



ADMISSIONS APPLICATION 2022-2023

Date:
Time:
Rec'd by:

If you are applying for multiple students, you must submit an application for EACH child. Please make sure you give an ACCURATE email address that you check regularly. Much of our communication is conducted via email.

Applicant's Status: (Please check one)

New Student New Student with a Sibling currently enrolled at GSIC

If this line is checked, please include name of sibling currently enrolled at GSIC.

 Siblings Name

Student's Name:

 Last

 First

 Middle

Date of Birth: (MM/DD/YY) _____

2022/2023 Grade Level: _____

Name of Previous School : _____

Student's Address:

 Street

 Apt/Unit #

 City

 County

 State

 Zip

Legal Guardians:

 First Name

 Last Name

 First Name

 Last Name

Contact Information:

Primary: _____

 Phone#

 Email

Secondary: _____

 Phone #

 Email

 Parent/Guardian Signature

 Date