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| **life leadership logo** | **Lincoln Leadership Academy****Charter School** | Address: 1414 E. Cedar StreetAllentown, PA 18109Phone. 484-860-3300Fax: 484-860-3307[www.llacslv.com](http://www.llacslv.com) |

**Inquiry Form**

*Please print clearly with blue or black ink.*

Please provide the following information if you wish to APPLY FOR grades K-12 for the 2019-2020 school year.

Your inquiry means that you are applying to place your child in our school. Please understand that the Inquiry does not mean that your child has been accepted, or rejected at this time. Until you receive a letter saying that your child has been accepted, you should continue with your plans to enroll your child at his/her local school.

If you have younger children that may attend the school in future years, please include that information in the section below.

***PLEASE PRINT CLEARLY***

Parent/Guardian Information:

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Full Name of Parent/Guardian: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Apt #: \_\_\_\_\_\_\_\_\_\_ House: \_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_County: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State: \_\_\_\_\_\_\_\_\_\_\_\_Zip Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Phone: (\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone: (\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_E-mail address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student Information:

Full Name of Student Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_ Grade in 2013-2014: \_\_\_\_\_\_\_\_\_\_\_Dominant Language: \_\_\_\_\_\_\_\_\_\_

Is the address and phone number the same as parent/guardian? ❑Yes ❑No If No, complete the following:

Street: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Apt #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_County: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State: \_\_\_\_\_\_\_\_\_\_\_\_Zip Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Legal School District of Residence:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School currently attending \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Public school you would attend in the 2019-2020 school year: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Any children attending Lincoln now? If yes, please complete this information. No? Leave blank.

Full Name of Child Date of Birth Grade in 2018-2019 Dominant Language

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Comments or Questions: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**OFFICE USE ONLY**

Date Received \_\_\_\_\_\_\_\_Staff Initial \_\_\_\_\_Date Entered \_\_\_\_\_\_\_Lottery Number \_\_\_\_\_\_\_\_\_\_

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***Favor de escribir las letras claramente***

Complete esta solicitud si usted desea ingresar a sus hijos de grados K-12, para el año escolar 2019-2020. Es importante que usted comprenda que esta solicitud no quiere decir que su hijo/hija ha sido aceptado en nuestra escuela. Hasta el momento que usted reciba una carta confirmando que su hijo/hija ha sido aceptado, por favor siga con sus planes de ingresar a su niño en la escuela local que le corresponde.

Si usted tiene niños pequeños que puedan asistir a Lincoln en los próximos años, por favor incluya esta información en la sección de abajo.

Informacion de Padre/Tutor:

Fecha \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Nombre y apellido de padre/tutor\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dirección: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Calle Ciudad Estado Código postal

Teléfono: ( \_\_\_\_)\_\_\_\_\_\_\_\_\_\_Celular: (\_\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_ Trabajo\_\_\_\_\_\_\_\_\_Correo Electronico\_\_\_\_\_\_\_\_\_\_

Informacion de Estudiante:

Nombre y Apellido del Estudiante: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Fecha de nacimiento: \_\_\_\_\_\_\_\_\_\_\_\_ Grado en 2018-2019: \_\_\_\_\_\_\_\_\_\_\_ Lenguaje Dominante :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Es la dirección y número de teléfono el mismo del Padre/Tutor? ❑ Si ❑ No Si no, complete lo siguiente:

Calle: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Apt #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Ciudad: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Condado: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Estado: \_\_\_\_\_\_\_\_\_\_\_\_Codigo postal\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Distrito Escolar que corresponde a su residencia: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Escuela del niño presentemente: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Escuela que asistió en su último grado: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

La escuela pública que asistirá en el año escolar 2018-2019:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Nombre (s) de niño(s) que presentemente asisten a Lincoln (si es aplicable)**

Nombre completo del niño Fecha de nacimiento Grado en 2018-2019 Lengua dominante

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Preguntas/comentarios: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Date Received \_\_\_\_\_\_\_\_Staff Initial \_\_\_\_\_Date Entered \_\_\_\_\_\_\_Lottery Number \_\_\_\_\_\_\_\_\_\_