



**RE-ENROLLMENT APPLICATION**

*This application is for **CURRENTLY ENROLLED***

**STUDENTS ONLY** and must be received no  
later than **3:00 pm on January 16, 2019.**

Student's Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Circle Grade Applying for 2018-19: 7<sup>th</sup> 8<sup>th</sup>

Street: \_\_\_\_\_ City \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Telephone: \_\_\_\_\_ Cell Number: \_\_\_\_\_

Parent's E-mail Address: \_\_\_\_\_

**\*\*Has your address changed this school year? \_\_\_Yes \_\_\_No**

**\*\*Has your primary telephone number changed this school year? \_\_\_Yes \_\_\_No**

**Please list siblings also applying to Utopian Academy for the Arts for the 2019-20 school year.**

**\*Applications for siblings will still need to be completed online.**

Name: \_\_\_\_\_ Grade applying for: \_\_\_\_\_ M or F

Name: \_\_\_\_\_ Grade applying for: \_\_\_\_\_ M or F

***By signing this document, I am indicating that the above information is true and correct to the best of my knowledge. I understand and acknowledge that Utopian Academy will use this information to make enrollment decisions concerning my child and that, if I have knowingly misstated any fact and my child is accepted, Utopian Academy the right to revoke the acceptance of my child and not enroll him or her for the coming school year.***

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

\_\_\_\_\_  
Date

*Utopian Academy of the Arts is a Clayton County public charter school and does not discriminate on the basis of race, creed, color, religion, national origin or disability/ability status in admission.*

**Re-Enrollment Applications must be submitted to:**

Utopian Academy for the Arts  
**ATTN: Mrs. Calvin, Front Office Manager**  
2750 Forest Parkway  
Ellenwood, GA 30294

***If the re-enrollment form isn't received by January 16, 2019, you will forfeit your enrollment slot for the 2019-2020 school year.***