

ORANGE ELEMENTARY SCHOOLS

131 West Main Street

Orange, MA 01364

978-544-6763 (phone)

978-544-3450 (fax)

Application for admission as a school choice student for the 2010-2011 school year.

Student's Full Name:

Address

Date of Birth _____

Telephone No. _____

Name and Address of Child's Present School:

Student's Current Grade: _____ Grade Student will be entering in September: _____

Previous School Record

Name and Location of School

Years

Grade(s)

Why do you wish to enroll your child(ren) in the Orange Elementary Schools?

Please check YES or NO if you would like your name given to other residents of your town for carpooling purposes.

Signature of Parent/Guardian

Printed Name

Date

The Orange Elementary Schools are committed to insuring that no student is denied access to any educational program or other activity of the Orange Elementary Schools for reason of race, color, national origin, religion, creed, age, handicap, gender, or other reason.

Please notify the Office of the Superintendent of any address change during the school year.

THIS FORM MUST BE RETURNED TO THE SUPERINTENDENT'S OFFICE NO LATER THAN JULY 29, 2010. THANK YOU