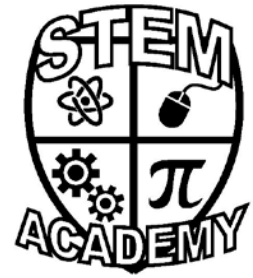


APPLICATION



Windham High School
Humanities and the Arts Academy
STEM Academy
355 High Street
Willimantic, CT 06226
860-465-2460



Note: Incomplete applications WILL NOT be reviewed

ACADEMY OF CHOICE

Windham High School Humanities and the Arts Windham High School STEM Academy

STUDENT INFORMATION

Student Name: _____

Address: _____ Apt. #: _____

City: _____ State: _____ Zip Code: _____

Student Cell Phone #: _____

E-mail Address: _____

Date of Birth: _____ Country of Birth: _____

Languages Spoken: _____

Sex: Female Male

Name of Middle School: _____

Is this student Hispanic/Latino? (for data collection purposes only) Yes No

What is the student's race? (You may check one or more, even if you answered "yes" to Hispanic/Latino)

American Indian or Alaska Native Black or African American Native Hawaiian or other Pacific Islander
 Asian White Other If other, please specify _____

PARENT/GUARDIAN INFORMATION

Parent(s)/Guardian's Name: _____

Home Phone #: _____ Work Phone #: _____ Cell #: _____

E-mail Address: _____

Parent(s)/Guardian's Name: _____

Home Phone #: _____ Work Phone #: _____ Cell #: _____

E-mail Address: _____

HIGH SCHOOL INFORMATION (TO BE FILLED IN BY SCHOOL PERSONNEL)

Current Grade: 9 10 11 12 Year Entered 9th Grade: Grad. Date:

CMT Scores: Math: Reading: Writing: Science:

CAPT Score: Math: Reading: Writing: Science: