

# COMMUNITY HIGH SCHOOL STUDENT APPLICATION

1135 Teaneck Road, Teaneck, NJ 07666  
Phone: 201-862-1796 Fax: 201-862-1791

## APPLICANT INFORMATION:

Today's Date: \_\_\_\_\_

Name: \_\_\_\_\_  
*First* *Middle* *Last*

Physical Address: \_\_\_\_\_

Mailing Address (*if different than physical address*): \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Sex: Male  Female  Date of Birth: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
*MM* *DD* *YYYY*

Age at Time of Application: \_\_\_\_\_ Current Grade Level: \_\_\_\_\_

School Currently Attending: \_\_\_\_\_ Number of years Applicant has attended current school: \_\_\_\_\_

Date of desired entrance to CHS: \_\_\_\_\_

## GUARDIAN 1 INFORMATION:

Guardian 1 Name: \_\_\_\_\_ Relationship to Applicant: \_\_\_\_\_  
*First* *Last*

Physical Address: \_\_\_\_\_

Mailing Address (*if different than physical address*): \_\_\_\_\_

Home Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

Employer Address: \_\_\_\_\_ Employer Phone: \_\_\_\_\_

If parents are separated or divorced, Applicant primarily lives with: \_\_\_\_\_

## GUARDIAN 2 INFORMATION:

Guardian 2 Name: \_\_\_\_\_ Relationship to Applicant: \_\_\_\_\_  
*First* *Last*

Physical Address: \_\_\_\_\_

Mailing Address (*if different than physical address*): \_\_\_\_\_

Home Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

Employer Address: \_\_\_\_\_ Employer Phone: \_\_\_\_\_

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Schools Attended

Dates Attended

School Grade Level

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1) Please describe Applicant's **Academic Strengths**:

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2) Please describe Applicant's **Academic Weaknesses**:

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3) Please comment on the Applicant's strengths and weaknesses in areas of **Social Interaction**:

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4) How do you feel the Community High School program will best contribute to your child's development?

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