

OFFICE USE ONLY

GRADE: # _____

ENROLLED SIBLING: Y ___ N ___

Grade of Sibling _____

Name of Sibling _____



TAOS INTEGRATED SCHOOL OF THE ARTS

Lottery Application for 2019-2020

Please complete all requested information below and then:

Mail to: TISA
P.O. Box 668
Taos, NM 87571

Deliver in person to: TISA
118 Toalne Street
Taos, NM 87571

FAX: TISA
(575) 758-7766

All applications **must be postmarked on or before April 15, 2019** or delivered to TISA by **Thursday, April 15th**. The lottery drawing will be held at TISA on **Tuesday, April 23rd at 12:00p.m.** All applications postmarked after **April 15, 2019** or received after **April 15, 2019** will be added to the end of the waiting list established by the lottery drawing. Completion of this form does not prevent or guarantee a student's enrollment in TISA. For more information, please call TISA at (575) 758-7755.

Student Name (Print): _____
 First **Middle** **Last**

Date of Birth: _____ **Age:** _____

Student's current grade level: _____

CIRCLE GRADE LEVEL APPLYING FOR THE SCHOOL YEAR (2019-2020):

Kindergarten* 1st grade 2nd grade 3rd grade 4th grade 5th grade 6th grade 7th grade 8th grade

**Please note: A child must be 5 years of age on or before September 1, 2019 in order to enroll in Kindergarten.*

Does this child have a sibling applying for the TISA lottery for the 2019-2020 school year? NO ___ YES ___

Sibling Name _____ **Grade applying for** _____

Student's physical address (number and street name, city, state and zip):

Student's mailing address (if different from above):

Parent/Guardian name(s) (Print): _____

Home phone: _____ **Work phone:** _____ **Cell phone:** _____

Email address: _____

By signing below, I certify that I am the parent or legal guardian of the student named in the application and that all information provided is true and correct to the best of my knowledge.

Parent/Guardian Signature: _____ **Date:** _____