Scan and email to: info@almondacres.com Fax: (805) 467-2098

****Kindergarten applicants must be 5 years old by September 1, 2020****

For Office use Only:

Date Rec'd: _____ Grade Level: _____ Lottery Year: _____

Admission Preference Category: _____ Lottery Number: _____

Notes: _____ Sibling: _____

Lotteried: Yes ___ No ___ In attendance area: ___ Out of District: ___