The Bronx Charter School for Better Learning

Please submit application by April 7, 2010

By Mail: Bronx Charter School for Better Learning
3740 Baychester Ave (Annex)
Bronx, NY 10466

In person: At the above address between 8:00 a.m. and 4:00 p.m. while school is in session

By fax: (718) 655-5555

Application for Admission for September 2010

Date Application Submitted: _____

Applying for: _____ Kindergarten _____ First Grade _____ Second Grade

_____ Third Grade _____ Fourth Grade _____ Fifth Grade

Student's Name: _____ Date of Birth: _____
(first) (middle) (last)

Address: _____ Apt: _____

City: _____ State: _____ Zip: _____

NYC District 11: ___ Yes ___No NYC Public School ID#:_____

School Attending: _____ Grade: _____

School Address: _____

City: _____ State: _____ Zip: _____ Telephone: _____

Parent/Guardian 1: _____
(first) (middle) (last)

Relationship to Student: _____

Home Phone: (____) _____ Work: (____) _____ Cell (____) _____

Parent/Guardian 2: _____
(first) (middle) (last)

Relationship to Student: _____

Home Phone: (____) _____ Work: (____) _____ Cell (____)_____

Does a sibling already attend our school?_____ If yes, full name:_____

Is a sibling also applying to our school?_____ If yes, full name:_____

Signature of Parent/Guardian:_____

For Office Use Only Date Received_____ Received by: _____

Entered: _____ Lottery Y/N Status_____