

School Address:  
4450 S Mendenhall Road Ste 1  
Memphis, TN 38141



Tel: (901) 367 7814  
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## MEMPHIS SCHOOL OF EXCELLENCE

### APPLICATION FORM FOR 2018-2019 ACADEMIC YEAR

**FOR OFFICE USE ONLY** Date : \_\_\_\_\_ Student #: \_\_\_\_\_

DEAR PARENTS AND APPLICANT:

*Thank you for your interest in Memphis School of Excellence. Please fill out this application form completely. Falsifications, misrepresentations, or omissions may disqualify your application. Information you supply will not be given to any other person/company for any purpose. Applications received unsigned, incomplete, or after the closing date may not be considered for acceptance. Please either **type** or **print** clearly using black ink.*

**Student's legal name:** \_\_\_\_\_

(Last)

(First)

(Middle)

**Student's date of birth:** (MM/DD/YY) \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ **SSN:** \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

**Place of Birth (City, State, and County):** \_\_\_\_\_ **Gender:**  Male  Female

**Grade applied for:**  K  1  2  3  4  5  6  7  8  9  10  11  12

**Do you also want to apply for this school year (2017-2018)?**  YES  NO

**Do you have any relatives in MSE?**  YES  NO **If yes, name of the student(s)** \_\_\_\_\_

**Who Has Legal Custody of Child?** \_\_\_\_\_ **Free-Reduced Lunch?**  YES  NO, PAID.

**Permanent address:** \_\_\_\_\_

(Street & House/Apt. No.)

\_\_\_\_\_  
(City) (State) (Zip Code) Phone: (\_\_\_\_\_) \_\_\_\_\_

**Race: (check all that apply)**

- Native American / Alaskan Native
- Black
- White
- Asian (includes Middle East and Indian, etc.)
- Native Hawaiian/Pacific Islander

**Ethnicity:**

- Hispanic or Latino
- Not Hispanic or Latino

**Student Lives With (check 1 box):**

- Both Parents
- Father Only
- Mother Only
- Foster Parents
- Legal Guardians
- Other \_\_\_\_\_

### PARENT / GUARDIAN (Student Resides With)

Relationship to applicant : _____	Relationship to applicant : _____
Full name: _____	Full name: _____
E-mail : _____	E-mail: _____
Home Phone: _____	Home Phone: _____
Work Phone: _____	Work Phone: _____
Cell Phone: _____	Cell Phone: _____
Address ( if different than above ): _____	Address ( if different than above ): _____
_____	_____
Job Position / Title : _____	Job Position / Title : _____
Employer's Name: _____	Employer's Name: _____

**Current School:** \_\_\_\_\_

**Assigned Public School District:**  Shelby County Schools  Other **Current School:**  Charter School  Not

**Current School Telephone:** (\_\_\_\_) \_\_\_\_\_ **Fax:** (\_\_\_\_) \_\_\_\_\_ **Year/s Attended:** \_\_\_\_ to \_\_\_\_

**Is applicant currently under expulsion/suspension from any school or school district?**  No  Yes If yes, explain:  
\_\_\_\_\_

**Has applicant ever skipped a grade?**  No  Yes Which grade and why? \_\_\_\_\_

**Has applicant ever repeated a grade?**  No  Yes Which grade and why? \_\_\_\_\_

**Does your child have a 504/IEP**  No  Yes If yes, please explain and provide a recent copy of your child's IEP or 504 plan. \_\_\_\_\_

**Please indicate any chronic health, emotional, or physical problem the student has, or other needs which we should be made aware of, which will help us plan and provide for the applicant's educational experience:**  
\_\_\_\_\_  
\_\_\_\_\_

**Please list applicant's honors, awards, or special achievements** (in or out of school): MSE offers CLUE Program for gifted students.  
\_\_\_\_\_  
\_\_\_\_\_

**Please list applicant's talents, interests, hobbies, club memberships, and activities:**  
\_\_\_\_\_  
\_\_\_\_\_

**How did you learn about MSE?**

- |  |   |
|--|---|
| <input type="checkbox"/> Brochure, flyer, handout        | <input type="checkbox"/> Advertisement ( <i>where?</i> ): _____ |
| <input type="checkbox"/> Internet ( <i>site</i> ): _____ | <input type="checkbox"/> Newspaper ( <i>name?</i> ): _____      |
| <input type="checkbox"/> Journal ( <i>name?</i> ): _____ | <input type="checkbox"/> Friend                                 |
| <input type="checkbox"/> Relative                        | <input type="checkbox"/> Other ( <i>please specify</i> ): _____ |

**Briefly state why you wish to have your child/children enrolled at MSE:**  
\_\_\_\_\_  
\_\_\_\_\_

**SUBMIT THE COMPLETED APPLICATION FORM WITH COPIES OF THE FOLLOWING DOCUMENTS:**

- 1. Proof of Residency (utility/phone bill or lease agreement)**
- 2. Birth Certificate**
- 3. Immunization Records**
- 4. Social Security Number (Optional)**
- 5. Most Recent Report Card and Transcript (Transcript is Required for all high school applicants)**

We/I, the undersigned, hereby certify that, to the best of our/my knowledge and belief, the answers to the foregoing questions and statements made by us/me in this application are complete and accurate. We/I understand that any false information, omissions, or misrepresentations of facts may result in rejection of this application or future dismissal of the applicant.

\_\_\_\_\_  
Signature of Parent or Guardian

\_\_\_\_\_  
Date