

COUNTRYSIDE MONTESSORI CHARTER SCHOOL

Lottery Application 2019-2020 School Year

Office Use Only:

Received by: _____

Date: _____

Referred by: _____

Grade Entering August 2019: _____

Student's Legal Name: _____
Last Name First Name MI

Gender: M F Date of Birth: _____ County of Residence: _____

Home Address: _____ Main Phone: _____

City, State, Zip: _____

E-mail (print clearly): _____

Student lives with: ☐ Both Parents ☐ Father ☐ Mother ☐ Guardian _____
Relation to Student

Parent/Guardian: _____
Name Cell Phone Workplace/Occupation

Parent/Guardian: _____
Name Cell Phone Workplace/Occupation

Please list all siblings and their grades that are currently **applying** for admission to CMCS:

Name: _____ Grade: _____ DOB: _____

Name: _____ Grade: _____ DOB: _____

Name: _____ Grade: _____ DOB: _____

Is the student a child of a military family or will he/she be a child of a military family at any time during this school year? ☐ Yes ☐ No If yes, please provide proper documentation.

Has the student been relocated due to foster care placement from a different school zone?

☐ Yes ☐ No If yes, please provide proper documentation.

Has the student moved due to a court-ordered change in custody due to separation or divorce, or serious illness or death of custodial parent? ☐ Yes ☐ No If yes, please provide proper documentation.

Does this student have a sibling currently **attending** CMCS? ☐ Yes ☐ No

If yes, name of sibling: _____

Office Use Only:

Verified by: _____

Date: _____

*** To be considered in the main lottery, the Lottery Application MUST be submitted to the address below no later than February 14, 2019. ***

You must reapply for the lottery each year.

Please return Lottery Application in person or by USPS to:

Countryside Montessori Charter School • 5852 Ehren Cut-Off • Land O' Lakes, FL 34639
Phone (813) 996-0991

Applications will not be accepted via email or fax.