

HOPE ACADEMY CHARTER SCHOOL

Transforming Our community, one child at a time

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: _____

Grade Applying For: _____

Name: _____

Grade Applying For: _____

Name: _____

Grade Applying For: _____

Name: _____

Grade Applying For: _____