

## **Portsmouth STEM Academy**



TUDENT IFORMATIO	ON				PP-	cation Date		
	First Name	Mido	Middle Name		Last Name			
		Gender Identification:	M F	Other	Prefer n	ot to answer		
	Date of Birth	_						
OME ODRESS								
DKESS	Street	City	State	Zip		Phone		
ADE CHII	LD WILL ENTER:	SOCIA	L SECURIT	Y NUMBER				
AIL ADDI	RESS:							
s your chi	ld ever been evaluate	d for Special Education	services?		Y	N		
es your ch	ild have an IEP or 50			Y	$\mathbf{N}$			
l your chil	ld miss more than 10	days in the current or pr	revious scho	ol year?	$\mathbf{Y}$	N		
as your chi	ild suspended during	the current or previous	school year?	•	Y	N		
REVIOUS CHOOLS	Please list all previou							
	School	Address				Dates of Attendance		
	School	Address				Dates of Attendance		
	School	Address				Dates of Attendance		
HOOL DIS	STRICT IN WHICH C	USTODIAL PARENT RES	IDES:					
	RACE/ ETHNIC CA	ATEGORIES: Check all th	at apply					
					•	or Latino		
	Asian				-	panic or Latino		
	Black or African				White			
	Native Hawaiia	n or Other Pacific Islander			Other			
	CUSTODIAL PARENT/GUARDIAN			OTHE	R PARE	NT/GUARDIAN		
	Name			Name				
	Home			Home				
	Preferred Phone:			Preferred I	Phone:			
		Preferred Phone:			Preferred Phone:Additional Phone:			



## **Portsmouth STEM Academy**



The Portsmouth STEM Academy does not and will not discriminate against students of any race, color, religion, ethnic origin, gender, gender expression or sexual orientation, in any of its rights, privileges, programs and activities.

ase return the following with this application:					
	\$50 application fee (refundable upon admission)				
	Birth certificate				
	Social Security card				
	Custodial parent proof of address (Utility bill or Lease Agreement)				
	Current and previous grade report				
	Shot records				
	If applicable, custodial papers				
	If applicable, current IEP and ETR				
	If applicable, scholarship paperwork				
	If applicable, Medication Administration Form				
	Authorized Child Release				
	Emergency Medical Form				
	Signed Admission Policy				
	Signed Release of Records				

☐ Financial Form