

Kind Proud Fearless
HAYES FREEDOM

Application for Admittance

Student Name: _____ Date: _____

Mailing Address: _____ DOB: _____
Street Address

_____ Male Female
City State Zip

Student Phone #: _____ Student Email: _____

Graduating Class: 2017 2018 2019 2020 2021

Do you currently qualify for or have one of the following? 504 plan IEP

What are your plans after high school? 4-yr. College 2-yr. College Voc-Ed Work Military

Are you currently working? Yes No If yes, where? _____ # Hours per wk: _____

If you are accepted on a boundary exception, can you provide your own transportation? Yes No

What school are you currently attending? _____

Have you had discipline issues at your previous school? Yes No

If yes, please explain: _____

Parent/Guardian Information

Name of Parent/Guardian #1): _____ Relationship: _____

Name of Parent/Guardian #2): _____ Relationship: _____

Phone #1: _____ Email: _____

Phone #2: _____ Email: _____

Parent/Guardian Signature _____ Date: _____

Student Signature _____ Date: _____



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Application for Admittance - Student Statement

What do you know about Hayes Freedom HS?
Why do you think Hayes Freedom will be a better educational choice for you?

What kind of experiences in school help you to learn?
What have been some challenges you have faced in your educational experience?



For Office Use Only	
Date Completed Form Received:	_____
Application Reviewed Date:	_____
Interview Date:	_____
Accepted: Y / N	Boundary Exception: Y / N
Start Date: _____	Wait List <input type="checkbox"/>