

2023-2024 School Year Application

PLEASE PRINT OR TYPE ALL INFORMATION.

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ALL ITEMS MUST BE COMPLETED FOR THE APPLICATION TO BE CONSIDERED.

GPA:

2812 W US 90 • MADISON, FL 32340 (850) 253-2173 OFFICE <u>SCHOOL@JMPHS.ORG</u> EMAIL

STUDENT INFORMATION

LAST NAME	FIRST NAME	MI	MIDDLE NAME		
ADDRESS (*MUST BE STUDE	ENT'S PRIMARY RESIDENCE)	CITY	Ζ		
				011 0	
HOME PHONE NUMBER	DATE OF BIRTH (MM/DD/YY)	CURRENT SCHOOL	GRADE AP	PLYING FOR	
STUDENT RESIDES WIT	THE OBOTH PARENTS OMOTHER	Ofather Oother			
PARENT/GUARDI	AN INFORMATION				
FATHER'S/LEGAL GUARDIA	N'S NAME	MOTHER'S/LEGAL GUARDIAN'S	NAME		
		MOTHER OFLEGAL GUARDIANG			
SPOUSE (IF OTHER THAN MOTHER/FEMALE LEGAL GUARDIAN)		SPOUSE (IF OTHER THAN FATHER/MALE LEGAL GUARDIAN)			
HOME ADDRESS (if different	from student)	HOME ADDRESS (if different from	n student)		
	from student) STATE ZIP CODE	HOME ADDRESS (if different from	a student) STATE	ZIP CODE	
CITY		CITY		ZIP CODE	
CITY				ZIP CODE	
CITY HOME PHONE		CITY		ZIP CODE	
HOME ADDRESS (if different CITY HOME PHONE WORK PHONE CELL PHONE		CITY HOME PHONE		ZIP CODE	

FOR OFFICE

USE ONLY

If you are not the student's birth parent, please provide a **Certified True Copy of the Transfer of Custody/Legal Guardianship.** Documentation indicating the purpose of the transfer of custody may also be requested. Legal Guardians must be:(1) appointed by the court, (2) awarded custody by a court judgment, or (3) granted temporary custody by a state agency.

A NOTARIZED STATEMENT NOT IN COMPLIANCE WITHTHE LAWSGOVERNING CUSTODY BY MANDATE IS NOT CONSIDERED PROOF OF GUARDIANSHIP.