



Wells Community Academy High School

Incoming Freshmen Application

Fall of 2017

Student Information

Student's Last Name	Student's First Name	Gender <input type="radio"/> Female <input type="radio"/> Male Does Your Child have an IEP? <input type="radio"/> Yes <input type="radio"/> No Does your child have a 504 Plan? <input type="radio"/> Yes <input type="radio"/> No
CPS Student ID	Birth Day (MM/DD/YYYY)	
Students Current Elementary School		
Is your Child Hispanic/Latino <input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Black/African American <input type="radio"/> Native Hawaiian/Other Pacific Islander <input type="radio"/> American Indian/Alaska Native	
Race (Choose one or more) <input type="radio"/> White <input type="radio"/> Asian		

Parent/Guarding Information

Parent/Guarding Last Name	Parent/Guarding First Name	
Student's Primary Address		
City	State	Zip Code
Parent/Guarding Email Address		
Primary Phone Number	Secondary Phone Number	

Academic Information

Please Check all that applies

<input type="radio"/> General Admission	<input type="radio"/> Computer Science/ Gaming
<input type="radio"/> JROTC	<input type="radio"/> Teaching

Parent Affirmation – Please Read and Sign

I affirm that the information provided on this form is true and correct. I affirm and understand that the address provided on this form is my child's primary address. I understand that I will have to provide proof of the address on the application at the time of enrollment, and that the validity of my child's application is dependent on that proof. I understand that my child may be subject to immediate removal from the school if admission was gained based on a falsified application. I understand that this application is for my child's participation in the selection process of Wells Community Academy High School and it does not guarantee acceptance. I understand that an incomplete application will not be accepted.

REQUIRED
Signature Parent/Guardian

All children are capable of success

NO EXCEPTIONS! NO EXCUSES



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Application Instructions:

- Application Deadline: Monday, December 14, 2015 before 3:30pm
- Application must include a copy of:
 - NWEA Results
 - Students GPA
 - Attendance Record
 - Discipline Record
- Once application is completed with all necessary documents you can fax them to: 773.534.7078 Att: Mrs. Pond (Admissions Office) or you can mail them to Wells Community Academy High School 936 N. Ashland Ave Chicago, IL 60622, or have your counselor send them via mail run Wells Community Academy High School #35

If you have any question you can contact Mrs. Pond at 773.534.7119 or bspond@cps.edu

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