



# CITY ACADEMY

City Academy's Mission is to graduate responsible, informed citizens who have achieved their best Academic success. We do this through distinctive teaching that is engaging, investigative and thought provoking; close attention to each student's finest learning and personal progress; and involving students well in exploration of civic and current issues and in our city.

## 2019-2020 NEW STUDENT REQUEST FOR ENROLLMENT FORM

Submit this form to City Academy by February 15, 2019 by 12:00 Noon

Date: \_\_\_\_\_ Grade Level for 2019-2020 school year \_\_\_\_\_ Date of birth: \_\_\_\_\_

Student's Name: \_\_\_\_\_ Male \_\_\_\_ Female \_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

How Did You Hear About Us?  Email  Facebook/Instagram  City Academy Website  Billboard  
 Word of Mouth  Community Calendar  Other \_\_\_\_\_

Parent Email Address: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

School most recently attended: \_\_\_\_\_

Resident High School: \_\_\_\_\_ District: \_\_\_\_\_

Telephone: Home \_\_\_\_\_ Work \_\_\_\_\_ Cell: \_\_\_\_\_

I understand that this is an application form that indicates my desire to enter my student's name for possible enrollment at City Academy for school year 2019-2020. **On February 15, 2019 at noon** there will be a lottery to select student names until all open places for next fall are filled. Following the lottery, I will be notified by email whether or not my child's name was selected, and if so, about further registration requirements.

Parent/Guardian Signature: \_\_\_\_\_

Send completed form by email: [crystal.boteju@cityacademyslc.org](mailto:crystal.boteju@cityacademyslc.org)  
fax: 801-521-4181  
mail: City Academy, 555 E 200 S Salt Lake City UT 84102

### Staff Use Only:

Date form received: \_\_\_\_\_ If drawn in lottery, date and method notified: \_\_\_\_\_