



# The Ethical Community Charter School

95 Broadway,  
Jersey City, NJ 07306  
201-984-4151  
info@teccsjc.org

## APPLICATION FOR 2018-2019 SCHOOL YEAR

Application valid for 2018-2019 school year only

### STUDENT INFORMATION (Student must be 5 years old by October 1, 2018 to be eligible for Kindergarten)

**Grade Student will enter in Fall 2018: (please circle one) K 1 2 3 4 5 6 7 8**

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ M \_ F \_  
(First Name) (Middle Name) (Last Name)

Address \_\_\_\_\_ Apt. # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Telephone \_\_\_\_\_

Place of birth: City \_\_\_\_\_ State \_\_\_\_\_ Country \_\_\_\_\_

Ethnicity:  African- American  Asian  White  Native- American  Hispanic  Other (please specify) \_\_\_\_\_

Home Language:  English  Spanish  Other (please specify) \_\_\_\_\_

Current School Name & Address, if any \_\_\_\_\_

### PARENT/GUARDIAN INFORMATION

Name \_\_\_\_\_ Home Phone# \_\_\_\_\_

Relationship \_\_\_\_\_ Cell Phone# \_\_\_\_\_

Address \_\_\_\_\_ Apt # \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

E-Mail \_\_\_\_\_ Work Phone# \_\_\_\_\_

### SECOND PARENT/GUARDIAN INFORMATION

Name \_\_\_\_\_ Home Phone# \_\_\_\_\_

Relationship \_\_\_\_\_ Cell Phone# \_\_\_\_\_

Address \_\_\_\_\_ Apt # \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

E-Mail \_\_\_\_\_ Work Phone# \_\_\_\_\_

**BROTHERS AND SISTERS HAVE PREFERENCE IN THE ADMISSIONS LOTTERY, BUT ONLY IF A SEPARATE APPLICATION IS SUBMITTED FOR EACH CHILD AND INFORMATION IS ALSO PROVIDED BELOW.**

Name \_\_\_\_\_ Grade \_\_\_\_\_

Name \_\_\_\_\_ Grade \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Email or fax to: maria.castillo@teccsjc.org

(Fax# 201-200-9931)

For information please call: 201-984-4151

FOR OFFICE USE ONLY

Date received:

Received by:

Lottery #: