

University School
East Tennessee State University
Johnson City, Tennessee

APPLICATION FOR ENROLLMENT: 2019-2020

Return To: University School ETSU Campus
ATTN: Dianna Rea
Address: PO Box 70632, Johnson City, TN 37614.
Email: readg1@etsu.edu

For Office use only:
Grade: _____
County: _____
 Sibling
 IEP/504/ESL-ELL-ELP

Applicant Name: _____
(Last) (First) (Middle)

Name(s) of Siblings Currently Enrolled at University School: _____

Student Address: _____

(City) (State, Zip code) (County)

Date of Birth: _____ (MM/DD/YYYY) Grade level applying for 2019-2020 at University School: _____
(Applicants for Kindergarten must be 5 years old by August 15, 2019.)

Name of school where the applicant is currently enrolled: _____ Current grade level: _____

IMPORTANT: If your child is currently enrolled in a public school, does he/she have any of the following educational plans. Check the one he/she has:

- IEP
- 504
- ELP / ESL / ELL

Gender

- Male
- Female

Applicant's first language: _____

Language spoken at home: _____

Language spoken most often: _____

Ethnic Background (check one)

- American Indian or Alaskan Native
- Asian
- Black or African American
- Native Hawaiian or Pacific Islander
- White
- Hispanic

Citizenship (check one):

- USA
- Other: _____

If other, list the date the applicant started school in the USA: _____

Guardian 1 Name: _____

Relationship to student: _____

Lives with students at address listed above: yes _____ no _____

If no, street address: _____

City, state, zip: _____

Custody of student: yes _____ no _____

Employer: _____

Email address: _____

List phone numbers below and check preferred number:

- Home Phone: _____
- Cell Phone: _____
- Work Phone: _____

Guardian 2 Name: _____

Relationship to student: _____

Lives with students at address listed above: yes _____ no _____

If no, street address: _____

City, state, zip: _____

Custody of student: yes _____ no _____

Employer: _____

Email address: _____

List phone numbers below and check preferred number:

- Home Phone: _____
- Cell Phone: _____
- Work Phone: _____

Is a guardian actively serving in the Military/Reserves: Yes _____ No _____

If yes, list the branch: _____

Parent Signature _____ Date _____

IT IS THE RESPONSIBILITY OF THE GUARDIAN TO NOTIFY THE SCHOOL OF ANY CHANGES TO THIS APPLICATION. Please make sure all information is correct. Giving incorrect information may result in rejection of the application or withdrawal from school during the year when discovered. Submitting an application does not guarantee enrollment. If and when the applicant can be enrolled, guardians will be notified. The annual drawing is March of each year. Application must be received by February 28th to be included in the lottery. Late applications will not be included in the lottery and will be added to the waiting list in the order they were received.

ETSU and University School are fully in accord with the belief that educational opportunities should be available to all eligible persons without regard to age, sex, color, race, religion, national origin, or disability.