



RIO STUDENT ENROLLMENT APPLICATION 2024-2025

Rio del Sol STEAM School

<u>Student General Information</u>	First Name:
	Middle Name:
	Last Name:
	Date of Birth:
	Gender:
	Currently enrolled in Rio: Yes/ No+-
	Current School:
	Current Grade:
	Grade applying to:

<u>Student Residence</u>	Street address, P.O. box:
	Apartment, Unit, Suite Number:
	City:
	State/Province/Region:
	ZIP/Postal Code:
<u>Homeless Shelter</u>	Is the student currently living in a shelter, in a hotel/motel, in a car, with another family (due to economic hardship), or in another temporary living arrangement? Yes No
	If yes, what was the student's last permanent address?
	If the last permanent housing location for this student is in the community school district/school district where the charter school is located, then they will be eligible for certain lottery preferences. The school will request proof of this during the enrollment process.
<u>Siblings</u>	If yes, sibling Name:

	Sibling Grade:
	School the Sibling is Attending:
	Sibling's Date of Birth (Month Day Year)
	Do the student and this sibling live together at the same address Yes No
<u>Additional Information</u>	Is one of the parents or guardians employed by this organization? Yes No
	If yes, Employee Name:
	(For Staff) How did the family provide you the details to fill out this application?
<u>Services</u>	Please check any of the services your child currently receives: <input type="checkbox"/> Migrant Education Services English Language Development (ELD) Section 504 Individualized Education Plan (IEP) None <input type="checkbox"/> Other If Other, please specify:

<u>Guardian Information #1</u>	First Name:
	Last Name:
	Mobile Phone Number:
	Email:
	Home Phone Number:
	Work Phone Number:
	Contact Preference (phone, email, mail):
	Address Street1:
	Address Street2:
	Address City:

	Address State:
	Address Zipcode:
	Relationship to Student:
	Education Level:

<u>Guardian Information</u> #2	First Name:
	Last Name:
	Mobile Phone Number:
	Email:
	Home Phone Number:
	Work Phone Number:
	Contact Preference (phone, email, mail):
	Address Street1:
	Address Street2:
	Address City:
	Address State:
	Address Zipcode:
	Relationship to Student:
	Education Level:

Parent/Guardian Name _____

Parent/Guardian Signature _____ **Date** _____

Email completed form to: mtorres@rioschools.org