

Official Ánimo Venice Student Application

1 Student Information: (please print clearly)

Student's Legal Name:

<small>First Name</small>	<small>Middle Name</small>	<small>Last Name</small>	
Date of Birth:	Gender:	Current Grade Level: (circle one)	Current School Attending:
MM / DD / YYYY	<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12	Name of School City

2 Family Information (Primary Residence):

Street Address:

<small>Address</small>	<small>City</small>	<small>State</small>	<small>Zip Code</small>
Home Phone Number:	Student Lives with: (mark one)		
()	<input type="checkbox"/> both parents <input type="checkbox"/> father <input type="checkbox"/> mother <input type="checkbox"/> guardian		

3 Family Contact Information:

Father/Guardian Information:

Home Phone Number:	Work Phone Number:
()	()
Cell Phone Number:	Email Address:
()	

Mother/Guardian Information:

Home Phone Number:	Work Phone Number:
()	()
Cell Phone Number:	Email Address:
()	

4 Does the Student have a sibling attending a Green Dot School?: Yes No

If Yes, please list below:

Sibling Last Name: Sibling First Name: Name of Green Dot School: Currently Attending?: Y/N Year Graduated: Grade:

5 How did you hear about Green Dot Public Schools?: (mark all that apply)

- | | | |
|---|---|--|
| <input type="checkbox"/> Friend, currently enrolled at school | <input type="checkbox"/> Friend, not currently enrolled at school | <input type="checkbox"/> Advertisement (TV, newspaper, etc.) |
| <input type="checkbox"/> School Employee | <input type="checkbox"/> Website | <input type="checkbox"/> Mailer |
| <input type="checkbox"/> Other (please specify) | <input type="checkbox"/> Flier | <input type="checkbox"/> Counselor |

6 Signature: Green Dot Public Schools does not discriminate on the basis of ethnicity, national origin, age, citizenship, gender, sexual orientation, disability, religious or political beliefs in administration of its educational policies, admission policies, and other school administered programs.

I am meaningfully interested in enrolling my student at this Green Dot Public School.

Parent or Guardian Signature	Date MM / DD / YYYY
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Office Use Only Received by:		Date Stamp:	
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