



Please complete the following form and return it to the main office no later than Thursday, January 31, 2019. This information is extremely important in helping us plan for the upcoming academic school year and for holding a spot for your child(ren) for the 2019-2020 school year.

Student(s) Name _____

Present Grade/Section _____

Will your child(ren) be returning to Collegiate Charter School of Lowell for the 2019-2020 school year?

- Yes No, this student(s) will NOT be returning in the fall. (If you check this box, a spot will NOT be held for your child(ren) in the fall. If you change your mind and wish to have your child attend CCSL in the fall, you will need to RE-APPLY.)

If your child is not returning to the school, please check the appropriate reason:

- Moving out of the area
- Dissatisfied with the academic program
- Dissatisfied with the school overall
- Transportation problems
- Other _____

Are you considering enrolling additional children at CCSL? If so, which grade(s)?

- Yes No Grade(s) _____ (Please pick up a registration packet in the main office or call us and we will mail you one.)

Do you know of another family that may be interested in enrolling their child(ren) at CCSL?

- Yes No

If YES and the family does not mind, please list their name, address or phone number, and we will contact them.

Parent/Guardian Name _____

Address _____

Phone/Cell Number _____

Print Name _____

Signature _____

Parent/Guardian

Date