



1. Parent/Guardian Info:

Mother/Guardian: _____ Phone#: _____
 Father/Guardian: _____ Phone#: _____
 Address: _____
 City: _____ ZIP: _____ School Dist of Residence: _____
 Siblings currently attending CLA or VPA? No _____ Yes _____ -Name _____
 Languages spoken at home: English Spanish Other _____

2. Student Information:

Child #1 full name: _____ Desired year of entrance: _____
 DOB: _____ Gender: _____
 Grade level for 2015-16 school year: (circle one) **6 7 8 9 10 11 12**
 Name of previous school: _____
 Is this student currently expelled or in the process of being expelled? Yes No
 Has this student ever attended CLA or VPA? Yes No
 Receiving any of these services:
 Special Education 504 Plan ELL Gifted& Talented

Child #2 full name: _____ Desired year of entrance: _____
 DOB: _____ Gender: _____
 Grade level for 2015-16 school year: (circle one) **6 7 8 9 10 11 12**
 Name of previous school: _____
 Is this student currently expelled or in the process of being expelled? Yes No
 Has this student ever attended CLA or VPA? Yes No
 Receiving any of these services:
 Special Education 504 Plan ELL Gifted& Talented

3.I Understand:

I understand that this Intent to Enroll does not obligate the student to attend Victory Preparatory Academy nor does it guarantee admission. Admission will be offered as a lottery with priorities as defined in school policy. I certify that the information provided is accurate and true. If any false information is given, or if any requested information is withheld or not disclosed, this request for enrollment will be considered invalid. If enrollment does occur prior to the discovery of false or withheld information, the enrollment will be immediately revoked.

X _____
Signature of Parent/Guardian **Date**