



# Sol Aureus College Preparatory

A Tuition-Free Charter School Serving K-8 Grades

## 1<sup>st</sup>-8<sup>th</sup> Grade Application

Grade Applying for: \_\_\_\_\_

<p><b>Return completed application to:</b>          Sol Aureus College Preparatory (S.A.C. Prep)          6620 Gloria Drive          Sacramento, CA 95831          School Phone: (916) 421-0600          School Fax: (916) 421-0601  <a href="http://www.sacprep.org">www.sacprep.org</a></p>	<p><b>Include a copy of:</b> <i>(Incomplete applications will not be processed.)</i></p> <ul style="list-style-type: none"> <li>• <b>Birth Certificate</b></li> <li>• <b>Immunization Records</b></li> <li>• <b>Copy of report card</b></li> <li>• <b>Copy of discipline record</b></li> </ul>
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### STUDENT INFORMATION

First Name:	Middle:	Last Name:
Date of Birth (MM/DD/YY):	Gender:	Home Phone:
Street Address:	City, State:	Zip Code:

### RACE/ETHNICITY

Is your student Hispanic/Latino?  YES  NO

<input type="checkbox"/> American Indian or Alaska Native (100)	<input type="checkbox"/> Chinese (201)
<input type="checkbox"/> Japanese (202)	<input type="checkbox"/> Korean (203)
<input type="checkbox"/> Vietnamese (204)	<input type="checkbox"/> Asian Indian (205)
<input type="checkbox"/> Laotian (206)	<input type="checkbox"/> Cambodian (207)
<input type="checkbox"/> Hmong (208)	<input type="checkbox"/> Other Asian (299)
<input type="checkbox"/> Hawaiian (301)	<input type="checkbox"/> Guamanian (302)
<input type="checkbox"/> Samoan (303)	<input type="checkbox"/> Tahitian (304)
<input type="checkbox"/> Other Pacific Islander (399)	<input type="checkbox"/> Filipino (400)
<input type="checkbox"/> Hispanic/Latino (500)	<input type="checkbox"/> Black or African American (600)
<input type="checkbox"/> White (700)	<input type="checkbox"/> Declined to State/Unknown (999)



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### FATHER/GUARDIAN #1 INFORMATION

First Name:	Middle:	Last Name:
Street Address:	City, State:	Zip Code:
Home Phone:	Cell Phone:	Work Phone:
Email Address – Please print clearly:		
Parents Highest Level of Education received:		
<input type="checkbox"/> High School Graduate	<input type="checkbox"/> Graduate Degree/Higher	
<input type="checkbox"/> Some College/Associate Degree	<input type="checkbox"/> Not a High School Graduate	
<input type="checkbox"/> College Graduate	<input type="checkbox"/> Decline to State	

### MOTHER/GUARDIAN #2 INFORMATION

First Name:	Middle:	Last Name:
Street Address:	City, State:	Zip Code:
Home Phone:	Cell Phone:	Work Phone:
Email Address – Please print clearly:		
Parents Highest Level of Education received:		
<input type="checkbox"/> High School Graduate	<input type="checkbox"/> Graduate Degree/Higher	
<input type="checkbox"/> Some College/Associate Degree	<input type="checkbox"/> Not a High School Graduate	
<input type="checkbox"/> College Graduate	<input type="checkbox"/> Decline to State	



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## EMERGENCY CONTACT INFORMATION

<b>1.</b>	First Name:	Last Name:	Relationship:	Phone Number:
<b>2.</b>	First Name:	Last Name:	Relationship:	Phone Number:
<b>3.</b>	First Name:	Last Name:	Relationship:	Phone Number:

## GENERAL EMERGENCY AUTHORIZATION

In an emergency, when I cannot be reached, I authorize the school authorities to take my student, at my expense, to my family doctor, licensed physician, nearest hospital or emergency first aid station for treatment. This consent is effective until revoked in writing.

(Please initial)

Yes, I do give permission. \_\_\_\_\_

No, I do not give permission. \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## NOTICE OF NON-DISCRIMINATION POLICY

Sol Aureus admits students of any race, color, national and ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. Sol Aureus does not discriminate on the basis of race, color, national and ethnic origin in administration of its education policies, admission policies, and athletic or other school-administered programs.



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<b>REQUEST FOR STUDENT CUM FILE</b>
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Current School Name: \_\_\_\_\_ Phone: \_\_\_\_\_

By adding my signature below, I am asking that you accept this application to Sol Aureus College Preparatory and authorizing my student's previous school to forward all confidential records of my student to Sol Aureus College Preparatory (S.A.C. Prep).

\_\_\_\_\_  
Parent/Guardian Name (Print Clearly)

\_\_\_\_\_  
Date

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