



The Center for Advanced Studies and the Arts
STUDENT APPLICATION
 23561 Rosewood * Oak Park, Michigan 48237

Print or type: **APPLICANT (this application must be turned in to your counselor)**

Student's Legal Last Name _____ Legal First Name _____

Grade level **NEXT** year _____ Male Female Birth date _____

Have you ever attended CASA? Yes No If so, what year(s) did you attend? _____

Print or type: **INFORMATION TO BE FILLED OUT BY PARENT / GUARDIAN**

Address _____ Apt.# _____ City _____ Zip _____

Home Phone _____

Please indicate student's ethnic / race:

Asian Black Hispanic Native American Indian White Other _____

Print or type: **PARENT / GUARDIAN (Adults / Persons you live with)**

1. Last Name _____ First Name _____ Relationship _____

Employer _____ City _____ Work Phone _____

Email address _____ Cell _____

2. Last Name _____ First Name _____ Relationship _____

Employer _____ City _____ Work Phone _____

Email address _____ Cell _____

Custody Restrictions? Yes No If YES, release only to: _____
(attach copy of court order)

Print or type: **EMERGENCY CONTACT**

Person (other than parent / guardian) to be contacted in case CASA cannot contact parent / guardian:

Name _____ Address _____

Relationship _____ Phone number _____

Print or type: **MEDICAL INFORMATION**

Person (other than emergency contact) to be called in case of accident or serious illness during the school day:

Name _____ Address _____

Relationship _____ Phone number _____

Do you have any current restricting medical / health issues (including allergies)? Yes No

If YES, please explain or specify:

Are you under the care of a health care professional? Yes No

If YES, please specify the condition and name of health care professional: _____

List any medication you are taking on a regular basis

IMPORTANT - PLEASE READ

As a parent / guardian / student:

- As parent / guardian, I approve the above information and give my consent to for my son / daughter to enroll at CASA.
- I understand that CASA is part of a six-school consortium, and that the CASA schedule may differ from the sending school. Students are responsible for attending classes when CASA is in session, even if the sending school is not in session.
- I understand that the standards for CASA academics and attendance are rigorous, and that students who attend CASA are expected to perform at a level indicative of those standards.
- I recognize that classes and school staff are scheduled based upon the numbers of students applying for those classes. By signing this application, I am indicating that I will remain in, and complete, the classes for which I have applied.

I have read, understand, and agree to **ALL** of the above.

Student _____ Date _____

Parent / Guardian _____ Date _____

TO BE COMPLETED BY SENDING SCHOOL COUNSELOR

Counselor Name _____ High School _____

Overall GPA _____ Does student have attendance problem? Yes No

Has student been suspended? Yes No If yes, why? _____

IEP? Yes (*If yes, please attach*) No 504 Plan? Yes (*If yes, please attach*) No

CASA COURSE SELECTIONS

2011-2012 SCHOOL YEAR

(This sheet must be turned in with the application)

FIRST SEMESTER

FIRST CHOICE 6th HOUR

SECOND CHOICE 6th HOUR

FIRST CHOICE 7th HOUR

SECOND CHOICE 7th HOUR

SECOND SEMESTER

FIRST CHOICE 6th HOUR

SECOND CHOICE 6th HOUR

FIRST CHOICE 7th HOUR

SECOND CHOICE 7th HOUR

PLEASE NOTE: Every attempt will be made to accommodate student request for class schedules, however, CASA reserves the right to change, alter, or deny student requests based on class sizes, inability to schedule classes according to the CASA Course Catalog, or any other unforeseen problems.

Also – Some classes are limited in size. Returning CASA students will receive preferential assignment in those classes. In order to accommodate requests, schedules should be turned into CASA by May 6, 2011.