

# The Comenius School

P.O. Box 1601 Franklin, TN 37065

## Application for Summer School Enrollment 2017

### Fees:

Summer School (All Grades): \$125.00

### Child's Information:

Last Name \_\_\_\_\_  
First Name \_\_\_\_\_  
Middle Name \_\_\_\_\_  
Nickname \_\_\_\_\_  
Birthdate \_\_\_\_\_ Age \_\_\_\_\_  
Social Security # \_\_\_\_\_

### Address:

Street/Box \_\_\_\_\_  
City \_\_\_\_\_  
State \_\_\_\_\_  
Zip \_\_\_\_\_  
County \_\_\_\_\_  
Home Phone (\_\_\_\_) \_\_\_\_\_

Grade: K 1 2 3 4 5 6 7 8 9 10 11 12

Gender: Male \_\_\_\_\_ Female \_\_\_\_\_

Has student ever been suspended from any school? \_\_\_\_\_ If yes, give date: \_\_\_\_\_

Has student ever been arrested? \_\_\_\_\_ If yes, give date: \_\_\_\_\_

If you answered "Yes" to either of the above questions, please explain on a separate sheet of paper.

Previous School: (Your application will be returned if this section is not completely filled out.)

School Name: \_\_\_\_\_ Date withdrawn: \_\_\_\_\_

School Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ FAX: \_\_\_\_\_

School District in which your home is located: \_\_\_\_\_

### Parent Information

Child lives with:  Father  Mother  Both  Legal Guardian

Father: \_\_\_\_\_ Mother: \_\_\_\_\_  
Professional Title: \_\_\_\_\_ Professional Title: \_\_\_\_\_

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

Cell/Work Phone: \_\_\_\_\_ Cell/Work Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Email: \_\_\_\_\_

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

Pastor's Name: \_\_\_\_\_ Pastor's Name: \_\_\_\_\_

### Statement of Qualification and Agreement

This is to certify that I, \_\_\_\_\_, received my High School Diploma, or GED.

Institution: \_\_\_\_\_ Date: \_\_\_\_\_ (See Section 4.6) I

have read, understand, and agree to comply with the policies and procedures pertaining to The Comenius School.

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

Fee Owed \_\_\_\_\_ (Make checks payable to TCS and designate "Summer School" on the envelope. Students are not enrolled until payment is made and checks have cleared the bank.)

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### Office Use Only

Ap Rec \_\_\_\_\_ Pd \_\_\_\_\_ Rr \_\_\_\_\_ Acc \_\_\_\_\_ Enter \_\_\_\_\_

## Curriculum List

This page must be completely filled out or the entire application will be returned. List the curriculum your child will be using for each class. Include the names of books, CD's, etc., and the publisher.

Student's Name: \_\_\_\_\_ Grade: \_\_\_\_\_

<b>Subject</b>	<b>Books/CD's/Etc.</b>	<b>Publisher</b>

Comments: