



APPLICATION FORM

STUDENT NAME _____
first | *last*

DATE OF BIRTH _____
month | *day* | *year*

GENDER male RACIAL/ETHNIC BACKGROUND white/non-hispanic
 female *(check one)* black/non-hispanic
 hispanic
 asian/pacific islander
 american indian/alaska native

HOME ADDRESS _____ Chicago, Illinois _____
street | *city* | *zip*

PARENT/GUARDIAN NAME _____
first | *last*

PHONE _____
home | *work*

PARENT/GUARDIAN SIGNATURE _____
signed | *date*

CURRENT SCHOOL _____
name of school | *grade level*

TYPE OF LOTTERY Random Lottery
(check one) Sibling Lottery *(check only if*
 at least one brother/sister in
 the same household is currently
 *enrolled at Drummond School)**
 Proximity Lottery *(check only*
 if you live within 1.5 miles of
 Drummond School)

NAME OF SISTER/BROTHER _____
 * CURRENTLY ENROLLED *first* | *last*
 AT DRUMMOND SCHOOL

All students with disabilities are eligible to apply to Drummond School. Appropriate services within programs will be provided to meet individual needs. Requests received after December 21, 2007 will not be considered.