



Date _____ / _____ / _____

GRADE TO ENTER _____

STUDENT INFORMATION

Student's Name _____
Last First Middle Called by

Mailing Address _____
Street City State ZIP

Gender _____ Birth Date _____ U.S. Citizen ☐ Yes ☐ No

FAMILY INFORMATION

Father's Name _____ Mother's Name _____

Cell Phone () _____ Cell Phone () _____

E-Mail Address _____ E-Mail Address _____

If parents are separated or divorced, with whom does the student live? _____

ACADEMIC BACKGROUND

School attended last year _____

Address of previous school: _____

Reason(s) for leaving previous school: _____

Student's grades have been: ☐ Superior ☐ Above Average ☐ Average ☐ Below Average

Has the student failed any grades: ☐ Yes ☐ No If yes, which grade: _____

Has this student ever been a student at Front Range Learning Center? Yes ☐ No ☐

Circle grades previously attended. **K5 1 2 3 4 5 6 7 8 9 10 11** When? _____

Do you presently have children enrolled at FRLC? ☐ Yes ☐ No

Give names of members of student's **immediate** family who have attended Front Range Learning Center.

Was this student absent more than 15 days during the most recent school term? ☐ Yes ☐ No

If yes, please explain: _____

Has this student experienced academic, social, or disciplinary problems during his/her school career? ☐ Yes ☐ No

If yes, identify the areas and explain: _____

Has he/she been expelled or given in-school or out-of-school suspension during his/her school career? ☐ Yes ☐ No

If yes, please explain: _____

Has the student ever had a police record? ☐Yes ☐No If yes, please have the court send directly to Front Range Learning Center an official copy of the court record.

Has he/she been recommended for testing or diagnosed as having a learning disability or any condition that would affect educational performance? ☐Yes ☐No

If yes, please explain: _____

Is the student currently on a Section 504/Student Service Plan, IEP, or ILP? ☐Yes ☐No

If yes, please provide a copy of your child's specialized education plan.

Has the student experienced a traumatic event that could affect his/her behavior or academic performance? ☐Yes ☐No

If yes, please explain: _____

Is the student currently taking any prescription medications to aid behavior or educational performance? ☐Yes ☐No

If yes, please explain: _____

GENERAL INFORMATION

How did you find out about FRLC? _____

Recommended by _____

Why do you want your child to attend Front Range Learning Center? _____

In making application for my child, I desire to have him complete the school year 2024-25. It is also my understanding that the policy of the school is to make no refunds or transfers on the application fee. To the best of my knowledge, the information given on this application is true and accurate. I understand by completing this application, it does not enroll my student into Front Range Learning Center.

Date ____ / ____ / ____ Parent's Signature _____

For Office Use Only:

_____ Date application fee paid	_____ Entrance Test Taken
_____ Date application form received	_____ Entrance Test Paid
_____ Date of meeting with principal	