

For Office Use
Phase : _____
Received: _____
SOU: _____

Portland Village School

Student Admissions Application 2009-2010

1. Child information

_____ Gender: ____ M ____ F _____
Child's Name Grade entering in fall 2009

_____ City Zip

_____ Child's Date of Birth

_____ Sibling(s) for whom you are also submitting a PVS application (Last name, first name) Grade(s) in 2009

2. Parent information

_____ Parent/ Guardian 1 Home Phone Cell Phone Work Phone

_____ Address City Zip

_____ Email Address

_____ Parent/ Guardian 2 Home Phone Cell Phone Work Phone

_____ Address City Zip

_____ Email Address

_____ If Child does not live with the Parent/Guardian, with whom does the child live:

(Continued on back)

My Child is currently enrolled in:

Currently Enrolled School	Phone Number	Teacher
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Please read and initial the statements below:

_____ I authorize the release of my child's school records to Portland Village School.

_____ I understand that I will be asked to follow media, food and dress code policies as outlined in the Statement of Understanding.

Parent / Guardian Signature

Date

Please return initialed and signed applications along with a signed Statement of Understanding to:

Portland Village School
7654 N Delaware Ave.
Portland, OR 97217

Questions?

Email: info@portlandvillageschool.org

Phone: 503-445-0056