

Application for Admission to Martin Luther King, Jr. Charter School of Excellence

Address: 285 Dorset Street, Springfield, MA 01108

Telephone: (413) 214-7806 Fax: (413) 214-7838

Email: info@mlkcs.org Website: www.mlkcs.org

Office Use Only

Verification of Grade: _____

Application Number: _____

Martin Luther King, Jr. Charter School of Excellence does not discriminate on the basis of race, color, national origin, creed, sex, gender identity, ethnicity, sexual orientation, mental or physical disability, age, ancestry, athletic performance, special need, proficiency in the English language or a foreign language, or prior academic achievement or based on anything included in this application.

CURRENT APPLICATION DEADLINES

DATE OF LOTTERY:

02/23/2024

TIME OF LOTTERY:

10:30 AM

COMPLETED APPLICATION MUST

BE RECEIVED BY: 02/20/2024

LOCATION OF LOTTERY: MLKCE

***Attending the lottery is NOT a requirement.**

**If MLKCE is closed on the scheduled lottery date, The lottery will be held the next day MLKCE is open.*

After **08/02/2023**, MLKCE will continue to accept applications. These applications will be included in additional lotteries **only** if additional lotteries are necessary. If the waitlist from the **08/07/2023** lottery is exhausted, MLKCE will announce and hold subsequent lotteries. No application received after the deadline will have preference over applicants in the principal lottery.

STUDENT INFORMATION

Student Grade Level During School Year: 2023-24

Kindergarten

Grade 1 Grade 4

Grade 2 Grade 5

Grade 3

OR

Student Will Enter

Kindergarten in Sept. 2023

Student Name: _____

Last

First

Full Middle

Date of Birth: _____ Birthplace: _____ Gender: _____

mm/dd/yyyy

City

Address: _____

Street

Apt. #

City

State

Zip

Current School: _____ public

private

School Name

City

State

Past School: _____

School Name

City

State

Grade(s)

STUDENT SIBLING INFORMATION *(Siblings of children currently attending MLKCE receive preference.)*

Does the applicant student have a sibling currently attending MLKCE? No Yes, Sibling Name _____ Grade _____

Does the applicant student have a sibling already on the MLKCE waiting list? No Yes, Sibling Name _____

At this time, are you submitting an application for a sibling of this applicant? No Yes, Sibling Name _____

PARENT/GUARDIAN INFORMATION

Name: _____

Parent/Guardian Last Name

First

Middle

Relationship to child

Address: _____

Street

City

State

Zip

Telephone: _____, _____, _____

Home

Work

Cell

I heard about MLK Charter School from: _____

I agree keep the school updated with:

- Changes of address
- Changes to telephone number
- Changes to applicant student grade level (if the student will be retained in present grade)

Parent/Guardian Signature: _____

Date: _____