



LAKE WALES CHARTER SCHOOLS

LWCharterSchools.com

Dale R. Fair
**Babson Park Elementary School
Charter School
TRANSFER APPLICATION
2011-2012 School Year**

- You must complete one application for each child you wish to enroll (front and back)
- To be valid, the request must be complete, signed by a parent or guardian, and dated
- Incomplete applications will be returned, if possible
- All Lake Wales Charter Schools will give preference to students in their current school attendance zone
- Enrollments are set by grade level, racial balance, and physical space
- Preference on the waiting list is given to those who already have a sibling currently enrolled in K-4

CURRENTLY ZONED SCHOOL:

REQUESTED SCHOOL:

STUDENT INFORMATION

Student ID #	Student Social Security #	Gender	Date of Birth (MM/DD/YYYY)	Current Grade	Applying for Grade
5300 <input type="text"/>	<input type="text"/>	M <input type="checkbox"/> F <input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

STUDENT'S LEGAL NAME

Last Name	First Name	Middle Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

Ethnic Code – Choose only one code from the list and write that number in the box below

1. Multiracial Black	2. African American
3. White	4. Hispanic
5. Indian	6. Asian <input type="checkbox"/>
7. Multiracial Non-black	

Check ALL that apply

<input type="checkbox"/> Regular Education Student	<input type="checkbox"/> Alpha/Gifted Student
<input type="checkbox"/> School Employee's Child	<input type="checkbox"/> ESE Student
<input type="checkbox"/> Board Member's Child	<input type="checkbox"/> ESOL Student
<input type="checkbox"/> Other: _____	

HOME ADDRESS

Street Address (If applicable, include Apartment #)

City	State	Zip Code
<input type="text"/>	<input type="text"/>	<input type="text"/>

MAILING ADDRESS – IF DIFFERENT FROM STREET ADDRESS

Street Address (If applicable, include Apartment #)

City	State	Zip Code
<input type="text"/>	<input type="text"/>	<input type="text"/>

FAMILY INFORMATION – Parent/Guardian living in the same household as the student)

Last Name	First Name
<input type="text"/>	<input type="text"/>
Home Telephone Number	Work Telephone Number
<input type="text"/>	<input type="text"/>

For Office Use Only!

Date Received



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Please check the following if requested:

Bus Transportation is needed

PRIORITIES – Please list any sibling(s) (brother, sister – half or step) in the same household currently applying for a transfer.

Last Name <input style="width: 100%; height: 15px;" type="text"/>	First Name <input style="width: 100%; height: 15px;" type="text"/>	Middle Name <input style="width: 100%; height: 15px;" type="text"/>
Date of Birth (MM/DD/YYYY) <input style="width: 100%; height: 15px;" type="text"/>	Current Grade <input style="width: 20px; height: 15px;" type="text"/>	Sibling presently: <input type="checkbox"/> Enrolled <input type="checkbox"/> Applying/Waiting List
Last Name <input style="width: 100%; height: 15px;" type="text"/>	First Name <input style="width: 100%; height: 15px;" type="text"/>	Middle Name <input style="width: 100%; height: 15px;" type="text"/>
Date of Birth (MM/DD/YYYY) <input style="width: 100%; height: 15px;" type="text"/>	Current Grade <input style="width: 20px; height: 15px;" type="text"/>	Sibling presently: <input type="checkbox"/> Enrolled <input type="checkbox"/> Applying/Waiting List
Last Name <input style="width: 100%; height: 15px;" type="text"/>	First Name <input style="width: 100%; height: 15px;" type="text"/>	Middle Name <input style="width: 100%; height: 15px;" type="text"/>
Date of Birth (MM/DD/YYYY) <input style="width: 100%; height: 15px;" type="text"/>	Current Grade <input style="width: 20px; height: 15px;" type="text"/>	Sibling presently: <input type="checkbox"/> Enrolled <input type="checkbox"/> Applying/Waiting List
Last Name <input style="width: 100%; height: 15px;" type="text"/>	First Name <input style="width: 100%; height: 15px;" type="text"/>	Middle Name <input style="width: 100%; height: 15px;" type="text"/>
Date of Birth (MM/DD/YYYY) <input style="width: 100%; height: 15px;" type="text"/>	Current Grade <input style="width: 20px; height: 15px;" type="text"/>	Sibling presently: <input type="checkbox"/> Enrolled <input type="checkbox"/> Applying/Waiting List

Signature of Parent/Guardian: _____ Date: _____

***Must be signed or application will be returned**

Mail or Return
Completed and Signed Application to:

Dale R. Fair
Babson Park Elementary School

815 N. Scenic Highway
Babson Park, FL 33827

OPEN ENROLLMENT INFORMATION

The Open Enrollment Lottery for the 2011-2012 School Year will be January 14 – January 28. A lottery system will be used to generate the waiting list for the 2011-2012 School Year.

Applications received after the Open Enrollment Period will be placed at the end of the waiting list.