## LANGSTON CHARTER MIDDLE SCHOOL Wait List Application 2023-2024

## If you need assistance in completing the Student Application call 286-9700 Please clearly PRINT all information

| Applying for which class?                    | 6 <sup>th</sup> Boys_     | 6 <sup>th</sup> Girls _ | 7 <sup>th</sup> Boys _ | _ 7 <sup>th</sup> Girls _ | 8 <sup>th</sup> Boys | 8 <sup>th</sup> Girls |
|--|---------------------------|-------------------------|------------------------|---------------------------|----------------------|-----------------------|
| STUDENT NAME (as it appear                   | rs on birth ce            | ertificate and          | report card)           |                           |                      |                       |
| First:                                       |                           |                         | •                      |                           |                      |                       |
| Name student goes by:                        |                           |                         |                        |                           |                      |                       |
| Date of Birth (Month/Day/Year)               |                           |                         |                        |                           |                      |                       |
| Street Address:                              |                           |                         |                        |                           |                      |                       |
| City & State:                                |                           |                         |                        |                           |                      |                       |
|  | (Relationship to student) |                         |                        |                           |                      |                       |
| Student resides in Greenville Co             | unty:                     | Yes                     | No                     |                           |                      |                       |
| PARENT INFORMATION                           |                           |                         |                        |                           |                      |                       |
| MOTHER: First Name:                          |                           |                         | Last:                  |                           |                      |                       |
| FATHER: First Name:                          |                           |                         | Last:                  |                           |                      |                       |
| Street Address if different from a           | above:                    |                         |                        |                           |                      |                       |
| City & State:                                | y & State:                |                         |                        | Zip:                      |                      |                       |
| Home Phone:                                  |                           | Cel                     | l Phone:               |                           |                      |                       |
| Primary E-mail Contact:                      |                           |                         |                        |                           |                      |                       |
| <b>VERY IMPORTANT:</b> 1                     | Enrollment/               | Registration            | Information            | will be sent              | to this email        | address.              |
|  |                           |                         |                        |                           |                      |                       |
| STUDENT INFORMATION                          |                           |                         |                        |                           |                      |                       |
| Name of student's current school             | 1:                        |                         |                        |                           |                      |                       |
|  |                           |                         |                        |                           |                      |                       |
| Ethnicity: Is the student Hispa              | .nic? 🗌 YI                | ES NO                   |                        |                           |                      |                       |
| Race: Please check all that apply            | y.                        |                         |                        |                           |                      |                       |
| ☐ American Indian or A☐ Native Hawaiian or o |                           |                         | Asian White            | Black                     | or African A         | merican               |

In order to verify the student's current school, grade level, and residency, you must attach to this application a copy of a school-issued grade report showing school name and grade level OR a page from the GCS Parent Backpack showing school name and grade level.

## By signing below, we acknowledge/understand that:

- 1. All information in this application is complete and correct.
- 2. All classes are taught in single sex sections.
- 3. Students are held to high academic and disciplinary standards.
- 4. Students take 6 classes daily: Math, Science, English, Social Studies, Spanish and Leadership/PE.
- 5. Students are required to wear the school-approved uniform.
- 6. Students must complete community service hours as part of the Leadership class.
- 7. We are aware of the importance of parents volunteering and supporting their child's school and that this can be accomplished in a variety of ways.
- 8. We have read the LCMS handbook (on the website) and are aware of the school's policies, rules and requirements.
- 9. Equal Education Opportunity: No student shall be denied equal opportunity for admission on the basis of race, sex, color, religion, handicap, marital status or national origin. Langston Charter Middle School is open to all students eligible to attend 6<sup>th</sup> 8<sup>th</sup> grade.
- 10. This application was received after 5:00 PM on Tuesday, November 1, 2022. It cannot be included in the enrollment lottery. Instead, it will be placed on the wait list in the order received, following those drawn in the lottery.
- 11. Applications may be mailed, scanned and emailed to Celanie Martin at  $\underline{\text{cmartin@langstoncharter.org}}$ , or hand delivered during regular school office hours (M-TH 8:00-4:00) to:

Langston Charter Middle School, 1950 Woodruff Rd., Greenville, SC, 29607

| Please initial to acknowledge your understanding of the following  We understand that this application will be placed on the   |                                     |
|--|-------------------------------------|
| those drawn in the enrollment lottery conducted on November 10,  | _                                   |
| A current Progress Report or Report Card is attached to the  |                                     |
|  |                                     |
| Parent/Legal Guardian Signature  | Date                                |
|  |                                     |
| Student Signature  | Date                                |
| Disclaimer: If an application contains false information, it will no revocation of any admittance to Langston Charter Middle School. processed. All applications must be submitted in person, by mail of accepted. | Incomplete applications will not be |
| Office Use Only:   |                                     |
| Date Received: By:   |                                     |
| Complete Incomplete (circle missing info in red)   |                                     |