

Carolina School for Inquiry

APPLICATION FOR ENROLLMENT CONSIDERATION

2019-2020 SCHOOL YEAR

All applicants not presently enrolled in Richland School District One must still enroll at their zoned school. A lottery may take place to admit students to CSI. This application does not guarantee enrollment.

Student's Name _____
(First) (MI) (Last)

Date of Birth ____ / ____ / ____ **Age** ____ **Race:** _____
(Month) (Day) (Year)

Gender: Male ___ Female ___ **Grade Applying For in 2019-2020:** (circle one) K-3 K-4 K-5 1 2 3 4 5 6

Mother's Name _____
Current Address _____
City _____ State _____ Zip _____
Telephone No. (home) _____ (work) _____ (cell) _____
Email _____

Father's Name _____
Current Address (If different from above) _____
City _____ State _____ Zip _____
Telephone No. (home) _____ (work) _____ (cell) _____
Email _____

School Currently Attending _____
School Zoned to Attend _____

Are brothers or sisters applying for CSI admission? ___ Yes ___ No
Are brothers or sisters currently attending CSI? ___ Yes ___ No

If yes to either question, list name(s), school, and grade:

Name _____ Current School & Grade _____
Name _____ Current School & Grade _____

Please read the following statements and initial to the left of each:

- _____ I request that my child be considered for enrollment at Carolina School for Inquiry.
_____ I understand that if there are more student applications than spots, selection of the students is by LOTTERY.
_____ I understand the program is rigorous and sets high expectations in the areas of academics and discipline.
_____ I understand this program requires parental involvement and I agree to be an active participant in my child's education.

Parent's Signature

Date

Please return this form to: Carolina School for Inquiry
ATTN: STUDENT APPLICATION
PO Box 2484
Columbia, SC 29202
Fax: (803)691-1247

Email: pbartolay@carolinaschoolforinquiry.org &
vdixon-mokeba@carolinaschoolforinquiry.org

If you have any questions, please call the school office at (803)-691-1250.