

**REACH Leadership STEAM Academy**  
**School of Science, Technology, Engineering, Arts and Mathematics**  
**A California Public Charter School**  
**STUDENT LOTTERY AND PRE-ENROLLMENT FORM**  
**2018-19 SCHOOL YEAR**

Now accepting applications for Transitional K, Kindergarten, 1<sup>st</sup>, 2<sup>nd</sup>, 3<sup>rd</sup>, 4<sup>th</sup>, 5<sup>th</sup> and 6<sup>th</sup> grade students for the 2018-19 school year. Located in Riverside, CA, REACH is open to all students in California. Any student who meets the following two criteria may apply:

1. The student is a resident of California (Note: Preference will be given to students residing in the Riverside Unified School District boundaries and siblings of current students). **Residency Proof in the form of a copy of a public utility bill in the name of the parent/guardian who resides with the student.**
2. Student is at least five years old prior to December 2nd, 2018.

Seats are limited. Apply Immediately. The application deadline is: **April 9th, 2018**

**Student Information:**

Full Name: \_\_\_\_\_ **Grade in Fall 2018** \_\_\_\_\_

Male or Female: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

Home Address: \_\_\_\_\_ (street address (apt #))  
\_\_\_\_\_ (city, state, zip)

Current School: \_\_\_\_\_ City of School: \_\_\_\_\_

**Parent Information:**

Mother/Guardian Full Name: \_\_\_\_\_  Lives with child

Daytime Number: \_\_\_\_\_ Cell Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Father/Guardian Full Name: \_\_\_\_\_  Lives with child

Daytime Number: \_\_\_\_\_ Cell Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Please indicate whether the applicant's sibling is applying to REACH Leadership STEAM Academy for the Fall of 2018.

**Each child must submit a separate application.**

Sibling's Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Age: \_\_\_\_\_

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REACH Leadership STEAM Academy does not charge tuition, is non-sectarian in admission policies, programs, and all other operations, and does not discriminate against any student, parent, community member, or employee on the basis of race, ethnicity, national origin, religion, gender, sexual orientation, or disability.

**Office Use Only:** Date/Time Rec'd: \_\_\_\_\_

Rec'd By: \_\_\_\_\_

Copy of Residency Proof Attached: