

18-19 School Year

STUDENT ID # _____

DATE _____

**CHRISTOPHER COLUMBUS CHARTER SCHOOL
INTENT TO REGISTER**

Student Information (Please print)

Name _____

Last

First

Middle

Address _____

City _____ State _____ Zip Code _____

Phone () _____

Cell Phone () _____

Grade Entering : K 1 2 3 4 5 6 7 8 (2018-2019)

E-Mail Address _____ Confirm E-mail address _____

Gender: Male / Female

Date of Birth _____

KINDERGARTEN APPLICANTS

KINDERGARTEN CHILD MUST BE 5 BY SEPTEMBER 1, 2018

PRE-K YOUR CHILD CURRENTLY ATTENDS _____

Sibling Information

Does the student have a sibling currently enrolled at CCCS?

Sibling is defined as a brother or sister

If so, Sibling's name _____

Grade in 17-18 _____

Attachment A -Parental Registration Statement

Christopher Columbus Charter School

Student Name _____

Date of Birth _____ Grade _____

Parent or Guardian Name _____

Address _____

Telephone Number _____

Pennsylvania School Code §13-1304-A states in part “Prior to admission to any school entity, the parent, guardian or other person having control or charge of a student shall, upon registration provide a sworn statement or affirmation stating whether the pupil was previously or is presently suspended or expelled from any public or private school of this Commonwealth or any other state for an action of offense involving a weapon, alcohol or drugs, or for the willful infliction of injury to another person or for any act of violence committed on school property.”

Please complete the following:

I hereby swear or affirm that my child was _____ was not _____ previously suspended or expelled , or is _____ is not _____ presently suspended or expelled from any public or private school of this Commonwealth or any other state for an act or offense involving weapons, alcohol or drugs, or for the willful infliction of injury to another person or for any act of violence committed on school property. I make this statement subject to the penalties of 24 P.S. §13-1304-A(b) and 18 Pa. C.S.A. §4904, relating to unsworn falsification to authorities, and the facts contained herein are true and correct to the best of my knowledge, information and belief.

If this student has been or is presently suspended or expelled from another school, please complete:

Name of the school from which student was suspended or expelled:

Dates of suspension or expulsion:

(Please provide additional schools and dates of expulsion or suspension on back of this sheet.)

Reason for suspension/expulsion (optional) _____

(Signature of Parent or Guardian)

(Date)