

Student's Name:

PO Box 181 Nazareth, PA 18064 Phone (610) 365-8850 Fax (610) 365-8852

Preferred Name:

<u>Lehigh Learning Academy – New Student Enrollment Form</u>

(Please complete prior to intake)

Jean Strainer	i i di di i da i i di i di i di i di i
10 Digit PA Secure ID:	Form Submitted on:
School District of Residence:	
Anticipated Graduation Month	/ Year: Form Submitted by:
Grade:	
Program Requested:	Start Date:
Student's Classification:	
If Student is identified with a Disability, Level of Support needed:	
If Applicable - IEP Due By:	RR Due By:
Credit and Graduation Status:	
Student will graduate based on IEP Transition Goals:	
Student has a Block or Modified Block Schedule (Please Check):	
Student currently attends a Vocational-Technical Program (Please Check):	
Student/Family are interested in Work Study/Experience Options (Please Check):	
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Keystone Exam Status: Algebra:	Biology: Literature:
Student has satisfied alternative pathways, Act 158 requirements, obtained a parental	

Please submit the following items with this Enrollment Form:

opt-out, or is otherwise excused from re/taking Keystone Exams:

- Copies of Health Records
- Current RR (If Applicable)
- Current IEP (If Applicable)
- Transcript and Transcripts from previous placements
- Current Courses and Grades and Grade 9-12 Report Cards
- Free/Reduced Lunch Direct Certification Letter (If Applicable)