

Phoenix Community High School Application for Admission

Please print or write clearly.	Today	Today's Date		
Last Name	First Name			
Address			·	
Street/PO Box	City	State	Zip	
Date of Birth Age	Phone	Marital S	Status	
Last School Attended	Drop	Drop date from last school		
Social Security Number	Numb	Number of Dependents		
Receiving Social Services Yes	No If yes, which cou	nty		
Name of Parent/Guardian				
Relationship				
Address Street/PO Box	City	State	Zip	
Home Phone	Work Phone			
Cell Phone				
Parent/Guardian's Employer				

STUDENT EMPLOYMENT INFORMATION

Driver's License Number					
Address of Employer					
Phone	Work Status/Hours				
MEDICAL INFORMATION					
Family Doctor					
Medications Used					
Allergies					
Other Information					

QUESTIONAIRE

Please give careful thought to these questions. Remember this is not an easier way, it is another way.

1. Sch	What is the reason(s) you are applying for enrollment at Phoenix Community High nool at this time?
<u>a. V</u>	What would you like to learn more about?
<u>b.</u>	What are your goals?
<u>C.</u> 1	Are there courses you would like to take now to help you achieve those goals?
2.	Please explain why you left or wish to leave your home school?
3. lear	What interests or hobbies do you have? What courses would you like to take to help you n more about these interests?
4.	Are you living on your own? If yes, how do you support yourself?
5.	What are your plans after high school?
6.	Do you have any questions about our school policies?

7.	Will you be eating hot lunch	h, brining your own lunch or leaving campus fo	or lunch?
8.	Do you have your own trans	sportation to school or will you be riding the bu	ıs?
9. High	_	rticipating in any extra curricular activities at N If so, which ones?	
Com	ments:		
Stude	ent Signature	Date	
Paren	nt/Guardian Signature	Date	