

SHEBOYGAN LEADERSHIP ACADEMY
Application for Admission
2024-2025 School Year

Please Print

Grade Entering _____ Today's Date _____

Student Name _____ Primary Phone: _____

Home Address _____ City _____ Zip _____ Male Female

Date of Birth _____ City/State of Birth _____

School Last Attended _____ School Address _____

Has student ever received special education services: Yes No ****If yes, please explain** _____

Are you interested in bussing? Yes No **PLEASE NOTE:** You must reside outside the required two mile bussing limit.

Guardian Name: _____ Circle one: **Mother** **Father** **Other**

Guardian's email address(es): _____ Cell Phone: _____

Employer: _____ Work Phone: _____

Guardian Name _____ Circle one: **Mother** **Father** **Other**

Guardian's email address(es): _____ Cell Phone: _____

Employer: _____ Work Phone: _____

Student Lives With: (Circle One) Both Parents - Mother Only - Father Only - Mother & Stepfather - Father & Stepmother
Other _____ (If students lives with stepparent, please list their information below)

Stepparent's Name: _____ Cell Phone: _____

Employer: _____ Work Phone: _____

Emergency Contact: _____

Name Phone Relationship

Emergency Contact: _____

Name Phone Relationship

Emergency Contact: _____

Name Phone Relationship

A non-refundable \$75 per child registration fee for students in grades 1-8, a \$55 per child registration fee for Kindergarten students and \$15 per child registration fee for 4K students will be assessed in August.

PARENT/GUARDIAN SIGNATURE: _____ **Date:** _____

Mail completed form to: Sheboygan Leadership Academy, 1305 St. Clair Avenue, Sheboygan, WI 53081