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| Bridge Charter School | 991 14th Street  Oakland, CA 94607  510.874.7255 (phone)  510.874.6796 (fax)  http://www.kippbridge.org |

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**Student Enrollment Application**

**Student Information**

Name of Student (first, middle, and last):

Student Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_City:\_\_\_\_\_\_\_\_\_\_\_\_\_St:\_\_\_\_\_Zip:\_\_\_\_\_\_\_\_

Date of Birth (m/d/y): Gender: □ Male □ Female

**Current School Name & District:**

**Grade in** **2014-2015**:

Race/Ethnicity: □ African American □ Asian □ Filipino □ Hispanic

*(Optional)* □ Native American □ Pacific Islander □ White □ Multiracial □ Other

**Parent/Guardian Contact Information**

Primary Parent/Guardian Name:

Home Address:

Relationship to Child: Home Phone #:

Cell Phone #: Work Phone #:

Parent Email address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Other Parent/Guardian Name:

Home Address:

Relationship to Child: Home Phone #:

Cell Phone #: Work Phone #:

Parent Email address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Additional Student Information**

The following information is for planning purposes only and will not affect enrollment.

*Programs:* Which of the following programs has your child been a participant?

□ Special Education □ Limited English Proficiency/Bilingual □ GATE □ Free/Reduced Lunch

*Home Language Survey*

Language child learned first: □ English □ Spanish □ Other:

Language child speaks most frequently at home: □ English □ Spanish □ Other:

Language parents speak most frequently to child: □ English □ Spanish □ Other:

Language child is most comfortable speaking: □ English □ Spanish □ Other: