

Date received: _____ Address confirmed by: _____ Student ID/Homeroom: _____

BETHEL HILL CHARTER SCHOOL APPLICATION

Check All Items That Apply:

New Enrollee (1st – 5th) Grade K (BH District) Grade K (Outside BH District)
 Sibling of Current Student Child of Faculty Member Legacy Enrollee
 (Names: _____) (Names: _____) (Names: _____)

Names of any other family member not enrolled, living in your household for whom an application has been submitted: _____

Student's Personal Information: School/Daycare currently attending: _____

Last Name	First	Middle	Preferred	
Date of Birth		Age	Current Grade:	
Mailing Address:		City:	State: NC	Zip:

Parent/Guardian Information

Lives With: (check all that apply) Mother Father Guardian

Parent Contact #1	Last Name	Preferred Name		
Cell Phone	Home Phone:	Work Phone:		
Mailing Address (if different from student):	City:	State: NC	Zip:	
Email Address: (print clearly):				
Parent Contact #2	Last Name	Preferred Name		
Cell Phone 2:	Home Phone 2:	Work Phone 2:		
Mailing Address (if different from student):	City:	State: NC	Zip:	
Email Address: (print clearly):				

For non-priority students – Contact information for the day of the lottery.

Name:	Phone:	Email
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Parent or Guardian Signature

Date

Please return by emailing to Tina.Hildreth@BethelHill.net (preferred), faxing to 336-599-9299, by mailing it to 401 Bethel Hill School Rd. Roxboro, NC 27574 or delivering it to BHCS during business hours. (Weekdays 7:30 - 3:30)

Please complete entire form and return to Bethel Hill Charter School with proof of NC domicile.

“This institution is an equal opportunity provider and employer. Discrimination is prohibited by Federal Law. To file a complaint of discrimination write USDA, Assistant Secretary for Civil Rights, 1400 Independence Avenue, S.W., Stop 9410, Washington, DC 20250-9410. Or call toll-free at (866)632-9992 (English) or (800) 877-8339 (TDD) or (866) 377-8642 (English Federal-relay) or (800) 845-6136 (Spanish Federal-relay).”