

Marion Charter School
39 Cedar Road, Ocala, FL 34472
352-687-2100
Fax 352-687-2700

2021-2022
Application

Our Web page
<https://www.Marioncharter.org>

Last Name: _____ First Name: _____ Middle Name: _____

Birth Date: ___/___/___ AGE: _____ Grade for 2021-2022 _____ Gender: ___ Female ___ Male

Must be 5 yrs old before Sept 1, 2021 to start Kindergarten

Residence Address: _____ Apt./Bldg _____

City: _____ State _____ Zip _____

Language Survey:

PRIMARY Language spoken by STUDENT ___ English ___ Spanish ___ Vietnamese ___ Korean ___ other

PRIMARY Language Spoken at home by Parent ___ English ___ Spanish ___ Vietnamese ___ Korean ___ other

Parent Contact:

Legal Custody ___ Yes ___ No Lives with Student ___ Yes ___ No Pick up ___ Yes ___ No

Relation to Student: _____ Last Name: _____ Legal First Name: _____

Mailing address (if different): _____ City _____ State _____ ZIP _____

Phone: _____ Email: _____

Parent Contact:

Legal Custody ___ Yes ___ No Lives with Student ___ Yes ___ No Pick up ___ Yes ___ No

Relation to Student: _____ Last Name: _____ Legal First Name: _____

Mailing address (if different): _____ City _____ State _____ ZIP _____

Phone: _____ Email: _____

Custody Alerts:

List any special custody problems. (attach any restraining order or similar judicial pleading that prohibits parental access.
If a court-adopted parenting plan is in effect, attach a copy)

