



# KIPP Academy Boston Charter Public School Lottery Application for K2, 1<sup>st</sup>, 2<sup>nd</sup>, 5<sup>th</sup>, 6<sup>th</sup>, 7<sup>th</sup>, 8<sup>th</sup> Grade

My son/daughter wants to participate in KIPP Academy Boston's enrollment lottery on **March 8<sup>th</sup>, 2016** for entry into Grades K2, 1, 2, 5, 6, 7, or 8 in August 2016. He/she is currently a Massachusetts resident. For Kindergarten applicants, he/she will turn 5-years-old on or before September 1, 2016. Lotteries only take place if there are fewer seats available than applications submitted. In a lottery, names are drawn at random to fill open seats in each grade and all names not chosen to fill the open seats will be placed in order on a waitlist. Open seats may not be available for all grades (limited seats at 1<sup>st</sup>, 2<sup>nd</sup>, 6<sup>th</sup>, 7<sup>th</sup>, and 8<sup>th</sup> grade). First priority is given to siblings of current KIPP Academy Boston students and secondarily to Boston residents. **Application must be received by March 4<sup>th</sup>, 2016** to participate in the admission lottery for the 2016-2017 school year.

Mail applications to: KIPP Academy Boston, 5 Maywood St, Roxbury, MA 02119.

### STUDENT INFORMATION

**Please complete this form in blue or black ink only and print neatly. Thank you.**

Applying for grade (circle one): K2   1   2   5   6   7   8

Student Name: \_\_\_\_\_  
Date of birth (Month/Day/Year): \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Gender: Boy Girl (please circle one)  
City of birth: \_\_\_\_\_

Name of child's current school: \_\_\_\_\_ Current grade: \_\_\_\_\_

Does the student have a brother or sister currently attending KIPP Academy Boston?  Yes  No  
If yes, what is the sibling's name? \_\_\_\_\_

(Families must submit a separate application for each child.)  
Does the student have a brother or sister ENTERING the lottery for KIPP Academy Boston?  Yes  No  
If yes, what is the sibling's name? \_\_\_\_\_

### FAMILY INFORMATION

Name of Parent/Guardian: \_\_\_\_\_  
Relationship to Applicant (please circle one): \_\_\_\_\_ Father / Mother / Guardian

Address: \_\_\_\_\_  
Street, Apt # \_\_\_\_\_ City, State \_\_\_\_\_ Zip Code \_\_\_\_\_

Home telephone: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Please list the language(s) spoken in your home: \_\_\_\_\_

### ADDITIONAL INFORMATION

How did you learn about KIPP Academy Boston? (check all that apply)

- Mail    Website    Friend    Family    Teacher    Online Search    Other: \_\_\_\_\_

Agreement signed by parent/guardian (please check boxes to provide consent):

*(Non-consent does not have any bearing on lottery entrance or results.)*

- I agree that *after the lottery*, my child's past and future academic records, test scores, attendance records and other records may be confidentially obtained from the past school(s) of my child by KIPP Academy Boston. This information will in no way influence the lottery for admission.
- I agree that my name and/or my child's name may be posted on the school's website before the lottery drawing in the list of applications that have been received, and after the lottery drawing takes place in the acceptance list and waitlist.

Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_



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*KIPP Academy Boston does not discriminate on the basis of race, color, national origin, sex, creed, ethnicity, sexual orientation, mental or physical disability, age, ancestry, athletic performance, special need, proficiency in English language or foreign language, or prior academic achievement.*

Thank you for your interest in KIPP Academy Boston Charter School! Please read the below tips and information for submitting an application to our admission lottery.

*Please mail applications to:*

KIPP Academy Boston  
5 Maywood St  
Roxbury, MA 02119

### TIPS FOR APPLYING

1. Fill out all information. Print neatly and clearly so we can read it.
2. Forms will only be accepted if hand-delivered, sent by regular mail, or submitted electronically through email ([ehpler@kippma.org](mailto:ehpler@kippma.org)) or our online application (available at <http://kippma.org/enroll/>). Faxed forms will not be accepted.
3. It is your responsibility to ensure that we receive the application. If you have not received a confirmation of receipt of your application by mail or by phone by 5:00PM on Sunday, March 6<sup>th</sup>, you must call (617) 238-7300 by 5:00PM on Monday, March 7<sup>th</sup>, 2016 to verify that your information is on record for our admission lottery.
4. Verify that the child's date of birth and grade are 100% correct. You are responsible for updating any information that changes or is incorrect in your application.
5. Include working phone numbers only – please give us more than one working phone number.
6. Include apartment numbers and 5-digit zip code.
7. Apply for the grade your child will be entering in September 2016.
8. Inform us *immediately* if your address, phone number(s) or e-mail address changes.
9. Schedule your child's health physical in May or June. Every child will need to have a physical exam.
10. If you have a question, problem or concern, please contact us - we are here to help! You can call (617) 238-7300 or e-mail at [ehpler@kippma.org](mailto:ehpler@kippma.org).

**Applications must be received by  
Friday, March 4th, 2016 at 5:00 PM.**