HOPE ACADEMY CHARTER SCHOOL

Transforming Our community, one child at a time

Lottery Nun	mber:	Position:

Enrollment Application 2018-2019

			Date of Registration:			
☐ Resident of Ash	ury Park	□ N	Non-Resident of Asbur	y Park (pleas	se check one)	
Mail completed applicat	6	Hope Academy Charter School 601 Grand Avenue Asbury Park, NJ 07712				
Check the grade you are	applying fo	r (school year 20	18-2019 not the current grad	le):		
□ Kindergarten	□ Fi	rst Grade	☐ Second Grade		ird Grade	
□ Fourth Grade	□ Fi	fth Grade	□ Sixth Grade	□ Sev	enth Grade	
□ Eighth Grade						
Child's Full Name:	First		Last		MI	
Date of Birth:/ Month	/_ Day	 Year	Sex (circle one)	M	F	
Current School Attending:						
Name of Parent/Legal Guardian:		First	Last	Relationship _		
Address:Street		Apt.	City		Zip Code	
Telephone:Home		Work		Cell		
E-Mail:						
Emergency Contact Informa	tion (if we can	not contact parents/gi	uardians above)			
Name: First			Last			
			Last			
Home		Wo	rk	Cell		

732 988-4227 Fax: 732 988-9125 e-mail: hopeacademycs.org

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Please list the names of any siblings presently enrolled in HACS or graduates of HACS (brothers and sisters **living in the same household** or children you are legally responsible for as parent/guardian **living in the same household**).

Name:	Current Grade:				
Name:	Current Grade:				
Name:	Current Grade:				
Name:	Current Grade:				
Name:	Current Grade:				
Please list any siblings applying to HACS for 2018-2019 school year. (NOTE: a separate application must be filed for each child.)					
Name:	Grade Applying For:				
Name.	Oracle Applying For.				
Name:	Grade Applying For:				
Name:	Grade Applying For:				
Name:	Grade Applying For:				
Application Deadline for the Waiting List lottery is 4:00PM The lottery will be held at 4:00PM Monday June 18,2018	Monday June 11, 2018				