Red River Valley Charter School
K-8 Student Lottery Form

STUDENT INFORMATION

PLEASE PRINT CLEARLY

NAME: _____ BIRTHDATE (MM/DD/YY): _____/_____/_____

FIRST   MIDDLE   LAST

NICKNAME/PREFERRED NAME: _____ PHONE:_____

ENTERING GRADE: _____

PHONES & ADDRESSES: (LIST ALL IMPORTANT CONTACT PEOPLE FOR THIS STUDENT)

GUARDIAN'S NAME: _____ RELATIONSHIP TO STUDENT: _____

HOME PHONE: _____ WORK PHONE: _____ MOBILE:_____

EMAIL: _____

- -

GUARDIAN'S NAME: _____ RELATIONSHIP TO STUDENT: _____

HOME PHONE: _____ WORK PHONE: _____ MOBILE:___ _____

EMAIL: _____

- -

SIBLINGS

**Check Box If
Sibling Also Applying**
(separate application required)

NAME _____ AGE _____ CURRENT SCHOOL_____ ENTERING GRADE _____ ☐

NAME _____ AGE _____ CURRENT SCHOOL_____ ENTERING GRADE _____ ☐

NAME _____ AGE _____ CURRENT SCHOOL_____ ENTERING GRADE _____ ☐

NAME _____ AGE _____ CURRENT SCHOOL_____ ENTERING GRADE _____ ☐

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PARENT/GUARDIAN SIGNATURE

PARENT/GUARDIAN NAME (PLEASE PRINT) _____

PARENT/GUARDIAN SIGNATURE _____ DATE_____

Admission to the Red River Valley Charter School is not limited based upon ethicity, national origin, income level, gender, disabling condition, proficiency with the English Language or academic ability.