



Stockton Collegiate International Schools

A world-class program. A world of opportunity.

PO Box 2286, Stockton, CA 95201 209-390-9861 (phone) 209-390-9862 (fax)

www.stocktoncollegiate.org

STUDENT APPLICATION FOR ADMISSION

Student Grade Level _____ (School Year 2010-2011)

Current School of Attendance _____ School District _____

STUDENT INFORMATION (please print clearly)

Student's Legal Name: _____
(Last Name) (First Name) (Middle Initial)

Address _____
(Street Number) (City) (Zip Code)

Date of Birth _____ Birthplace _____ Gender (circle): Male Female

Ethnicity _____ Language spoken at home: _____

Student's Most Comfortable Language _____

FAMILY INFORMATION (please print clearly)

	Mother	Father	Legal Guardian
Name			
Street Address			
City, State, Zip			
Work Phone			
Home Phone			
Cell Phone			
E-mail			

Student lives with (circle): Mother Father Both Guardian/Other

SIBLING INFORMATION (List only those applying for admission to Stockton Collegiate.)

Sibling Name				
Current Grade				

(Use back side of application if more space is needed)

Stockton Collegiate International Schools does not discriminate on the basis of race, color, religion, age, citizenship, gender, sexual orientation, disability, nationality or ethnic origin in administration of its educational policies, admission policies, scholarships, and other school administered programs.

Applications may be submitted **by mail** (PO Box 2286, Stockton, CA, 95201), **by fax** (209-390-9862), or **in person** at the following locations: any informational meeting or at the Downtown Stockton Alliance (343 E. Main St.) between 8 a.m. and 5 p.m. Monday through Friday.

FOR OFFICE USE ONLY

Date Rec'd _____ Rec'd by _____
School Year Accepted for _____ Admission Grade Level _____ Enrollment Date _____