ROADS
CHARTER HIGH SCHOOLS

MAIL, FAX, EMAIL OR DELIVER COMPLETED FORM TO:
ROADS Charter High Schools
1495 Herkimer Street, Brooklyn, NY 11233
Phone: 718-280-9819 | Fax: 718-360-5707
Email: enroll@roadsschools.org

APPLICATION FOR SCHOOL YEAR 2014-2015

*PLEASE NOTE: The items marked with an asterisk (*) are required in order to apply to this charter school. All other items are optional.

*SCHOOL SELECTION: YOU MAY APPLY TO MORE THAN ONE

☐ ROADS Charter 1 Brooklyn (1495 Herkimer St., Brooklyn, NY 11233) ☐ ROADS Charter 2 Bronx (1010 Rev. James A. Polite Ave., Bronx, NY 10459)

*ELIGIBILITY

ROADS is open to students who were born in 1998 or 1999, AND have already completed 7th grade, AND are 1 grade or more behind, AND have 11 or fewer high school credits.

☐ Born in 1999 and is in the 8th grade

☐ Born in 1998 and is in the 8th or 9th grade

High school credits (Should be 0-11 credits):_____

Students that apply for the 2014-2015 SY will be eligible for admissions throughout the school year until a seat becomes available. If an applicant turns 17 years old while on the 14-15 SY admissions list they will still be eligible for the Spring semester of 2015. However, if a student gains over 11 credits while on the ROADS admissions list they will no longer be eligible for admission. If you have questions about our rolling admissions policy, please contact: enroll@roadsschools.org.

STUDENT INFORMATION

*Name:_____
*First *Middle *Last Name

*Gender: ☐ Male ☐ Female *Birth Date: (mm/dd/yyyy)_____Community School District (if known):_____

Current School Name:_____

Student Social Security Number:_____ NYC Student ID (OSIS #):_____

PARENT/GUARDIAN INFORMATION

*Name:_____
*First *Last *Relationship to Student

*Address:_____
*Street: *Apartment *City *State *Zip code

Primary Phone:_____ Second Phone:_____ Email Address:_____

Secondary Contact Name:_____Relationship to Student:_____Telephone:_____

SIBLINGS

Siblings receive a preference in the lottery. A separate application must be completed for each child. A sibling is defined as a brother or a sister (including half-siblings, step-siblings and foster siblings) who lives in the same household.

Do you have a sibling **currently attending** the same ROADS Charter High School (s) to which you are applying? ☐ Yes ☐ No

*Name:_____
*First *Last

Date of Birth:_____ School:_____

Do you have a sibling **applying** to the same ROADS Charter High School (s) to which you are applying? ☐ Yes ☐ No

*Name:_____
*First *Last

Date of Birth:_____ School:_____

FOR OFFICE USE ONLY App ID _____ Processed by _____ Date received _____

PREFERECES

ROADS Charter High Schools do not discriminate against any student or limit the admission of any student on the basis of ethnicity, national origin, religion, gender, disability, intellectual ability, measure of achievement or aptitude, athletic ability, or any other ground that would be unlawful if done by a school. No admission test, interview, essay, attendance at an information session, etc., is required to receive or submit an application. However, ROADS Charter High School provides an academic program specifically designed for students who are: involved in the Child Protection System; in temporary housing or homeless; or have been involved in the juvenile or adult justice system. These preferences have been approved by the School's authorizer and are permissible. ROADS reserves the right to request proof of any lottery preference indicated below.

PLEASE CHECK ALL THAT APPLY:

☐ Is in temporary housing or homeless. If checked, ROADS will contact you to help you determine your CSD.

☐ Is currently involved in the child protection system (foster care or child preventive services). If so , please complete the following:

Secondary Contact Name:_____Relationship to Student:_____Telephone:_____

☐ Has ever been involved in the juvenile or adult justice system. If so, ROADS will contact you to verify this preference.

SIGNATURES

I affirm that the information contained in this application is true, complete, and accurate to the best of my knowledge.

*Signature of Parent or Guardian:_____Date:_____

We strive to provide the best education possible to over-age, under-credited students. As part of its evaluation process, ROADS is requesting your consent to access identifiable student level data from the New York City Department of Education and/or your child's previous and future school district. This includes attendance, behavior infractions, credit accumulation, course history, GPA, test scores, and school history from 2003-2019. No data will be reported on an individual student basis. Consent is voluntary and does not affect your eligibility to get into ROADS. If you consent, please sign below.

Signature of Parent or Guardian:_____Date:_____

AGENCY INFORMATION (IF APPLICABLE)

If an agency, i.e., child welfare agency, school, community-based organization helped complete this form, please provide the information below.

Organization:_____Contact Person:_____Tel/Email:_____

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