



Windsor Charter Academy Letter of Intent

<i>For Office Use Only</i>	
District _____	
Services _____	
WCA Sibling _____	
WCA Staff _____	

Completing this form notifies Windsor Charter Academy of my intent to enroll my child(ren) at Windsor Charter Academy. I understand that submitting this form in no way guarantees my child(ren) being enrolled in Windsor Charter Academy, nor does it obligate me to enroll my child(ren).

Parent/Guardian Signature

Date

Fill out completely.

Full LEGAL Name of Child (Last, First M.I.)	Gender	Date of Birth (MM/DD/YY)	Grade Level to Enter WCA	School Year to Enter WCA	Name of Current School	Name of Current WCA Student (if applicable)

PLEASE PRINT CLEARLY

Parent/Legal Guardian Name: _____

Address: _____ City: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Primary Email Address: _____

Does any child receive special services? YES NO If yes, who receives services? _____

What type of services? (Ex: ILP, IEP, 504) _____

Has any student been tested for Gifted & Talented? ^{YES / NO} / If yes, who? _____ Date Qualified _____

How did you hear about Windsor Charter Academy? _____

Kindergarten Preference: Rank your preference (1, 2, 3). We will do our best to accommodate your request, but this is not a guarantee

_____ Full Day, Tuition-Based Kindergarten

_____ T/TH Full Days with ½ Day Monday p.m.

_____ W/F Full Days with ½ Day Monday a.m.

Fax this form to (970) 833- 5188, email form to diana.stanislav@windsorcharteracademy.org mail or drop off form to WCA, 810 Automation Drive, Windsor, CO 80550. Call (970) 833- 5190 with any questions.

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Date Received		NOTES