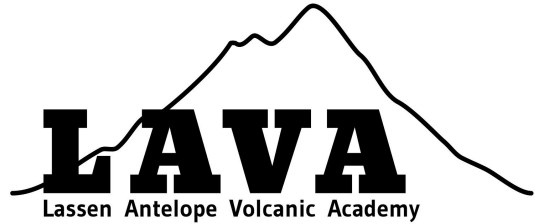


Received: \_\_\_\_\_

**LAVA Charter School**  
**2019-2020 Student Application**

***Please read the following carefully before  
completing the application***



Applications may be mailed or faxed to the following address:

LAVA Charter School  
1660 Monroe St. Red Bluff, CA 96080

Phone Number: (530) 727-9495

Fax Number: (530) 727-9498

- Do not submit more than one application per child. Duplicate applications will not be processed.
- Do not submit an application for a child who is not grade eligible, 5th to 8th grade only.
- Applications submitted before May 31, 2019 will receive priority enrollment.
- Applications for new students may be subject to lottery status depending on available space.

**Student Information:**

**1. Student Name:**

\_\_\_\_\_

Last

First

Middle

**2. Gender**

☐ M ☐ F

**3. Date of Birth:** \_\_\_\_\_

**4. Current School:** \_\_\_\_\_

**5. Student will enter grade:** ☐5 ☐6 ☐7 ☐8 **in August 2019**

Note: Please check one. This application is eligible for the grade applied for only.

**6. Does the student have a sibling who currently attends LAVA Charter School?**

☐Yes ☐ No (Siblings of current LAVA Students will receive priority placement in our school.)

**7. Does the student have a parent who works at LAVA Charter School?**

☐ **Yes**    ☐ **No** (Children of LAVA employees will receive priority placement)

**8. Does the Student have an IEP?**    ☐ **Yes**    ☐ **No**

Special education students may not participate in independent study unless it is specified as an instructional method in their individualized education program (IEP). *EC* Section 51745(c)

**Parent/Legal Guardian Information:**

**Parent/Guardian 1:** \_\_\_\_\_  
Last First MI

**Relationship to Student:** \_\_\_\_\_

**Parent/Guardian 2:** \_\_\_\_\_  
Last First MI

**Relationship to Student:** \_\_\_\_\_

**Address:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Home Phone:** \_\_\_\_\_

**Work Phone:** \_\_\_\_\_

**Cell Phone:** \_\_\_\_\_

**Email:** \_\_\_\_\_