

Charter School Student Enrollment Notification Form

For School Year: 2023-24

Warning: A child enrolled in another public school or a non public or private school can not, at the same time, be enrolled in a charter school.

Charter School: City Charter High School
Address: 201 Stanwix Street, Suite 100
Pittsburgh, PA 15222
Contact Person: James Watson
Telephone: p. 412-690-2489 x 121 f. 412-690-2316
Email Address: Admissions@CityHigh.org

I. Student Information:

Last Name: _____ First Name: _____ MI: _____

Home Address: _____

City: _____ State: _____ Zip: _____

County: _____ Telephone: _____

Mailing Address: _____
(If different from Home Address)

City: _____ State: _____ Zip: _____

Date of Birth: _____ Age: _____

II School District of Residence and Former School Information:

School District of Residence: _____

Former School Information:

Public School Charter School Home School Nonpublic School

Student Not Enrolled in School Preceding Enrollment in Charter School Because:

Entering Kindergarten Re-Enrolling Dropout Other

Name of Former School: _____

Address of Former School: _____

Previous Grade: _____ Withdrawal Date From Former School: June 2023

Was Your Child Receiving Special Education Services Based On An IEP? Yes No

If Yes, Do You Have The Child's Special Education Records (IEP)? Yes No

III Parent/Guardian Information:

Child Lives With: _____ Both Parents _____ Both Parents Alternately _____ Mother Only _____ Father Only
_____ Legal Guardian _____ Foster Parents _____ Other Adult: _____

Special Custodial Court Instructions:

(If Yes, Please Provide a Copy of Court Order)

_____ Yes _____ No

Complete Parent/Guardian Name and Address Information As Applicable:

Parent 1 Name: _____
Parent 1 Address: _____
City, State Zip Code: _____
Home Phone: _____ Work Phone: _____

Parent 2 Name: _____
Parent 2 Address: _____
City, State Zip Code: _____
Home Phone: _____ Work Phone: _____

If The Student Is Not Living With Parents, Please Complete This Section:

_____ Guardian's Name Or _____ Foster Parent's Name Or _____ Other Adult Name
Name: _____
Address: _____
City, State Zip Code: _____
Home Phone: _____ Work Phone: _____

My signature on this form indicates my decision to have my child attend City Charter High School, and signifies my request that appropriate school records be forwarded from the school district.

My signature also certifies that my child is not, and will not be, enrolled in another public school, a nonpublic school or a private school at the same time he or she is enrolled in this charter school.

Signature of Parent/Guardian: _____ **Date:** _____

IV To Be Completed By Charter School:

Verification of Date of Birth: _____ Birth Certificate _____ Other _____

Proof of Residency: _____ Mortgage/Lease _____ Utility Bill _____ State ID _____ Other _____

Official Enrollment Date: _____ Anticipated Date of Attendance: _____

Grade Student is Entering: _____

Signature of Charter School Representative: _____