



OFFICE USE ONLY

GRADE: # _____
ENROLLED SIBLING: Y ___ N ___
Grade of Sibling _____
Name of Sibling _____

Lottery Application for 2020-2021

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
Email to: ashley@tisataos.org

All applications must be postmarked on or before **April 15th, 2020** or delivered to TISA by **Wednesday, April 15th**. The lottery drawing will be held on **Tuesday, April 21st, 2020**. All applications postmarked after **April 15th, 2020** or received after **April 15th, 2020** 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 (2020-2021):

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, 2020 in order to enroll in Kindergarten.*

Does this child have a sibling applying for the TISA lottery for the 2020-2021 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: _____

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Received by: _____

Date received: _____