

Mailing Address (if different from child's address)	Apartment or Unit Number
City	State
	Zip Code

With whom does the student live with? (Choose only ONE)

Parent #1 Only Parent #2 Only Both Parents Legal Guardian
 Other - Please specify: _____

★ County of Residence:

**Please note that this application is for Wake County Residents ONLY. If you are not residing in Wake County, we cannot serve your child.



HOUSEHOLD SECTION

! This section must be completed to process your application

Please list ONLY the child, parents, stepparents, siblings, and/or legal guardians who live with the child

Name	Relationship to Child	Date of Birth	Name of Current School Attending
Child's Name	Applicant Child		
	Parent/Guardian		
	Parent/Guardian		
1.	Sibling		
2.	Sibling		
3.	Sibling		
4.	Sibling		
5.	Sibling		
6.	Sibling		

★ Total number of Family Members