

FRANKLIN TOWNE CHARTER HIGH SCHOOL  
5301 Tacony Street, Box 310  
Philadelphia, PA 19137  
215-289-5000

STUDENT APPLYING FROM FRANKLIN TOWNE ELEMENTARY? Yes or No  
DOES STUDENT HAVE A SIBLING AT FRANKLIN TOWNE CHARTER HIGH SCHOOL? Yes or No

STUDENT INFORMATION:

LAST NAME : \_\_\_\_\_ FIRST NAME \_\_\_\_\_ M.I \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_ SEX \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_

ZIP CODE : \_\_\_\_\_ HOME TELEPHONE: \_\_\_\_\_

PARENT/GUARDIAN INFORMATION

STUDENT LIVES WITH: MOTHER \_\_\_\_\_ FATHER \_\_\_\_\_ BOTH \_\_\_\_\_

GUARDIAN \_\_\_\_\_ RELATIONSHIP TO STUDENT \_\_\_\_\_

MOTHER: \_\_\_\_\_ DAYTIME NUMBER: \_\_\_\_\_

FATHER: \_\_\_\_\_ DAYTIME NUMBER: \_\_\_\_\_

GUARDIAN: \_\_\_\_\_ DAYTIME NUMBER: \_\_\_\_\_

PARENT/GUARDIAN EMAIL ADDRESS: \_\_\_\_\_

CURRENT SCHOOL INFORMATION

SCHOOL CURRENTLY ATTENDING \_\_\_\_\_

CURRENT GRADE \_\_\_\_\_ GRADE APPLYING FOR: \_\_\_\_\_

SIBLING NAME: \_\_\_\_\_

PARENT/GUARDIAN SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**OFFICIAL USE ONLY:**

DATE RECEIVED: \_\_\_\_\_ RECEIVED VIA: \_\_\_\_\_

APPLYING FOR SCHOOL YEAR \_\_\_\_\_