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

**Open Enrollment**

*Please read and answer all of the questions.*

Your Inquiry Form means that you are interested in placing your child at Lincoln (grades K-12) for the 2020-2021 school year. Until you receive a letter saying that your child has been accepted at Lincoln, please 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 #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Home Phone:(\_\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone: (\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student Information:

Full Name of Student Pre-enrolling: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_ Grade in 2019-2020: \_\_\_\_\_\_\_\_\_\_\_

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

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

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

Present School District of Residence:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School currently attending (2019-2020) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Public school your child would attend in the 2020-2021 school year: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you presently have a child/children at Lincoln? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please provide their information.

Name of Child: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_ Grade in 2019-2020 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Child: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_ Grade in 2019-2020: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

.

Do you have other children who have applied or want to come to Lincoln? YES: \_\_\_\_\_\_ NO: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PRINT, CERTIFY and SUBMIT: I Certify that I am submitting this Inquiry Form with the intent to send my child to Lincoln Leadership Academy Charter School for the 2020-2021 school year.**

Parent Print: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**OFFICE USE ONLY**

Date Received \_\_\_\_\_\_\_\_Staff Initial \_\_\_\_\_ Date Entered \_\_\_\_\_\_\_Lottery No: \_\_\_\_\_\_\_\_\_\_

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

Por favor, complete esta solicitud si usted tienes interés de ingresar a sus hijos de grados K-12, para el año escolar 2020-2021. Hasta que 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. Favor de incluir información de otros hijos que tengan interés de asistir a nuestra escuela también.

***FAVOR DE ESCRIBIR LAS LETRAS CLARAMENTE***

Informacion de Padre/Tutor:

Fecha \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Correo electrónico \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

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

 Calle Ciudad Estado Código postal

Teléfono: ( \_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Celular: (\_\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Trabajo:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Informacion de Estudiante:

Nombre y apellido del estudiante: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Fecha de nacimiento: \_\_\_\_\_\_\_\_\_\_\_\_ Grado este año (2019-2020): \_\_\_\_\_\_\_\_\_\_\_

Es la dirección y numero de teléfono el mismo del Padre/Tutor? ❑ Si ❑ No Si no, necesitamos saber:

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

Ciudad: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Condado: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Estado: \_\_\_\_\_\_\_\_\_\_\_\_ Código postal\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Corriente Escuela del niño:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

La escuela que asistirá en el año escolar 2019-2020:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Tiene hijos ingresados en Lincoln (si es aplicable) Si \_\_\_ No \_\_\_

Nombre completo del niño: Fecha de Nacimiento: Nombre Completo del Niño Fecha de Nacimiento

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

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

Otros Hijos que Talvez Vengan a Lincoln: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Nombre Grado Edad

**Con mi nombre/firma, yo verifico que con esta esta solicitud mi intención es ingresar mi hijo/hija a Lincoln Leadership Academy Charter School (2020-2021).**

Nombre/Firma: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fecha: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

**Uso Oficial**

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