

**Winston-Salem Street School
Student Application**

415 W. Clemmonsville Road • Winston-Salem, NC • 27127
Phone 336.788.3376 • Fax 336.788.3336

Date _____

Name _____
(Last) (First) (Middle)

Address _____

City _____ State _____ Zip _____

Telephone (1) _____ (2) _____ Parent/guardian email address _____

Personal

Birth date _____ Age _____ Male/Female (circle one)

Social Security Number _____

School last attended _____ Last grade attended _____

School address _____

Why did you leave? _____

Best subject(s) _____

Most difficult subject _____

Future goal _____

Favorite thing to do _____

Do you have a social worker? Yes No (circle one) If yes, provide the name of social worker

Have you ever been to court? Yes No (circle one) If yes, for what reason?

Family Information

Parent/Guardian Name _____

Address _____

Parent's employer, address, phone

Do you, the student, have any children? If yes, please write name(s) and birth date(s)

Do you share a household? Please list names of all who live with you and relationship to you

Medical

Condition at birth _____

Serious accidents _____

Serious illnesses _____

Immunizations: Bring a copy of your immunizations to your interview

Allergies _____

Prescription drugs: name of medicine, what it's for _____

Name of doctor or clinic _____

Phone number _____

When a parent cannot be reached in an emergency, who should be called?

Name _____

Phone _____

Relation to you _____

Required if student is less than 18 years old

Parent/Guardian signature _____

Parent/Guardian printed name _____

The Winston-Salem Street School admits students of any race, color, and national or ethnic origin to all the rights and privileges, programs, and activities generally accorded or made available to the students at this school. The school does not discriminate on the basis of race, color, or national origin in the administration of its education policies and other school administrative programs.