

Date: _____

Received in Business Office: Date: _____

Grade for 2009-10: _____

Deposit received: Date: _____

**CENTRAL FLORIDA PREPARATORY SCHOOL
APPLICATION FOR RE-ENROLLMENT
2009-2010 SCHOOL YEAR
10% Non-refundable deposit due with re-enrollment**

Student Name

Address

City & State

zip

Student Social Security Number

Sex

Date of Birth

Parent(s) Information:

Father's Name

Address (if different from student)

City & State

zip

Home Phone (include Area Code)

Cell Phone (Include Area Code)

Place of Employment

self (y/n)

Work Phone (Include area Code)

E-Mail Address

Mother's Name

Address (if different from student)

City & State

zip

Home Phone (include Area Code)

Cell Phone (Include Area Code)

Place of Employment

self (y/n)

Work Phone (Include area Code)

E-Mail Address

I understand that teacher requests are taken into consideration; however, no guarantees may be given.

Initial _____