

# Community School of Excellence

A Saint Paul Charter School for Grades K-8 (2010 – 2011)

## Application

### STUDENT INFORMATION

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Birth Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

Home Address \_\_\_\_\_ Apartment \_\_\_\_\_

City \_\_\_\_\_ Zip Code \_\_\_\_\_ Home Phone \_\_\_\_\_

Current Grade \_\_\_\_\_ Grade Fall 2010 \_\_\_\_\_

Last School Attended \_\_\_\_\_, \_\_\_\_\_

Name of School

City/State

How did you hear about CSE? \_\_\_\_\_

### PARENT/GUARDIAN INFORMATION

Parent/Guardian \_\_\_\_\_ Home Phone \_\_\_\_\_

Work Phone: \_\_\_\_\_ Cell Phone \_\_\_\_\_ Email \_\_\_\_\_

Parent/Guardian \_\_\_\_\_ Home Phone \_\_\_\_\_

Work Phone: \_\_\_\_\_ Cell Phone \_\_\_\_\_ Email \_\_\_\_\_

### TRANSPORTATION

Is your child in need of bus transportation? \_\_\_\_\_ Yes \_\_\_\_\_ No

\_\_\_\_\_  
Signature of Parent/Guardian    Date

Date Received \_\_\_\_\_

**Please return the application form to:  
Community School of Excellence  
170 Rose Ave. W.  
St. Paul, MN 55117**