

# Reynoldsburg City Schools

**ALL FORMS  
DUE BY  
JUNE 8, 2018**

**STEM School of Choice Interest Form**  
(honored on a first-come-first- served basis)

2018 - 2019

- Herbert Mills STEM Elementary (Focus: Social Sciences: governments, economics, people in societies)
- Summit Road STEM Elementary (Focus: Science: life, physical, earth, and space)
- STEM @ Baldwin Middle (grades 5-8) (Focus: Design – computer science, engineering, and digital, including Science – physical, life, environmental, and health)

Please print clearly and SIGN the bottom of the application. COMPLETE BOTH SIDES OF FORM, a separate form for each student. Full enrollment must be completed at time of application if student is not currently attending Reynoldsburg City Schools.

FORMS MUST BE RETURNED TO THE WELCOME CENTER LOCATED AT 1555 GRAHAM ROAD.

**STUDENT INFORMATION**

First Name:	Last Name:	Gender:    Male    Female
		Date of Birth:
2018-19 Grade Level:	17-18 School Attended:	
Ethnicity:    Caucasian    African-American    Asian    Hispanic    Other:		

**STUDENT ACADEMIC HISTORY**

Does the student have an IEP?	YES	NO	English as Second Language (ESL Program):	YES	NO
Does the Student have an RTI plan?	YES	NO	Language:		

**PARENT/GUARDIAN 1 DEMOGRAPHIC INFORMATION**

First Name:	Last Name:	Relation to Student:
Primary Phone (with area code):	E-mail (please print clearly):	
Home Address:	Receive Mailings? YES    NO	
Interested in volunteering: <input type="checkbox"/> In the Classroom <input type="checkbox"/> Extracurricular projects / activities		
Special Skills or talents to share:		

**PARENT/GUARDIAN 2 DEMOGRAPHIC INFORMATION**

First Name:	Last Name:	Relation to Student:
Primary Phone (with area code):	E-mail (please print clearly):	
Home Address:	Receive Mailings? YES    NO	
Interested in volunteering: <input type="checkbox"/> In the Classroom <input type="checkbox"/> Extracurricular projects / activities		
Special Skills or talents to share:		

**TECHNOLOGY SURVEY**

Does your student have reliable internet access at home?	YES	NO
Parent / Guardian Signature:	Date:	

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**STUDENT NAME**

First Name:

Last Name:

**PARENT QUESTIONNAIRE**

What would you like for us to know about your child?

What are your hopes for your child regarding the STEM program?

**STUDENT QUESTIONNAIRE**

Explain why you would like to attend the STEM program?

How would your classmates describe you?

Home Address:

Receive Mailings?

YES NO

**OFFICE USE ONLY**

Form Received by:

Waitlist Date:

Received Time Stamp

Accepted Date:

Moved from Waitlist

placed

Declined seat