



Student Enrollment Notification Form
For School Year 2011-2012

Warning: A child enrolled in another public school or a nonpublic or private school cannot, at the same time, enroll in a charter school.

Name of Charter School: The Pan American Academy Charter School
Address: 126-136 W. Dauphin Street
Philadelphia, Pa. 19133
Charter School Contact Person: Ingrid Santos or Julie Roman
Telephone: 215-425-1212 Email Address: panamericanacademy.org

I. Student Information:

Last Name: _____ First Name: _____ MI: _____
Home Address: _____
City: _____ State: _____ Zip Code: _____
County: _____ Telephone: _____
Mailing Address (If Different From Home Address) _____
City: _____ State: _____ Zip Code: _____
Date Of Birth: _____ Age: _____

II. School District of Residence and Former School Information

School District of Residence: _____

Former School Information (Other Than Pre-School):
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: _____

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 _____ Mother _____ Father _____
 _____ Parents _____ Alternately _____ Only _____ Only
 _____ Legal _____ Foster _____
 _____ Guardian _____ 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

Father's Name _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Home Telephone: _____ Work Telephone: _____

 Mother's Name _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Home Telephone: _____ Work Telephone: _____

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: _____

 My signature on this form indicates my decision to have my child attend the charter school named on page 1 of this form and signifies my request that appropriate school records be forwarded from the school district to the charter school. **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 _____ Mortgage _____ Utility _____
 Residency _____ Statement _____ Lease _____ Bill _____ Other _____
 Official Enrollment Date: _____ Anticipated Date of Attendance: _____
 Grade Student Is Entering: _____

Signature of Charter School Representative: _____