Office Use:
Date Received _____

Received By _____

Newton County School System

2012-2013 Theme School Application

Newton County Theme School at Ficquett (Grades K-7)

Applications accepted at Newton County Theme School from February 1 –29, 2012

All applications must have attached two proofs of residence within Newton County. Acceptable proofs of residence are current gas, water or electric bill(s) AND a current lease or housing contract in the name of the parent or guardian.
If the student is not currently enrolled in a Newton County School, parents must provide copies of report cards, CRCT or other standardized tests scores, discipline records, birth certificate, social security card, and immunization records.
Parents must also provide a copy of their photo ID.
PLEASE MAKE COPIES OF THESE ITEMS AND SUBMIT THEM WITH A COMPLETED APPLICATION.

Student's Name: _____ _____
Last *First* *Middle* *Name Called*

Gender: ☐ M ☐ F Birth Date: ___/____/____

Ethnicity: ☐ White ☐ Black ☐ Hispanic ☐ American Indian ☐ Multi-racial ☐ Asian

2012-2013 Grade Level (next year): _____

Home Address: _____
Street # *Street Name* *City* *State* *Zip*

Mailing Address (If Different from Home Address): _____
Street # *Street Name* *City* *State* *Zip*

Telephone Number: Home _____ Cell _____ Work _____

Parent's Email Address: _____

School Attended during the 2011-2012 school year: _____School District: _____

School currently zoned to attend: _____

Family Information:

Mother's/Guardian's Name: _____

Father's/Guardian's Name: _____

Siblings who have applied for attendance at the theme school (***separate applications must be completed for each child***):

Child's Name: _____ Grade Level for 2012-2013: _____

Child's Name: _____ Grade Level for 2012-2013: _____

Child's Name: _____ Grade Level for 2012-2013: _____

Language:

What languages are spoken in your home? _____
What was the language your child first learned to speak? _____
What language does your child speak most often? _____ Date Entered U.S. __/__/__

Special Programs:

Does the child have an IEP (Individualized Education Plan) for special education? ☐ Yes ☐ No If yes, describe:

_____

_____

Is the child enrolled in a program for gifted students? Yes ☐ No ☐

Parent/Guardian Signature: _____ Date: _____