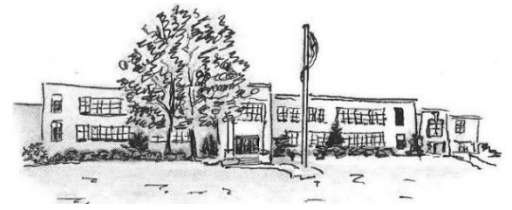


# CHATTANOOGA SCHOOL FOR THE LIBERAL ARTS

Office of Admissions

6579 East Brainerd Rd. Chattanooga, TN 37421

423.855.2614 | csla\_admissions@hcde.org



## *Application for 1<sup>st</sup>-8<sup>th</sup> Grades 2020-21*

### Student Information

Name: \_\_\_\_\_ Name Student Goes By: \_\_\_\_\_

First Middle Last

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Date of Birth: \_\_\_/\_\_\_/\_\_\_ Gender: \_\_\_ Male \_\_\_ Female Race: \_\_\_\_\_

Current School: \_\_\_\_\_ Grade 2019-2020: \_\_\_\_\_

Hamilton County school student is zoned for (if different than above): \_\_\_\_\_

### Parent/Guardian Information

**Mother/Guardian Name:** \_\_\_\_\_

Cell Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Email Address: \_\_\_\_\_

Address (if different than student): \_\_\_\_\_

Employer: \_\_\_\_\_ Work Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

**Father/Guardian Name:** \_\_\_\_\_

Cell Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Email Address: \_\_\_\_\_

Address (if different than student): \_\_\_\_\_

Employer: \_\_\_\_\_ Work Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

**Student Lives with:** \_\_\_ Parents \_\_\_ Mother \_\_\_ Father \_\_\_ Legal Guardian

**Student has a sibling CURRENTLY enrolled at CSLA:** \_\_\_ Yes \_\_\_ No If yes, name: \_\_\_\_\_

### Parent/Guardian Acknowledgements

- I understand that if my student enrolls at CSLA, I will be required to attend two parent conferences, volunteer a minimum of 18 hours, and adhere to the HCDE Magnet School requirements each year. Failure to meet these requirements is grounds for loss of the seat at CSLA and at other HCDE Magnet Schools.
- I understand all CSLA students are given high academic expectations, take a foreign language and participate in various field learning experiences. I can learn about the Paideia Philosophy at [www.csla.hcde.org](http://www.csla.hcde.org).
- I understand that if my student is not offered admission, I will receive an email with instructions about how to keep my application active each year in late January. I am responsible for notifying CSLA of any changes in contact information such as address, email or phone number.
- Students are added to the wait list by the date the application is received. You may mail, email or return this application in person to CSLA. Please contact CSAS at [www.csaslower.hcde.org](http://www.csaslower.hcde.org) for an application to their school.

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

Application received on \_\_\_\_\_ at \_\_\_\_\_ by \_\_\_\_\_  
Admission Status: \_\_\_ A \_\_\_ DC \_\_\_ RM Date: \_\_\_\_\_ Reason: \_\_\_\_\_