

Madison Preparatory Academy

1555 Madison Ave.

Baton Rouge, La. 70815

Phone 225-706-0003 Fax 225-336-1414

A Gates/BAEO Charter High School

2010-2011 School Year

Student Name: _____ Date: _____

Enrollment Procedures

In order to complete the enrollment application, the following items must be submitted with the application. Applications without all documents will not be reviewed. Submission of application does not guarantee admission. A meeting with the School Director is required before admission. An appointment will be scheduled with the parent and the student. If you have any questions, please contact our office at (225) 706-0003.

- Δ Completed Enrollment Application
- Δ Copy of Birth Certificate
- Δ Copy of Social Security Card
- Δ Shot Records
- Δ Latest Report Card
- Δ Any Test Scores (IOWA or LEAP)
- Δ Copy of IEP – Must Provide Documentation (if Applicable)
- Δ Copy of 504 – Must Provide Documentation (if applicable)
- Δ \$35.00 Supply Fee (Due upon Acceptance)
- Δ \$50.00 Workbook Fee (Due upon Acceptance)
- Δ \$10.00 Student ID & Planner (Due upon Acceptance)

DO NOT WRITE BELOW THIS LINE OFFICE USE ONLY

Appointment Date: _____ Enroll Date: _____
Group _____ Enrollment Status _____
Probationary _____ Regular _____

Documents Received from Applicant

_____ Copy of Birth Certificate _____ Copy of Social Security Card _____ Drop Slip
_____ Test Scores _____ Shot Records _____ Latest Report Card _____ Lunch Form
_____ \$35.00 Supply Fee _____ \$10.00 Student ID & Planner _____ \$50.00 Workbook Fee

Student Information
(Please Print)

Last Name	First Name	Middle
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Home Address	City, State, & Zip
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Mailing Address (if different from home address) City, State, & Zip

Social Security #	D.O.B.	Age
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Grade	Gender (Male-Female)
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Home Phone#	Work#	Cell Phone#
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Mother's Name	Father's Name
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Guardian's Name (If student resides with person other than parent)

Parent E-Mail Address

Student Resides with	Parental Status:	Ethnicity:
<input type="checkbox"/> Both M/F	<input type="checkbox"/> Married	<input type="checkbox"/> African American
<input type="checkbox"/> Mother	<input type="checkbox"/> Single	<input type="checkbox"/> Caucasian
<input type="checkbox"/> Father	<input type="checkbox"/> Divorced	<input type="checkbox"/> Native American
<input type="checkbox"/> Mother/Stepfather	<input type="checkbox"/> Separated	<input type="checkbox"/> Hispanic
<input type="checkbox"/> Father/Stepmother		<input type="checkbox"/> Asian
<input type="checkbox"/> Guardian		<input type="checkbox"/> Other

School Transferred from _____

Grade just Completed _____

Has your child ever been expelled from school? _____ Yes _____ No

If yes, for what reason: _____

Has your child ever repeated a grade? _____ Yes _____ No

If yes, what grade(s): _____

What was your child's lunch status last school year:

_____ Free _____ Reduced _____ Full Pay (If accepted, a new lunch form is to be completed at Madison Preparatory Academy)

Is your child on any of the following?

Δ IEP (Is a copy available _____ Yes _____ No)

Δ 504 plan (Is a copy available _____ Yes _____ No)

Δ Speech Therapy Plan

Δ Does not apply to my child

Student Field Trip Form

It is my understanding that Madison Preparatory Academy is a hands-on school. For that reason, my child may be selected to participate in unscheduled and scheduled field trips with other MPA Students. These trips will be school related and chaperoned by MPA staff. Students may be transported by personal vehicles or the East Baton Rouge Parish School Bus System.

Δ My child has permission to attend field trips

Δ My child does not have permission to attend field trips

Student Emergency Information

For your child's safety, keep MPA informed of all address and phone number changes throughout the school year. Select three people as your emergency contacts in the case of an urgent situation with your child. An emergency contact person is someone who is home often and authorized to pick up your child. MPA will only contact these people if we are unable to reach you. No child at anytime can be signed out by any adult without written or verbal permission by parent or guardian if they are not an emergency contact. Picture ID will be required for those not listed below.

Contact Person 1:

_____ Telephone # _____ Relation _____

Contact Person 2:

_____ Telephone # _____ Relation _____

Contact Person 3:

_____ Telephone # _____ Relation _____

Parent/Guardian Signature

Date

