

The GREAT Academy Charter School

Letter of Intent

Student's Information:

Name:					
Las	st	First	M.I.		
Sex: \Box N	Sex: 🗌 Male 🗍 Female Age: Date of Birth: / / Grade Level:				
Current School:					
School District of Residence:					
Does this student have a sibling currently attending The GREAT Academy?					
Sibling Names:					
Parent's / Court Appointed Legal Guardian's Information:					
Name:					
Las		First			
Phone Nu	umbers: Home	_Cell	Work		
Home Ad	ldress:				
Mailing Address If Different:					
Email Address:					
Required Documentation and Information Upon Registration					
 Documentation of withdrawal from current school. Complete Application of Admission and Registration form. A copy of child's legal, government issued, birth certificate. A copy of your child's current Immunization Record and Medical Consent form. Records Transfer form, Photo Release form, and Media/Internet Waiver form. Home Language form, Student Residency form, and Computer Use form. Only one letter per student will be accepted. All of the above documentation must be given at time of submission or the registration will be declined. 					
I (We) have read and understand the information contained herein. The information I (we) have provided to The GREAT Academy is accurate.					

Student's Signature

Date

Date

Parent's Signature

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