DO NOT USE FOR APPLYING TO CHARTER SCHOOLS, COLLEGE AND CAREER ACADEMIES, DYETT HIGH SCHOOL, INTERNATIONAL BACCALAUREATE HIGH SCHOOLS, MAGNET HIGH SCHOOLS, MILITARY ACADEMIES, OR SELECTIVE ENROLLMENT HIGH SCHOOLS!

Chicago Public Schools

OPTIONS FOR KNOWLEDGE STANDARD HIGH SCHOOL APPLICATION
HIGH SCHOOLS ONLY - INCOMING FRESHMEN ONLY
2017-2018 SCHOOL YEAR - Deadline Friday, December 11, 2016
MAIL THE COMPLETED APPLICATION(S) TO THE HIGH SCHOOL(S) TO WHICH YOU ARE APPLYING.

Use one application per school, per student. Mailed applications must be postmarked by December 11, 2015. There is no limit to the number of schools to which you can apply. You may photocopy this form as needed. Please type or print clearly. Applications CANNOT be submitted via email or fax. If you mail your application, you are strongly encouraged to: (1) have a postal official postmark your envelope in front of you, (2) send your application via certified mail so that you will have a receipt, and (3) include a self-addressed, stamped postcard/envelope, which will be returned to you to indicate that your application has been received. If you do not receive your postcard/envelope within two weeks of mailing, contact the school. Retain all receipts as proof that your application was submitted. Notification letters will be mailed directly from the school in February 2016.

Student's Last Name | **Student's First Name**

CPS Student ID (If non-CPS, LEAVE BLANK) | **Birth Date (MM/DD/YYYY)** / /

Student's Current School (8th Grade)

Is your child a multiple? (twin, triplet, etc.) ○ Yes ○ No

Has your child ever been a CPS student? ○ Yes ○ No

Gender: ○ Male ○ Female

Please indicate whether or not your child is Hispanic/Latino and your child's race. For informational use only.

Is your child Hispanic/Latino? ○ Yes ○ No

Race (choose one or more) ○ White ○ Black/African-American ○ American Indian/Alaska Native ○ Asian ○ Native Hawaiian/Other Pacific Islander

Parent/Guardian Last Name | **Parent/Guardian First Name**

Student's Primary Address | **Direction** | **Street Name (P.O. Boxes not accepted)** | **Street Type** | **Apt #**

City | **State** | **Zip Code**

Parent/Guardian Email Address - CAPITAL letters only. Write number 1, letter I, letter L, letter O and number Ø.

Primary Phone - -

Secondary Phone - -

School applying to:

Program applying to (if applicable):

☐ **Sibling Preference**

(Check here only if student has at least one sibling who is currently enrolled in this school and will remain enrolled for the 2016-2017 school year.)

Name of a brother or sister currently enrolled at this school:

Sibling Last Name | **Sibling First Name** | **Sibling CPS Student ID #**

AFFIRMATION STATEMENT - READ AND SIGN BELOW

I affirm that the information provided on this application is true and correct. I affirm and understand that the address provided on this form is my child's primary address. I understand that I will have to provide proof of this address at the time of enrollment, and that the validity of my child's application is dependent on that proof. I understand that it is my responsibility to make sure my address is updated with my current school. If applicable, I affirm that the applicant is a sibling of the student(s) indicated, who is currently enrolled and will be attending the school next year. I understand that this application does not guarantee acceptance to any high school. I understand that my child may be subject to immediate removal from the high school if admission was gained based on a falsified application.

Parent/Guardian Signature _____ **Date** _____