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Application for Enrollment & Waitlist 2012-2013

Applicant Last Name: _____ First _____
 (Print clearly)

Current Grade: (circle one): Pre-K K 1 2 3 4 5 September 2012 Grade _____

Date of Birth _____ Male [] Female [] School District _____

Does student have a sibling who presently attends Bronx Arts grades K-5th? If yes, **STOP** and fill out a **sibling application**. (You will be required to provide proof of family relationship)

Parent/Guardian Name: _____

Address _____ Apt # _____

City _____ State _____ Zip Code _____

Telephone #: Home _____ Work _____

Cell _____ Alternate _____

Current School & Address

Was this school __Private (not affiliated with religion) __Public __Catholic __Other

Will you be applying for other siblings? Yes [] No []
 (If yes, please attach a separate application for each sibling.)

Siblings First Name _____ September Grade 2012 _____

How did you hear about Bronx Arts?

_____Web _____News Article _____Word of Mouth _____Flyer _____Info Session

I agree that the school records of the student for whom I am submitting this application may be used for studies of this charter school. In these studies, only aggregate outcomes, not individual students' outcomes, will be reported.

Parent Signature _____ Date _____

For Office Use Only: Date Received: _____ Date Logged: _____ Initial: _____