

		parate application is required for each student.			
		MI: Last Name:			
			Apt. #:		
			Zip Code:		
Home Phone:	Cell Phone:		_ Work Pho	one:	
	<u>Please indicate g</u>	rade level and	d site:		
	2023-24 Grade (Circle One)	: K 1 2	3 4 5	6 7 8	
	Star Academy - Grades K-8 echnology Drive, 55811		gh Academ Raleigh Stre	<u>y - Grades K-5</u> eet, 55807	
	*Busing boundaries in	place for gra	des K-5		
Are there any siblings atter	nding or applying to Duluth Ec	dison Charter S	Schools? <b>(S</b> e	eparate Application Requir	ed)
Yes (Applyir	ng)Yes (Attending)	No (No	ne Applying	g/Attending)	
Sibling Name			_ Grade 2	2023-24	
Sibling Name			_ Grade 2	2023-24	
Parant/Guardian Nama					
Email Address:					
enrolled unless numbers e described in the Duluth Minnesota to enroll in Dulu		case selection olution dated	will be ma I October	de according to the proc	edure
	ust be five years of age by Se	=		exception to the age	
	t be at least six years of age o e if the student has completed			exception to the age	
Application	Duli	uth Edison Cho 1 Technology uth, MN 5581 N: Enrollment	Drive 1	Is	
	Applications may also be	e faxed to: (2	18) 728-207	5	
	ication of receipt of this application, please contact Enrollme	ent Coordinate	or Sasha Go	ohde at 728-9556 ext. 5006.	o†
	For additional information	Caii (216) 726-	7336 EXI. 30	500	
		e use only	-7336 EXI. 30		