58 Oakland Street • Red Bank, NJ 07701
732-450-2092/2093 Fax 732-936-1923

APPLICATION FOR ADMISSION

September, 2010

Please Print Clearly

Student Name:_____ _____
First Last

Birth Date:_____ _____ _____
Month Day Year

Current School:_____

Address:_____

Fall **2010** my child will be entering grade:

Circle One: K 1 2 3 4 5 6 7 8

Name of Parent of Legal Guardian:_____ _____
First Last

Address:_____

Telephone: (Home)_____ (Work)_____ (Cell)_____

Emergency Contact in the event we are unable to contact the parent/guardian at the above telephone number:
Name:_____

Telephone:_____

Check only that applies:

☐ My Child is currently enrolled in the Red Bank Public School District.

☐ My child presently has a sibling enrolled in Red Bank Charter School.

Name_____ Grade_____

Signed:_____
Parent or Legal Guardian