

**ROME CITY SCHOOLS
TUITION APPLICATION
for 2020-2021 School Year**

Date _____
Phone (Home) _____
Phone (Cell) _____

1. **Student Information**

Student's Name: _____

Date of Birth: _____ Social Security # _____

School & grade attended 2019-2020 school term: _____

School student would attend at your current residence: _____

List other schools attended by this student:

School: _____ Address: _____ Dates: _____

School: _____ Address: _____ Dates: _____

Has this student repeated a grade? ____ If yes, give a reason: _____

Has this student exhibited any learning or behavioral problems in the past? _____

If so, describe: _____

2. **Parent Information:**

Father's Name: _____ Address (with zip): _____

E-mail Address: _____

Mother's Name: _____ Address (with zip): _____

E-mail Address: _____

OR

Other person(s) having legal custody of this student:

Name: _____ Address: _____

Relationship to student: _____ E-mail Address: _____

3. **Parent/Guardian:**

Are you employed with Rome City Schools? _____

If yes, please indicate your location and job title: _____

4. This is a request for _____ to attend the _____ grade at _____

School for the following reasons: _____

5. Please attach records for grades, attendance and discipline for the 2019-2020 school year.

6. I certify that all the above information is true and correct. I understand that a deliberate misrepresentation of the above information may be cause for the application to be disapproved or result in the withdrawal of this student from the Rome City Schools.

(Use back if necessary) Signature of Parent or Guardian: _____